OfficeMate Administration User's Guide

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Getting Started

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- Logging into OfficeMate, 18
- Setting Up OfficeMate, 20
- Setting Up Security, 97
- Setting Up ExamWRITER, 110
- Encrypting & Decrypting the Database, 127
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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:

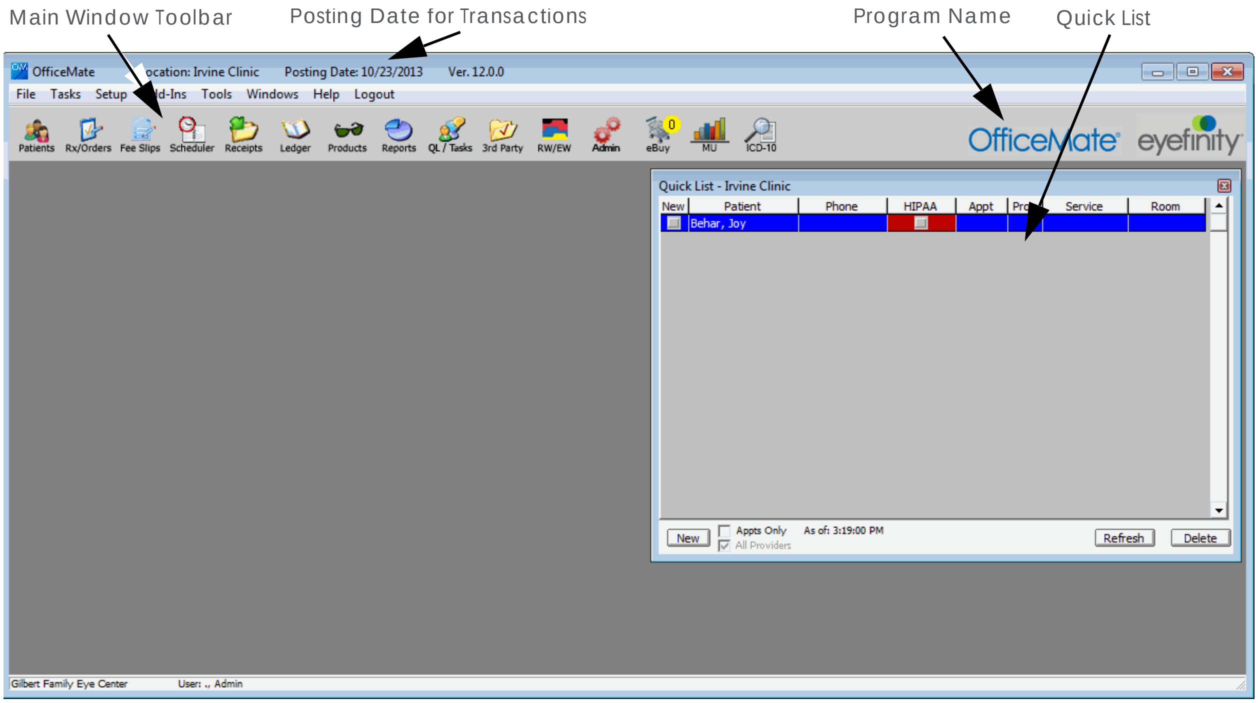
- *Training Videos*. These Internet-based, prerecorded training videos should be viewed by all OfficeMate users. Go to http://www.eyefinity.com/education-and-support/Support-Community.html and log into the Eyefinity Support Community to view OfficeMate training sessions.
- *Eyefinity Support Community*. 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 http://www.eyefinity.com/education-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


Main Window Toolbar
Posting Date for Transactions
Program Name
Quick List
OfficeMate
ocation: Irvine Clinic
Posting Date: 10/23/2013
Ver. 12.0.0
File
Tasks
Setup
d-Ins
Tools
Windows
Help
Logout
Patients
Rx/Orders
Fee Slips
Scheduler
Receipts
Ledger
Products
Reports
QL / Tasks
3rd Party
RW/EW
Admin
0
eBuy
MU
ICD-10
OfficeMate
eyefinity
Quick List - Irvine Clinic
New
Patient
Phone
HIPAA
Appt
Pro
Service
Room
Behar, Joy
New
Appts Only
All Providers
As of: 3:19:00 PM
Refresh
Delete
Gilbert Family Eye Center
User: ., Admin

Explanation of Navigation Schemes

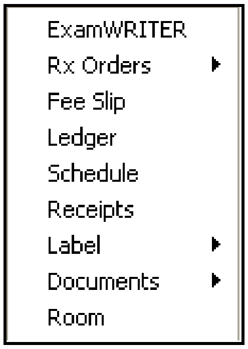
OfficeMate has many unique navigation schemes. Eyefinity highly recommends familiarizing yourself with the OfficeMate navigation schemes in order to more quickly and efficiently navigate through OfficeMate and perform tasks.

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**

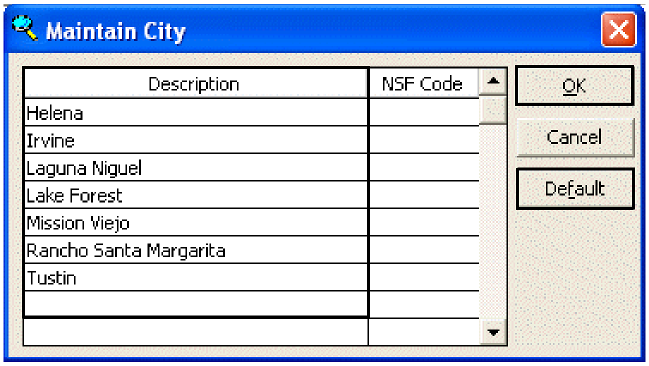
❖ Right-click the Patient Demographic, Eyewear Order, Soft Lens Order, Hard Lens Order, Fee Slip, Patient Ledger, and Receipts & Adjustments window title bars or on a patient in the Quick List window to open a shortcut window with options to open the current patient's Patient Demographic, Rx Eyewear,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

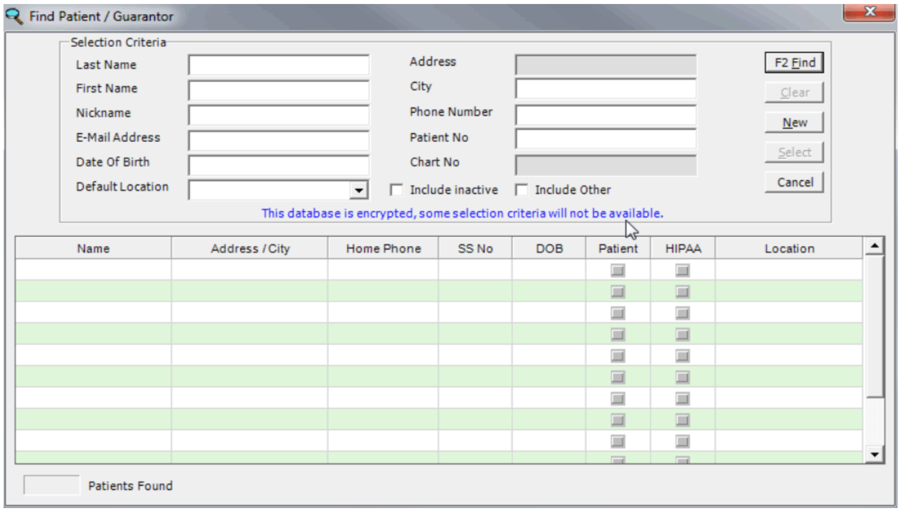


Description	NSF Code
Helena	
Irvine	
Laguna Niguel	
Lake Forest	
Mission Viejo	
Rancho Santa Margarita	
Tustin	

▶ 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.


Find Patient / Guarantor
Selection Criteria
Last Name
First Name
Nickname
E-Mail Address
Date Of Birth
Default Location
Address
City
Phone Number
Patient No
Chart No
☐ Include inactive
☐ Include Other
F2 Find
Clear
New
Select
Cancel
Name
Address / City
Home Phone
SS No
DOB
Patient
HIPAA
Location
Patients Found

This database is encrypted, some selection criteria will not be available.

▶ To use other keyboard shortcuts

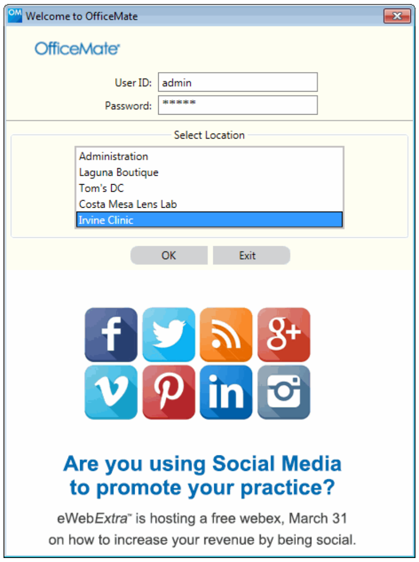
- Press the **Alt** key and the underlined letter in a button or tab to open the window that would open if you clicked the button or tab with your mouse.
  - For example, press the **Alt** and **L** keys at the same time in the Fee Slip window to open the Patient Ledger window.
  - For example, press 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 97. 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**.



User ID: admin
Password: *****

Select Location
- Administration
- Laguna Boutique
- Tom's DC
- Costa Mesa Lens Lab
- Irvine Clinic

Are you using Social Media to promote your practice?

eWeb*Extra*™ is hosting a free webex, March 31 on how to increase your revenue by being social.

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
- Maintaining Providers, Staff, & Other Resources, 51
- Maintaining Add-In Programs, 60
- Setting Up Preferences, 61
- Setting Up Sales Tax Codes, 84
- Setting Up Location Inventory Preferences, 86
- Setting Up Discounts & Packages, 90

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

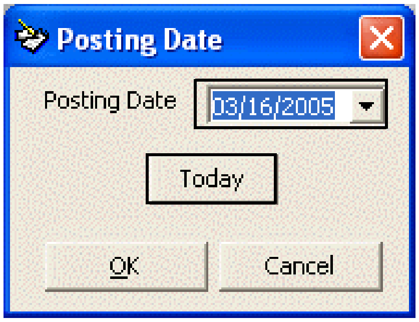
- When you open OfficeMate, the posting date is the same as your computer date. If you change the posting date, it will revert back to the computer date when you close OfficeMate or log out of OfficeMate. Changing the posting date on your computer does not affect the computer date on your computer or 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.



Posting Date: 03/16/2005

3. Click **OK**.

Setting Up the Printer

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

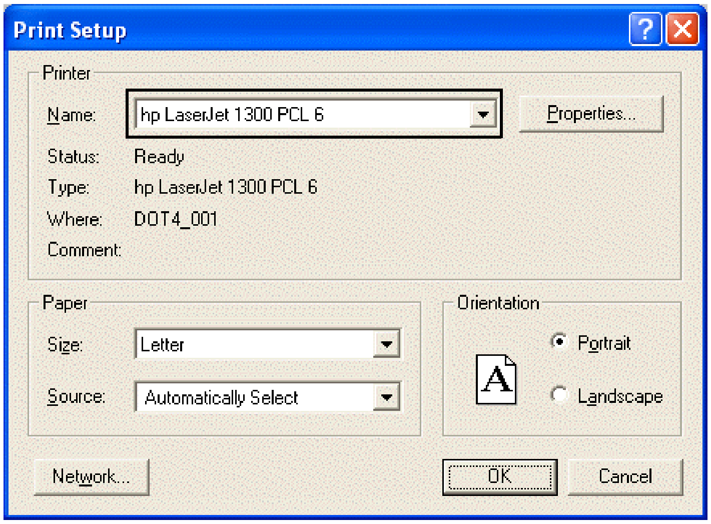
- To select a printer, 21
- To change the printer's document properties, 22
- To select the paper size and source, 22
- To change the paper orientation, 23

▶ 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.



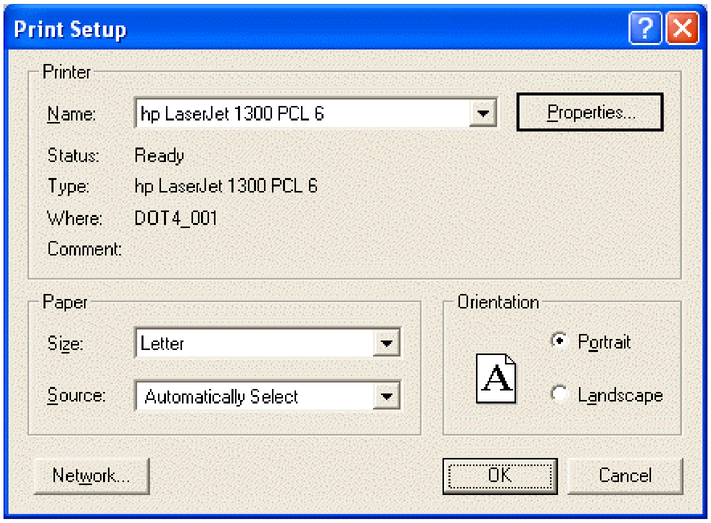
Name: hp LaserJet 1300 PCL 6
Status: Ready
Type: hp LaserJet 1300 PCL 6
Where: DOT4_001
Comment:
Size: Letter
Source: Automatically Select
● Portrait
○ Landscape

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

To change the printer's document properties

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

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.



Name: hp LaserJet 1300 PCL 6
Status: Ready
Type: hp LaserJet 1300 PCL 6
Where: DOT4_001
Comment:
Size: Letter
Source: Automatically Select
● Portrait
○ Landscape

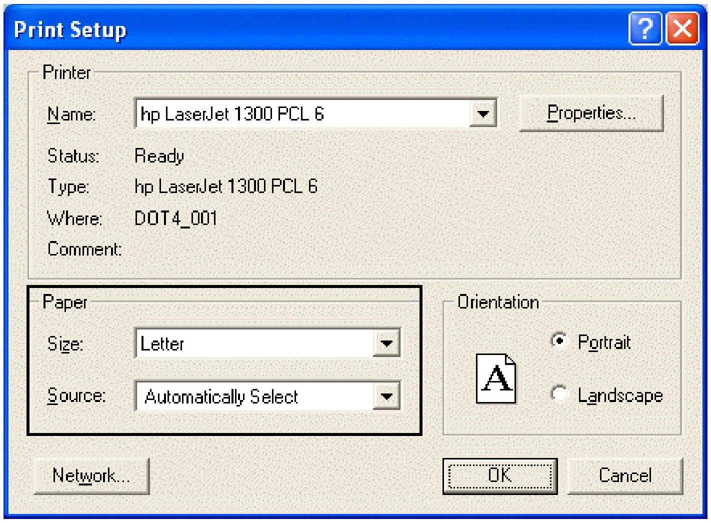
The Document Properties window opens.

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.



Print Setup

Printer

Name: hp LaserJet 1300 PCL 6

Status: Ready

Type: hp LaserJet 1300 PCL 6

Where: DOT4_001

Comment:

Paper

Size: Letter

Source: Automatically Select

Orientation

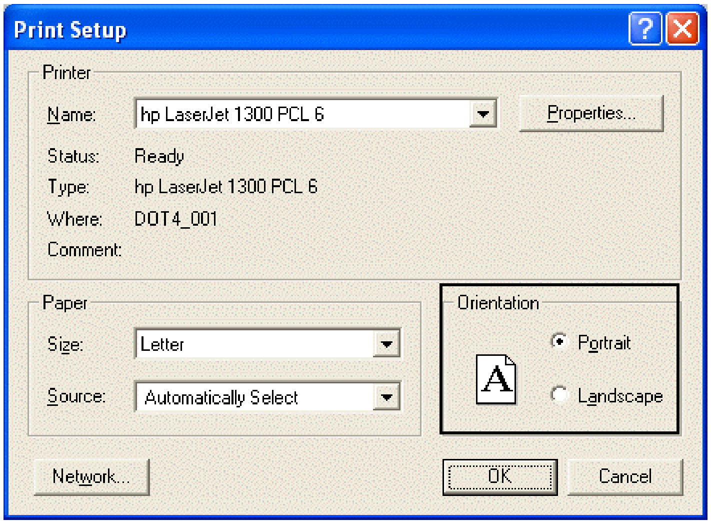
● Portrait

○ Landscape

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.



Print Setup

Printer

Name: hp LaserJet 1300 PCL 6

Status: Ready

Type: hp LaserJet 1300 PCL 6

Where: DOT4_001

Comment:

Paper

Size: Letter

Source: Automatically Select

Orientation

● Portrait

○ Landscape

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

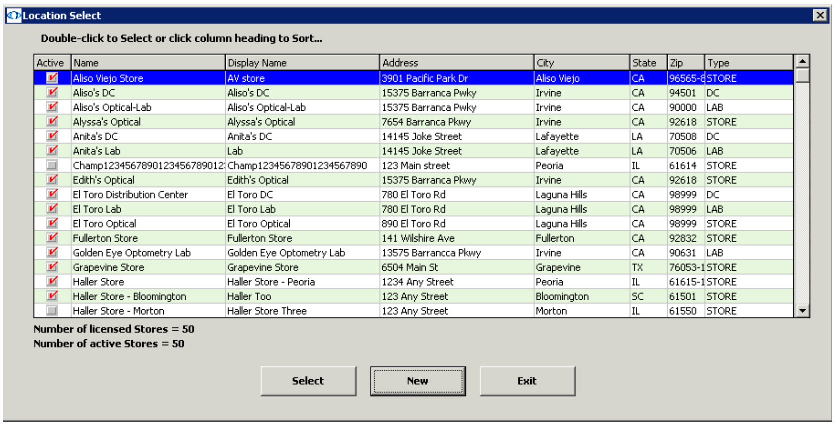
▶ To open the Location Maintenance window

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.



Double-click to Select or click column heading to Sort...

Active	Name	Display Name	Address	City	State	Zip	Type
☑	Aliso Viejo Store	AV store	3901 Pacific Park Dr	Aliso Viejo	CA	96565-8	STORE
☑	Aliso's DC	Aliso's DC	15375 Barranca Pwky	Irvine	CA	94501	DC
☑	Aliso's Optical-Lab	Aliso's Optical-Lab	15375 Barranca Pwky	Irvine	CA	90000	LAB
☑	Alyssa's Optical	Alyssa's Optical	7654 Barranca Pkwy	Irvine	CA	92618	STORE
☑	Anita's DC	Anita's DC	14145 Joke Street	Lafayette	LA	70508	DC
☑	Anita's Lab	Lab	14145 Joke Street	Lafayette	LA	70506	LAB
☐	Champ1234567890123456789012	Champ12345678901234567890	123 Main street	Peoria	IL	61614	STORE
☑	Edith's Optical	Edith's Optical	15375 Barranca Pkwy	Irvine	CA	92618	STORE
☑	El Toro Distribution Center	El Toro DC	780 El Toro Rd	Laguna Hills	CA	98999	DC
☑	El Toro Lab	El Toro Lab	780 El Toro Rd	Laguna Hills	CA	98999	LAB
☑	El Toro Optical	El Toro Optical	890 El Toro Rd	Laguna Hills	CA	98999	STORE
☑	Fullerton Store	Fullerton Store	141 Wilshire Ave	Fullerton	CA	92832	STORE
☑	Golden Eye Optometry Lab	Golden Eye Optometry Lab	13575 Barrancca Pkwy	Irvine	CA	90631	LAB
☑	Grapevine Store	Grapevine Store	6504 Main St	Grapevine	TX	76053-1	STORE
☑	Haller Store	Haller Store - Peoria	1234 Any Street	Peoria	IL	61615-1	STORE
☑	Haller Store - Bloomington	Haller Too	123 Any Street	Bloomington	SC	61501	STORE
☐	Haller Store - Morton	Haller Store Three	123 Any Street	Morton	IL	61550	STORE

Number of licensed Stores = 50
Number of active Stores = 50

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 84.

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	• 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:

For more information on setting up the OfficeMate VSP Interface, go to Setting Up the OfficeMate VSP Interface Manually on page 514.

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.

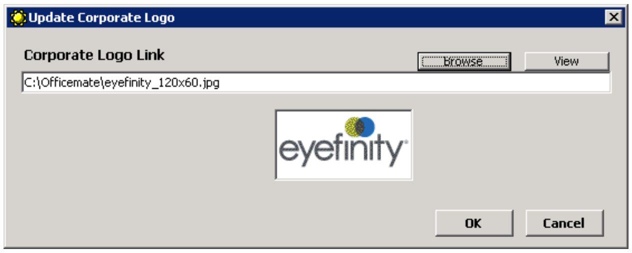
19. If you are using the OfficeMate Lab Interface, select the location's default lab from the **Default Lab** drop-down menu.

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

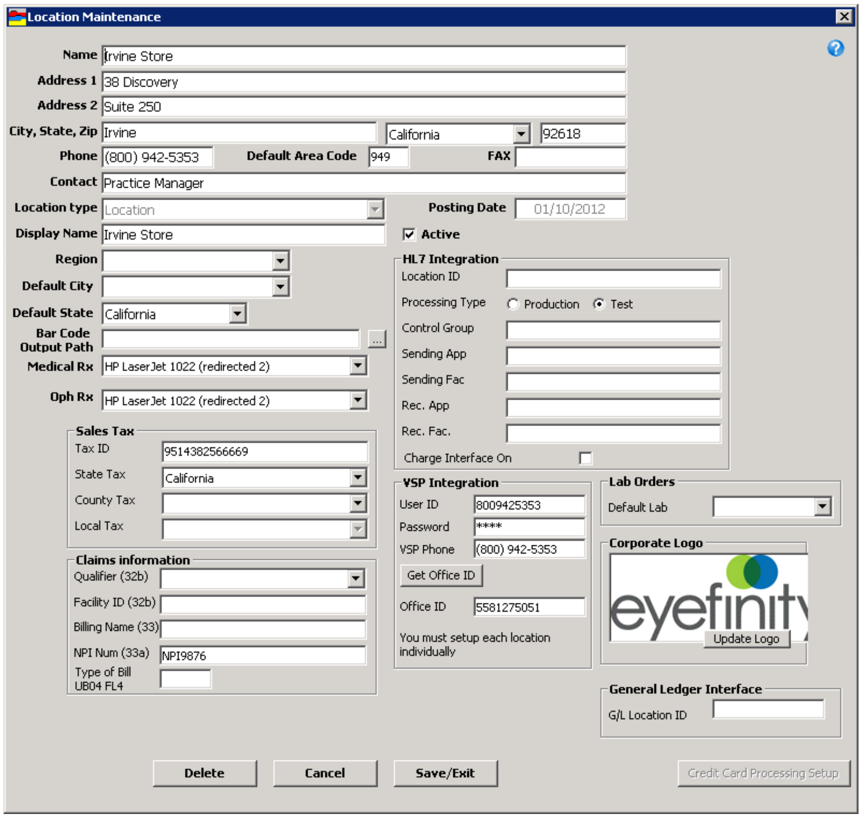
NOTES	
	- The G/L Location ID may be any number of letters or numbers, but you must be consistent from location to location. The G/L Location ID must fit within the parameters for the location segment length that are established in the General Ledger Setup window. - The G/L Location ID field is not visible 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 120×60 pixels so that it displays well on the Price Quote with Insurance Coverage document.


Update Corporate Logo
Browse
View
OK
Cancel

Corporate Logo Link: C:\Officemate\eyefinity_120x60.jpg


Location Maintenance
Region
Default City
Bar Code Output Path
HL7 Integration
Location ID
Control Group
Sending App
Sending Fac
Rec. App
Rec. Fac.
Sales Tax
County Tax
Local Tax
Claims information
Qualifier (32b)
Facility ID (32b)
Billing Name (33)
Type of Bill UB04 FL4
VSP Integration
Get Office ID
Lab Orders
Default Lab
Corporate Logo
Update Logo
General Ledger Interface
G/L Location ID
Delete
Cancel
Save/Exit
Credit Card Processing Setup

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
Default State: California
Medical Rx: HP LaserJet 1022 (redirected 2)
Oph Rx: HP LaserJet 1022 (redirected 2)
Processing Type: ○ Production ● Test
Charge Interface On ☐
Tax ID: 9514382566669
State Tax: California
NPI Num (33a): NPI9876
User ID: 8009425353
Password: ****
VSP Phone: (800) 942-5353
Office ID: 5581275051
You must setup each location individually

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 & Business Names" video.

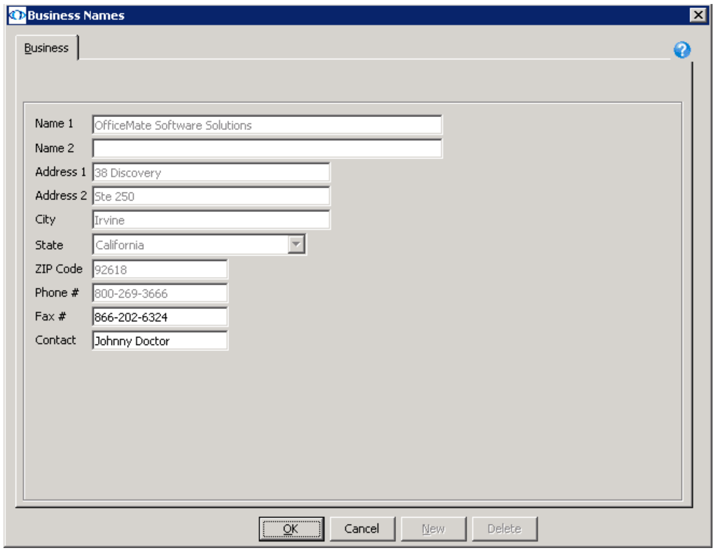
1. On the OfficeMate Administration main window, click **Setup**, and select **Business Names**.

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

2. 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.



Name 1: OfficeMate Software Solutions
Name 2:
Address 1: 38 Discovery
Address 2: Ste 250
City: Irvine
State: California
ZIP Code: 92618
Phone #: 800-269-3666
Fax #: 866-202-6324
Contact: Johnny Doctor

3. 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 Maintenance" 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.

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

   The Vendor Maintenance window opens.

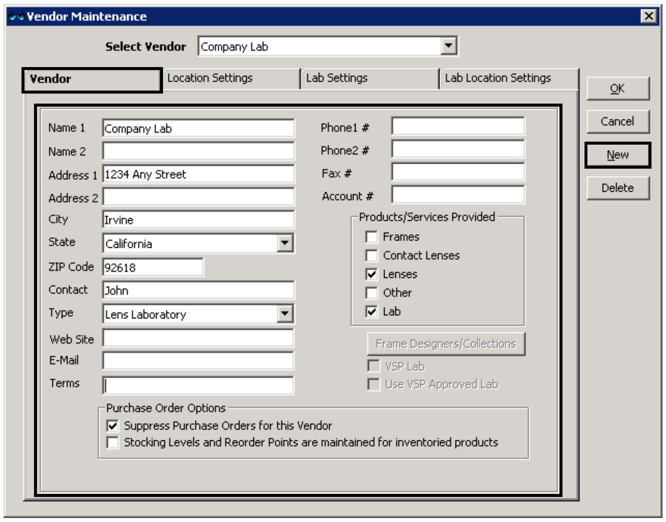
2. Click **New** to add a new vendor.

   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.

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


Vendor Maintenance
Vendor
Location Settings
Lab Settings
Lab Location Settings
OK
Cancel
New
Delete
Frame Designers/Collections

Select Vendor	Company Lab
Name 1	Company Lab
Name 2	
Address 1	1234 Any Street
Address 2	
City	Irvine
State	California
ZIP Code	92618
Contact	John
Type	Lens Laboratory
Web Site	
E-Mail	
Terms	
Phone1 #	
Phone2 #	
Fax #	
Account #	

Products/Services Provided
- ☐ Frames
- ☐ Contact Lenses
- ☑ Lenses
- ☐ Other
- ☑ Lab

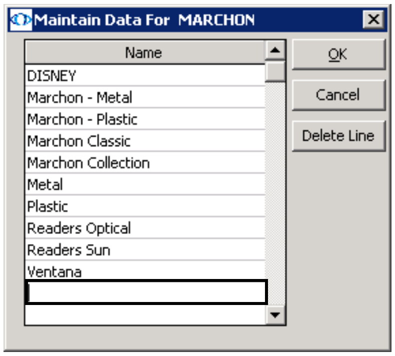
☐ VSP Lab
☐ Use VSP Approved Lab

Purchase Order Options
- ☑ Suppress Purchase Orders for this Vendor
- ☐ Stocking Levels and Reorder Points are maintained for inventoried products

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.



Name
DISNEY
Marchon - Metal
Marchon - Plastic
Marchon Classic
Marchon Collection
Metal
Plastic
Readers Optical
Readers Sun
Ventana

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

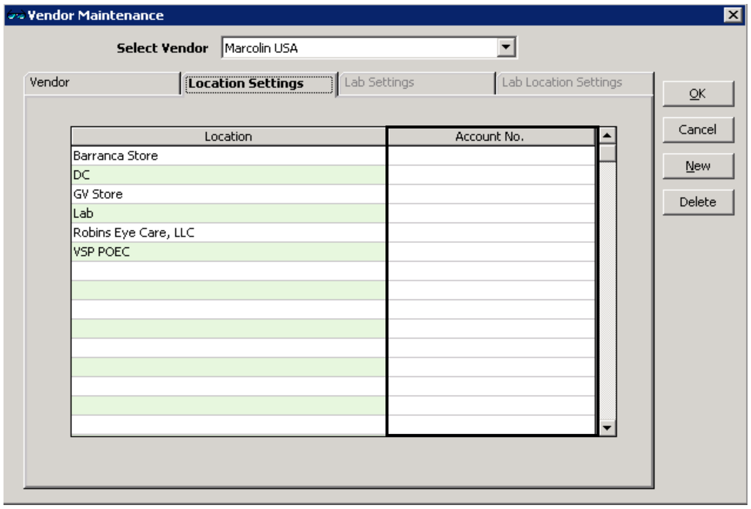
The location settings allow you to record the account numbers the vendor may have assigned to the individual locations.

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.



Select Vendor: Marcolin USA

Location	Account No.
Barranca Store	
DC	
GV Store	
Lab	
Robins Eye Care, LLC	
VSP POEC	

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

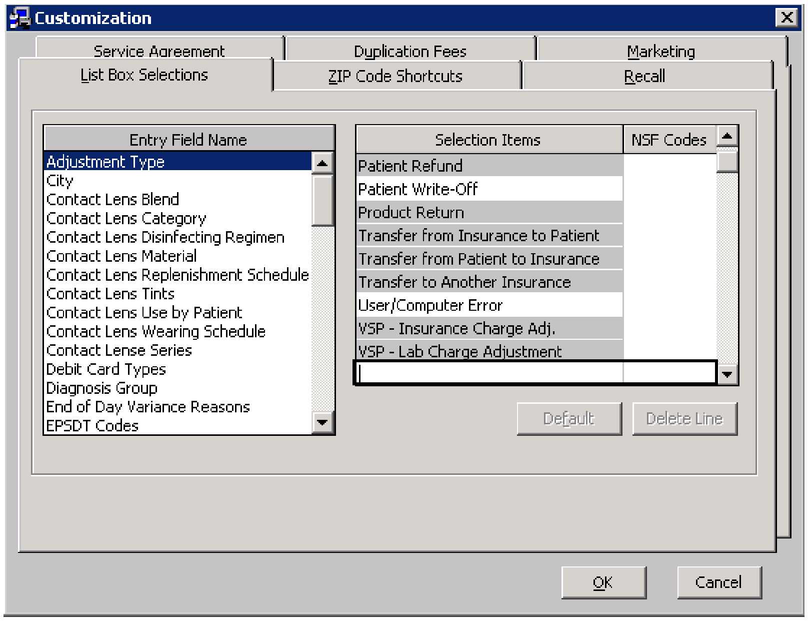
NOTE	You can add new selections to a list box while you are working in OfficeMate Administration by pressing the F12 key any time your cursor is in a list box.

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.

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


Customization
Service Agreement
Duplication Fees
Marketing
List Box Selections
ZIP Code Shortcuts
Recall
Entry Field Name
Adjustment Type
City
Contact Lens Blend
Contact Lens Category
Contact Lens Disinfecting Regimen
Contact Lens Material
Contact Lens Replenishment Schedule
Contact Lens Tints
Contact Lens Use by Patient
Contact Lens Wearing Schedule
Contact Lense Series
Debit Card Types
Diagnosis Group
End of Day Variance Reasons
EPSDT Codes
Selection Items
NSF Codes
Patient Refund
Patient Write-Off
Product Return
Transfer from Insurance to Patient
Transfer from Patient to Insurance
Transfer to Another Insurance
User/Computer Error
VSP - Insurance Charge Adj.
VSP - Lab Charge Adjustment
Default
Delete Line
OK
Cancel

4. 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**.

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

▶ To modify list box selections

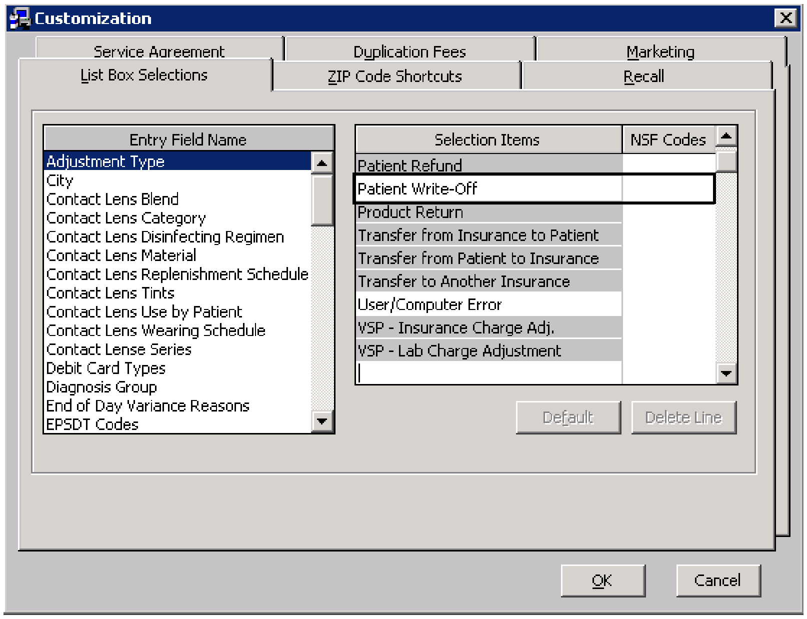
NOTE	You can modify list box selections while you are working in OfficeMate Administration by pressing the F12 key any time your cursor is in a list box.

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.

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


Customization
Service Agreement
Duplication Fees
Marketing
List Box Selections
ZIP Code Shortcuts
Recall
Entry Field Name
Adjustment Type
City
Contact Lens Blend
Contact Lens Category
Contact Lens Disinfecting Regimen
Contact Lens Material
Contact Lens Replenishment Schedule
Contact Lens Tints
Contact Lens Use by Patient
Contact Lens Wearing Schedule
Contact Lense Series
Debit Card Types
Diagnosis Group
End of Day Variance Reasons
EPSDT Codes
Selection Items
NSF Codes
Patient Refund
Patient Write-Off
Product Return
Transfer from Insurance to Patient
Transfer from Patient to Insurance
Transfer to Another Insurance
User/Computer Error
VSP - Insurance Charge Adj.
VSP - Lab Charge Adjustment
Default
Delete Line
OK
Cancel

4. 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.

5. 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.

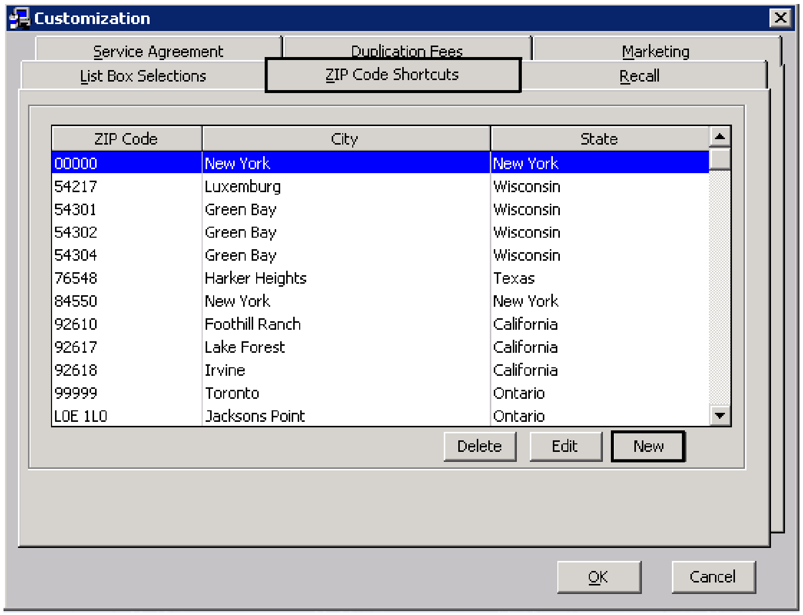
▶ To add ZIP code shortcuts

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

   The Customization window opens.

2. Click the **ZIP Code Shortcuts** tab.

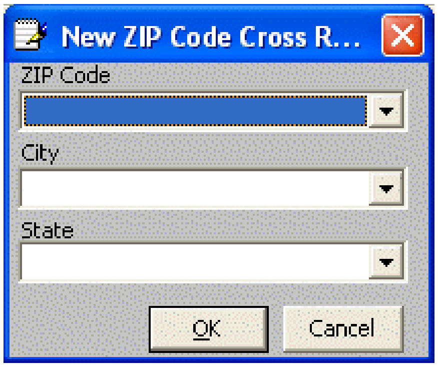
3. Click **New**.


Customization
Service Agreement
Duplication Fees
Marketing
List Box Selections
ZIP Code Shortcuts
Recall
Delete
Edit
New
OK
Cancel

ZIP Code	City	State
00000	New York	New York
54217	Luxemburg	Wisconsin
54301	Green Bay	Wisconsin
54302	Green Bay	Wisconsin
54304	Green Bay	Wisconsin
76548	Harker Heights	Texas
84550	New York	New York
92610	Foothill Ranch	California
92617	Lake Forest	California
92618	Irvine	California
99999	Toronto	Ontario
L0E 1L0	Jacksons Point	Ontario

The New ZIP Code Cross Reference window opens.

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


New ZIP Code Cross R...
ZIP Code
City
State
OK
Cancel

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**.

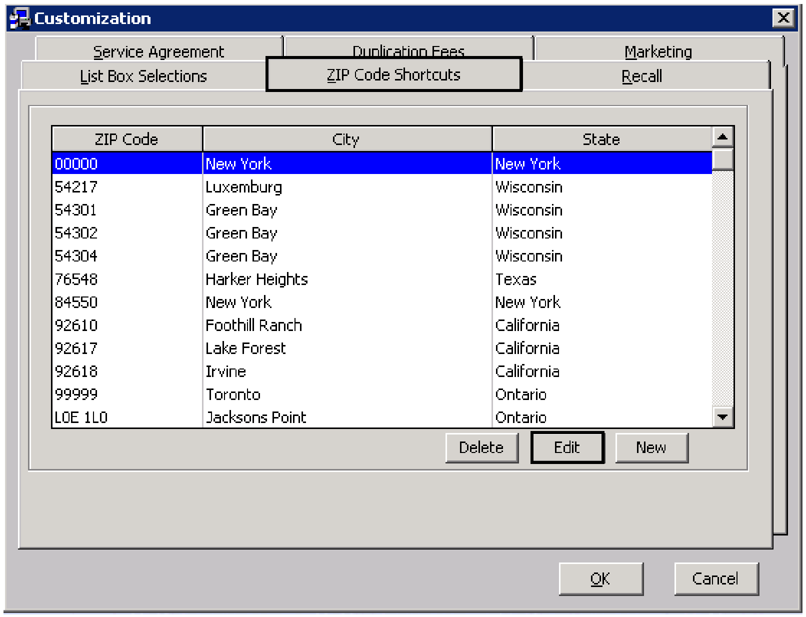
5. Click **OK** to close the New ZIP Code Cross Reference window.
6. Click **OK** to close the Customization window.

▶ To modify ZIP code shortcuts

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

   The Customization window opens.

2. Click the **ZIP Code Shortcuts** tab.
3. Click **Edit**.



ZIP Code	City	State
00000	New York	New York
54217	Luxemburg	Wisconsin
54301	Green Bay	Wisconsin
54302	Green Bay	Wisconsin
54304	Green Bay	Wisconsin
76548	Harker Heights	Texas
84550	New York	New York
92610	Foothill Ranch	California
92617	Lake Forest	California
92618	Irvine	California
99999	Toronto	Ontario
L0E 1L0	Jacksons Point	Ontario

The New ZIP Code Cross Reference window opens.

4. Select a ZIP code, city, or state from the **ZIP Code**, **City**, and **State** drop-down menus.
5. Press the **F12** key.

   The Maintain window opens.

6. 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**.

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

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

▶ To create new recall schedules

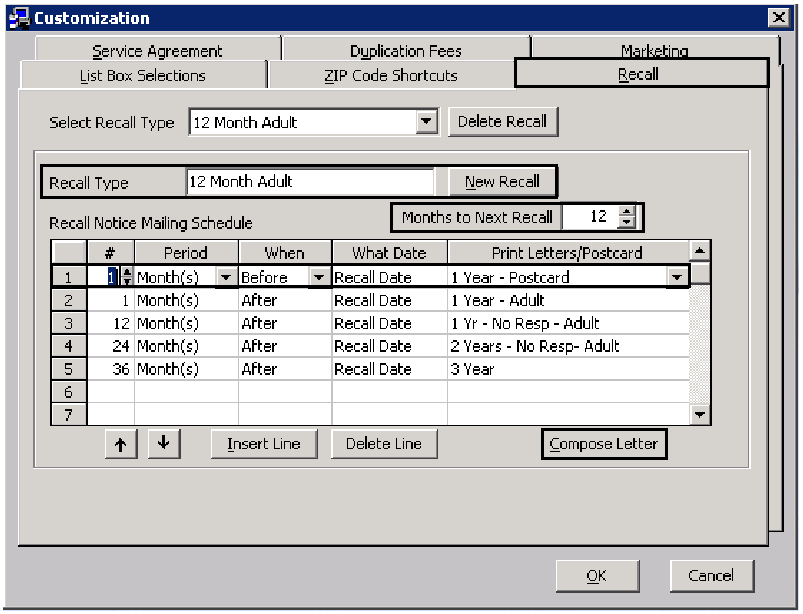
1. On the OfficeMate Administration main window, click **Setup**, and select **Customization**.

   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.
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.


Customization
Service Agreement
Duplication Fees
Marketing
List Box Selections
ZIP Code Shortcuts
Recall
Delete Recall
New Recall
Insert Line
Delete Line
Compose Letter
OK
Cancel

Select Recall Type: 12 Month Adult

Recall Type: 12 Month Adult

Recall Notice Mailing Schedule

Months to Next Recall: 12

	#	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					

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

    OR

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

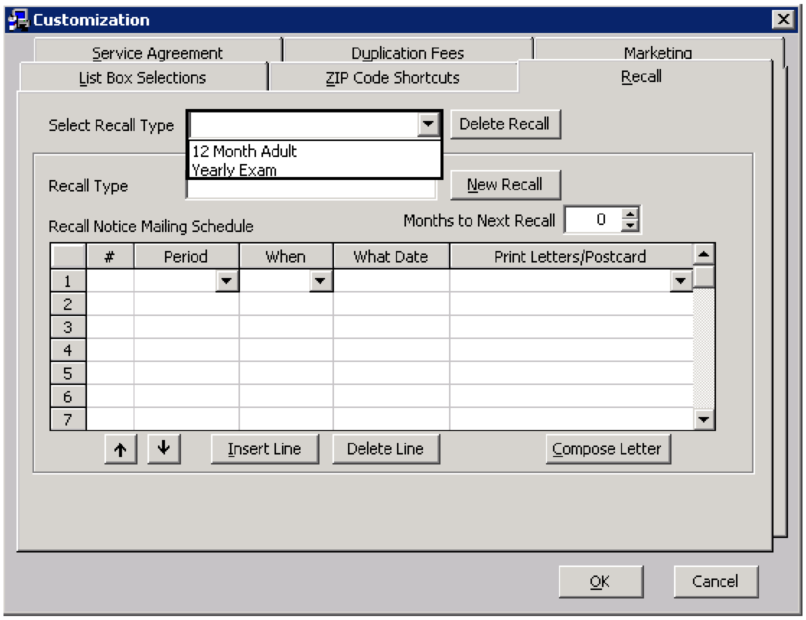
NOTE To insert a new blank line above a completed line, select the completed line that you want to insert a new blank line above and click **Insert Line**.

▶ 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.


Customization
Service Agreement
Duplication Fees
Marketing
List Box Selections
ZIP Code Shortcuts
Recall
Select Recall Type
12 Month Adult
Yearly Exam
Delete Recall
Recall Type
New Recall
Recall Notice Mailing Schedule
Months to Next Recall
0
#
Period
When
What Date
Print Letters/Postcard
1
2
3
4
5
6
7
Insert Line
Delete Line
Compose Letter
OK
Cancel

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.

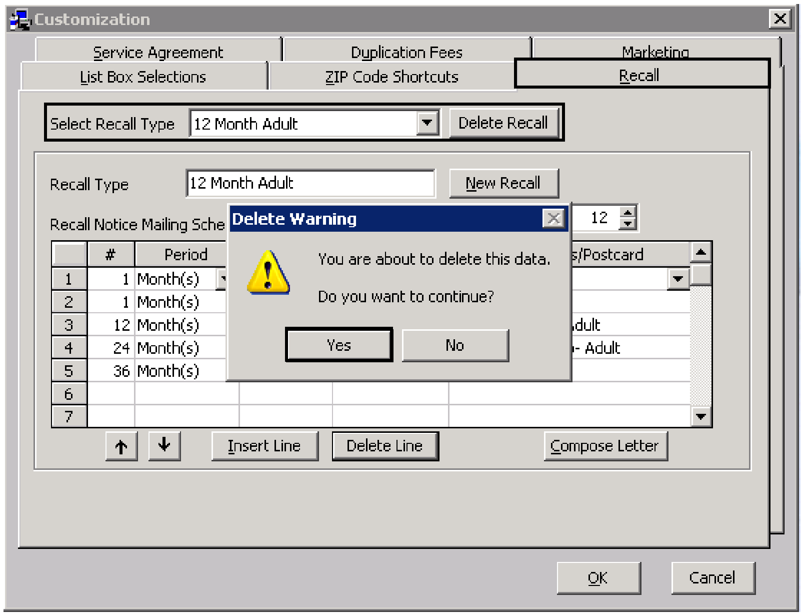
▶ To delete recall schedules

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.



Delete Warning

You are about to delete this data.

Do you want to continue?

Select Recall Type: 12 Month Adult

Recall Type: 12 Month Adult

#	Period
1	1 Month(s)
2	1 Month(s)
3	12 Month(s)
4	24 Month(s)
5	36 Month(s)
6	
7	

Customization
Service Agreement
Duplication Fees
Marketing
List Box Selections
ZIP Code Shortcuts
Recall
Delete Recall
New Recall
Recall Notice Mailing Sche
12
s/Postcard
dult
- Adult
Yes
No
Insert Line
Delete Line
Compose Letter
OK
Cancel

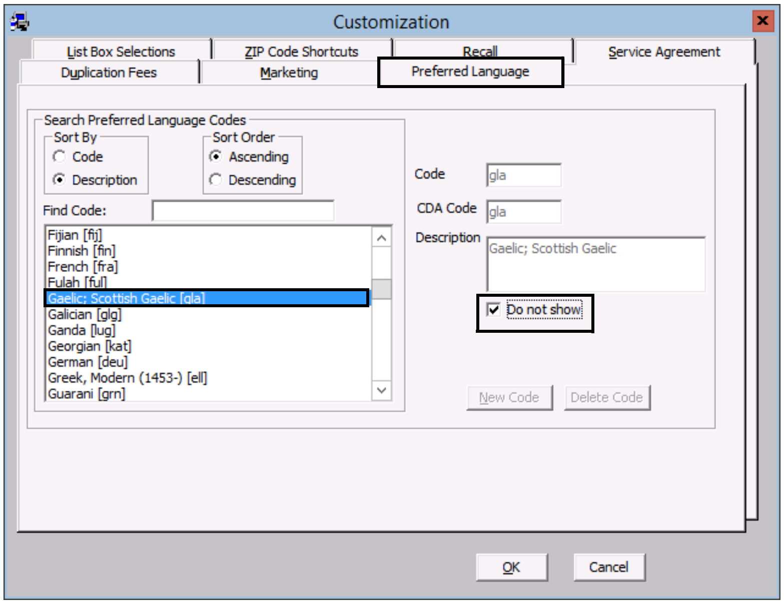
6. Click **OK** to close the Customization window.

▶ 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.

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



Search Preferred Language Codes
Sort By: ○ Code ● Description
Sort Order: ● Ascending ○ Descending
Find Code:
Fijian [fij]
Finnish [fin]
French [fra]
Fulah [ful]
Gaelic; Scottish Gaelic [gla]
Galician [glg]
Ganda [lug]
Georgian [kat]
German [deu]
Greek, Modern (1453-) [ell]
Guarani [grn]

Code: gla
CDA Code: gla
Description: Gaelic; Scottish Gaelic
☑ Do not show

5. 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.

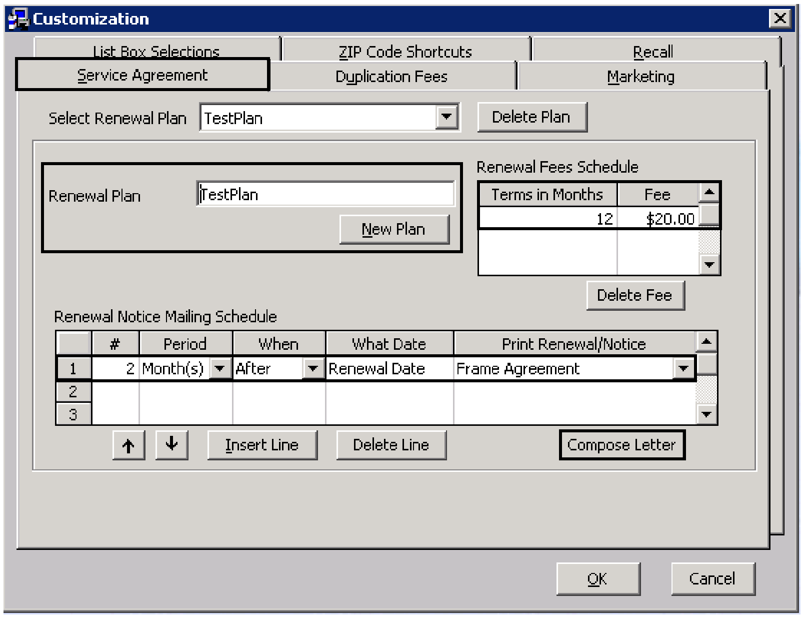
▶ To create new service agreement renewal plans

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

   The Customization window opens.
2. Click the **Service Agreement** tab.
3. Click **New Plan**.
4. Type the name of the new service agreement in the **Renewal Plan** text box.
5. Place your cursor in the Renewal Fees Schedule **Terms in Months** box and select the number of months for each renewal year you offer.
6. Place your cursor in the Renewal Fees Schedule **Fee** box and type the fee that corresponds to the renewal plan.
7. 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.
8. Select **Month(s)** or **Week(s)** from the **Period** column drop-down menu.
9. 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.


Customization
List Box Selections
ZIP Code Shortcuts
Recall
Service Agreement
Duplication Fees
Marketing
Delete Plan
New Plan
Delete Fee
Insert Line
Delete Line
Compose Letter
OK
Cancel

Select Renewal Plan: TestPlan

Renewal Plan: TestPlan

Renewal Fees Schedule

Terms in Months	Fee
12	$20.00

Renewal Notice Mailing Schedule

	#	Period	When	What Date	Print Renewal/Notice
1	2	Month(s)	After	Renewal Date	Frame Agreement
2					
3					

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**.

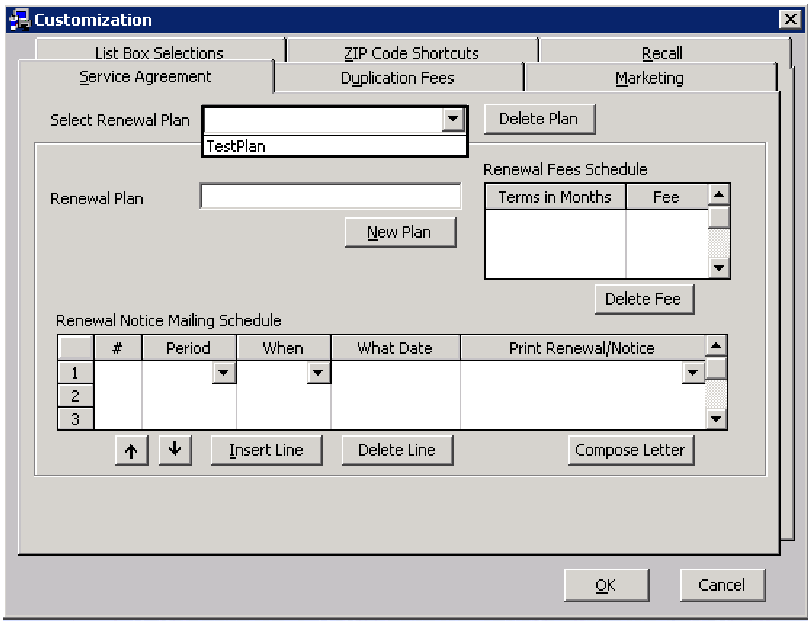
▶ To modify service agreement renewal plans

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.


Customization
List Box Selections
ZIP Code Shortcuts
Recall
Service Agreement
Duplication Fees
Marketing
Select Renewal Plan
TestPlan
Delete Plan
Renewal Plan
New Plan
Renewal Fees Schedule
Terms in Months
Fee
Delete Fee
Renewal Notice Mailing Schedule
#
Period
When
What Date
Print Renewal/Notice
1
2
3
Insert Line
Delete Line
Compose Letter
OK
Cancel

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.

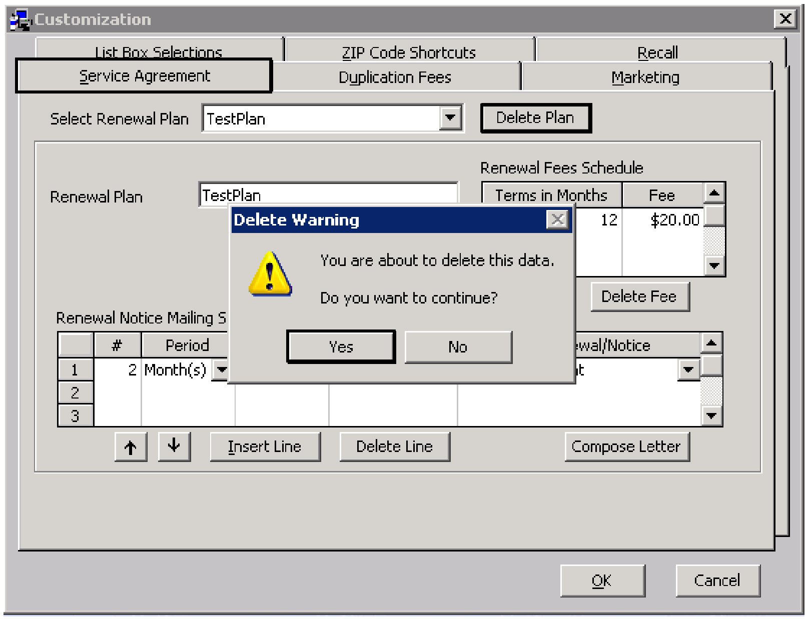
▶ To delete service agreement renewal plans

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.

5. Click **Yes** to continue.



Customization
List Box Selections
ZIP Code Shortcuts
Recall
Service Agreement
Duplication Fees
Marketing
Delete Plan
Renewal Fees Schedule
Terms in Months
Fee
Delete Fee
Renewal Notice Mailing S
#
Period
wal/Notice
Delete Warning
Yes
No
Insert Line
Delete Line
Compose Letter
OK
Cancel

Select Renewal Plan: TestPlan

Renewal Plan: TestPlan

Terms in Months	Fee
12	$20.00

	#	Period
1	2	Month(s)
2		
3		

You are about to delete this data.

Do you want to continue?

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

For more information on identifying duplication fees, watch the “Service Agreement & Duplication Fees” video.

▶ To identify contact lens duplication fees

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

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

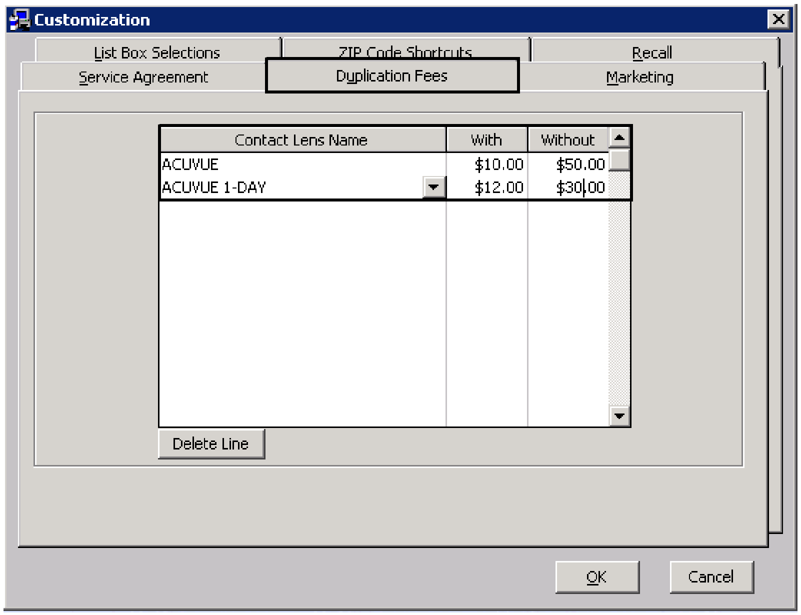
   The Customization window opens.

2. Click the **Duplication Fees** tab.
3. 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.

4. Type the patient’s duplication fee with a service agreement in the **With** column.

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


Customization
List Box Selections
ZIP Code Shortcuts
Recall
Service Agreement
Duplication Fees
Marketing
Delete Line
OK
Cancel

Contact Lens Name	With	Without
ACUVUE	$10.00	$50.00
ACUVUE 1-DAY	$12.00	$30.00

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.

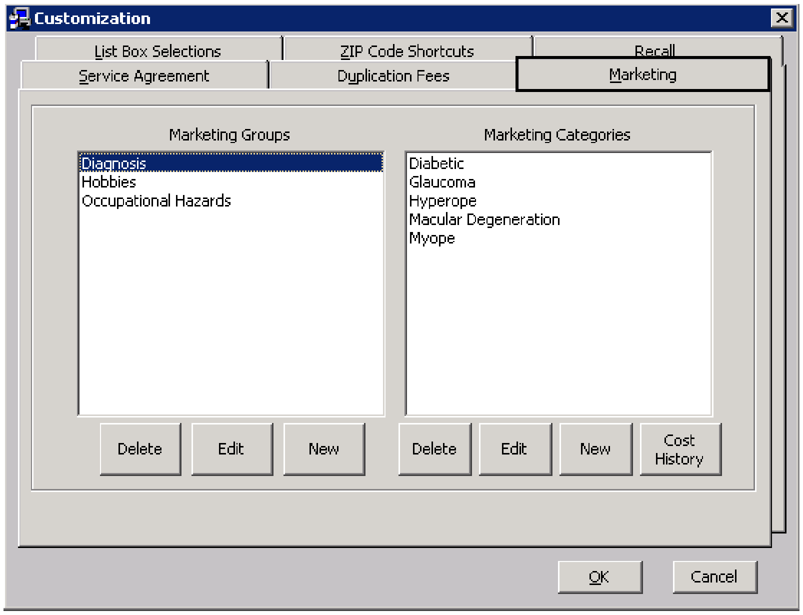
   OR

   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

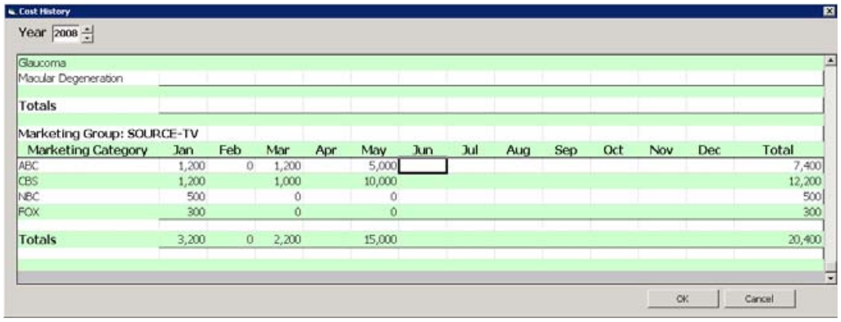
   Click **New** to add a new marketing category to the marketing group.


Customization
List Box Selections
ZIP Code Shortcuts
Recall
Service Agreement
Duplication Fees
Marketing
Marketing Groups
Diagnosis
Hobbies
Occupational Hazards
Marketing Categories
Diabetic
Glaucoma
Hyperope
Macular Degeneration
Myope
Delete
Edit
New
Delete
Edit
New
Cost History
OK
Cancel

5. To capture the marketing effectiveness of money spent on media sources, perform the following steps:

   a. Click **Cost History**.

   b. Type the monthly dollar amounts spent on media sources in the month columns.


Cost History
Year 2008
OK
Cancel

Glaucoma													
Macular Degeneration													
Totals													
Marketing Group: SOURCE-TV													
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

   c. 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 708.

6. 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

For more information on maintaining resources, watch the "Resource Setup" video.

▶ To modify or add provider information

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.

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

   The Resources Setup window opens.
2. Click the **Provider** tab.
3. 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.
4. Type the provider's last name in the **Last Name (Box 33)** text box.
5. Type the provider's first name in the **First Name (Box 33)** text box.
6. Type the provider's middle name in the **Middle Name (Box 33)** text box.
7. Type the provider's phone and fax number in the **Phone # (Box 33)** and **Fax #** text boxes.
8. Type the login name in the **User ID** text box.
9. Select the default location for the provider or staff member from the **Default Location** drop-down menu.
10. Select a provider type from the **Provider Type** drop-down menu.
11. Type the provider's license number in the **License #** text box.
12. 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.

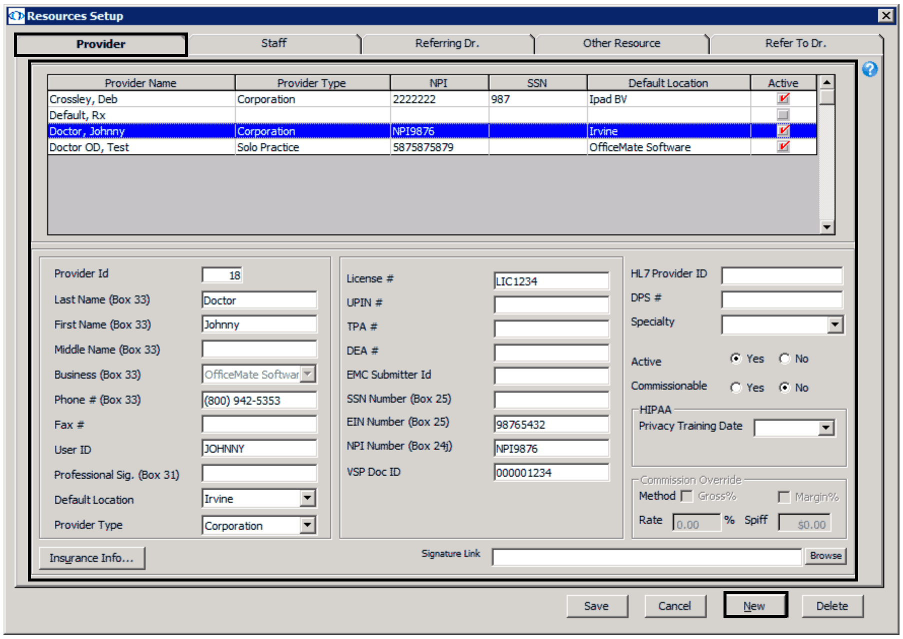
NOTE	The VSP Doc ID is required if the VSP interface is turned on. If you have a non-VSP doctor in your practice, enter the doctor's EIN or SSN in the VSP Doc ID text box.

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.



Provider Name	Provider Type	NPI	SSN	Default Location	Active
Crossley, Deb	Corporation	2222222	987	Ipad BV	☑
Default, Rx					☐
Doctor, Johnny	Corporation	NPI9876		Irvine	☑
Doctor OD, Test	Solo Practice	5875875879		OfficeMate Software	☑

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 24j): NPI9876
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

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.

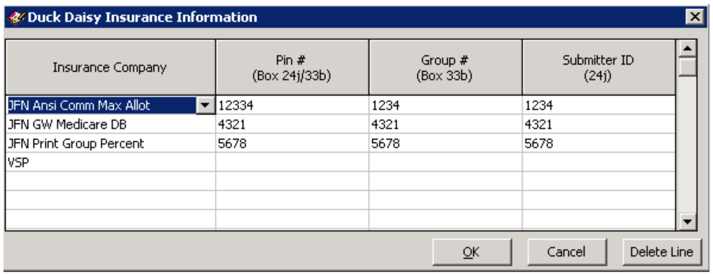
NOTES	• The gross percentage commission is based on the product gross minus write offs. • The margin percentage commission is based on product gross minus product cost and write offs.

19. If the doctor plans to process insurance claims, click the **Insurance Info** button and follow the instructions below:
    a. Select insurance companies to which the doctor plans to bill insurance claims from the **Insurance Company** drop-down menus.
    b. Type the insurance company PIN numbers in the **Pin #** column, as needed.
    c. Type the insurance company group numbers in the **Group #** column.
    d. 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 (24j)
JFN Ansi Comm Max Allot	12334	1234	1234
JFN GW Medicare DB	4321	4321	4321
JFN Print Group Percent	5678	5678	5678
VSP			

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 107. - 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 722

▶ 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.

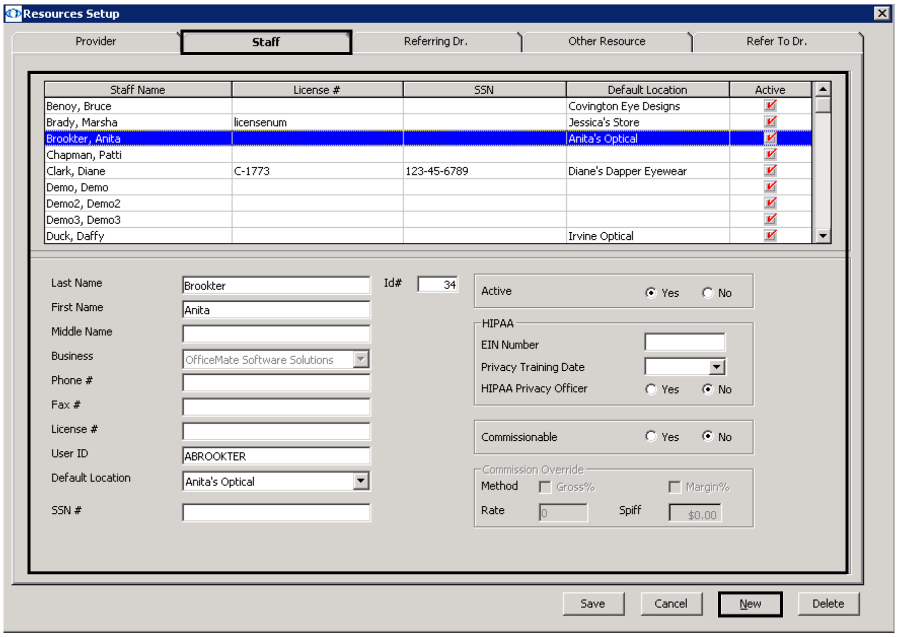
   OR

   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.



Staff Name	License #	SSN	Default Location	Active
Benoy, Bruce			Covington Eye Designs	☑
Brady, Marsha	licensenum		Jessica's Store	☑
Brookter, Anita			Anita's Optical	☑
Chapman, Patti				☑
Clark, Diane	C-1773	123-45-6789	Diane's Dapper Eyewear	☑
Demo, Demo				☑
Demo2, Demo2				☑
Demo3, Demo3				☑
Duck, Daffy			Irvine Optical	☑

Last Name: Brookter
Id#: 34
First Name: Anita
Middle Name:
Business: OfficeMate Software Solutions
Phone #:
Fax #:
License #:
User ID: ABROOKTER
Default Location: Anita's Optical
SSN #:

Active ● Yes ○ No
HIPAA
EIN Number:
Privacy Training Date:
HIPAA Privacy Officer ○ Yes ● No
Commissionable ○ Yes ● No
Commission Override
Method ☐ Gross% ☐ Margin%
Rate: 0
Spiff: $0.00

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 107.

▶ 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.

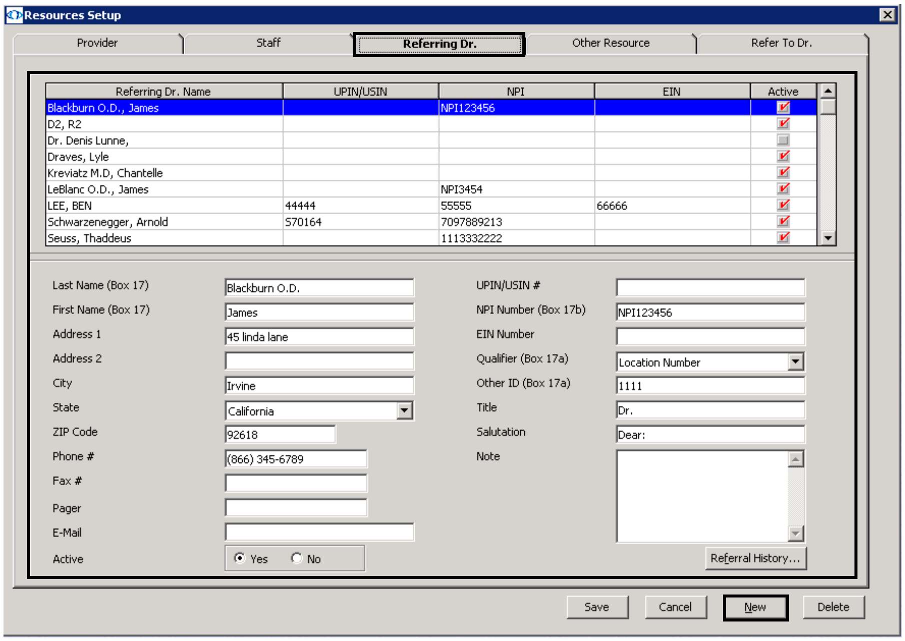
NOTE You *must* record an NPI number for each referring doctor.

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

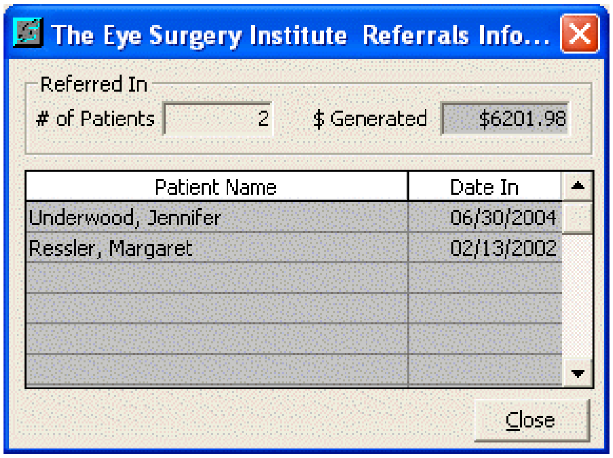
7. Type the other ID in the **Other ID (Box 17a)** text box.



Referring Dr. Name	UPIN/USIN	NPI	EIN	Active
Blackburn O.D., James		NPI123456		☑
D2, R2				☑
Dr. Denis Lunne,				☐
Draves, Lyle				☑
Kreviatz M.D, Chantelle				☑
LeBlanc O.D., James		NPI3454		☑
LEE, BEN	44444	55555	66666	☑
Schwarzenegger, Arnold	S70164	7097889213		☑
Seuss, Thaddeus		1113332222		☑

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:

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



The Eye Surgery Institute Referrals Info...

Referred In

# of Patients: 2

$ Generated: $6201.98

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

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

▶ To modify or add appointment schedule resources

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

   The Resources Setup window opens.

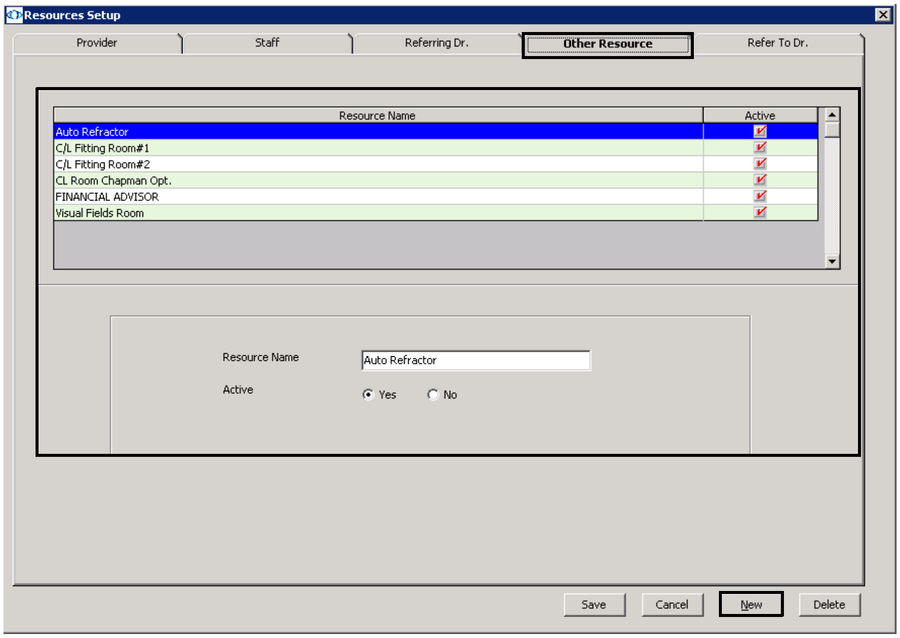
2. Click the **Other Resources** tab.
3. Click **New** to add a new resource and type the resource name in the **Resource Name** text box.

   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.

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


Resources Setup
Provider
Staff
Referring Dr.
Other Resource
Refer To Dr.
Save
Cancel
New
Delete

Resource Name	Active
Auto Refractor	☑
C/L Fitting Room#1	☑
C/L Fitting Room#2	☑
CL Room Chapman Opt.	☑
FINANCIAL ADVISOR	☑
Visual Fields Room	☑

Resource Name: Auto Refractor

Active: ● Yes ○ No

5. 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

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

   The Resources Setup window opens.

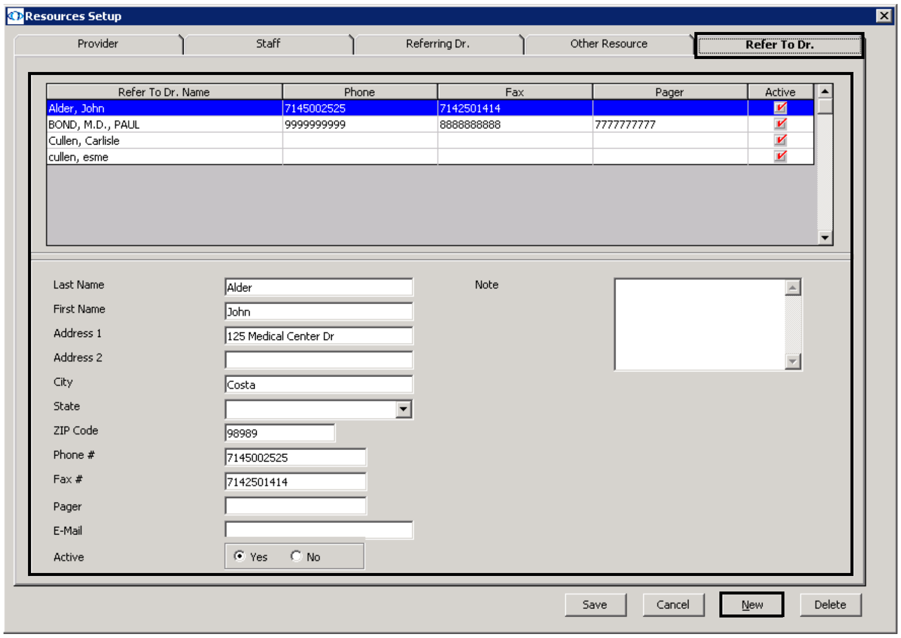
2. Click the **Refer To Dr.** tab.
3. Click **New** to add a new doctor.

   OR

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

4. Type text in the text boxes.

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



Refer To Dr. Name	Phone	Fax	Pager	Active
Alder, John	7145002525	7142501414		✓
BOND, M.D., PAUL	9999999999	8888888888	7777777777	✓
Cullen, Carlisle				✓
cullen, esme				✓

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
Note:

6. 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:

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

   The Maintain Add-Ins window opens.

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

   OR

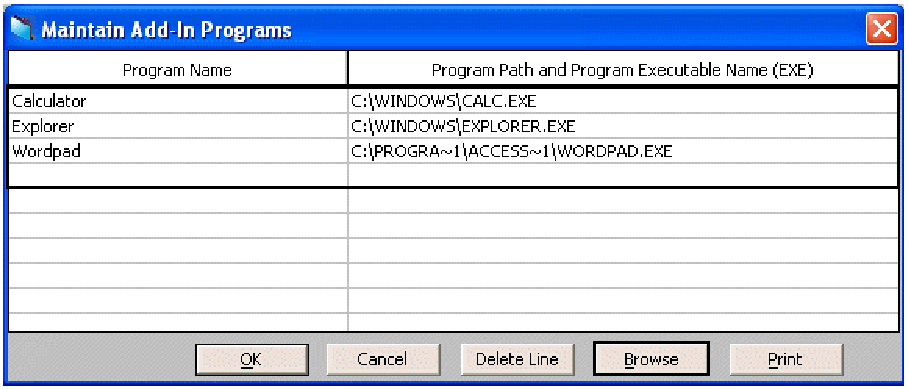
   Place your cursor in a program name in the **Program Name** column and edit it or click **Delete Line** to delete the program from the OfficeMate main window toolbar Add-Ins menu.

3. 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.



Program Name	Program Path and Program Executable Name (EXE)
Calculator	C:\WINDOWS\CALC.EXE
Explorer	C:\WINDOWS\EXPLORER.EXE
Wordpad	C:\PROGRA~1\ACCESS~1\WORDPAD.EXE

4. Click **Print** to print a the Maintain Add-Ins Program window.
5. Click **OK**.
6. 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, 63
- To set up miscellaneous preferences, 68
- To set up label printer preferences, 71
- To set up one-click document preferences, 71
- To set up statement preferences, 73
- To set up lab order preferences, 75
- To set up centralized preferences, 79
- To define and change payment restriction preferences, 81
- To define and change perpetual inventory preferences, 82

NOTE	You can change your OfficeMate preferences at any time.

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

▶ To set up patient preferences

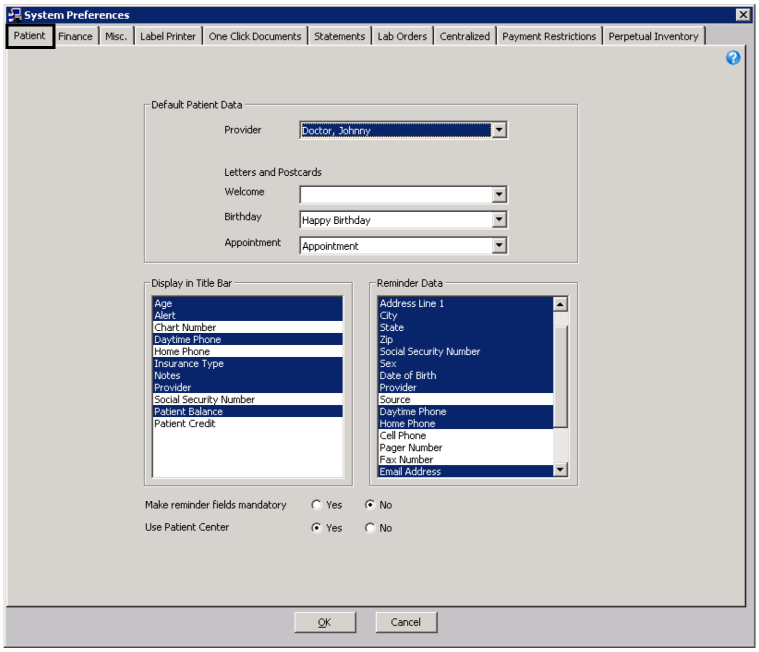
1. From the OfficeMate Administration main window, click **Setup**, and select **Preferences**.

   The System Preferences window opens.

2. From the **Provider** drop-down menu, select the default provider that is assigned to new patients when their demographic data is recorded in OfficeMate.
3. 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 835.

4. 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.



Default Patient Data

Provider: Doctor, Johnny

Letters and Postcards

Welcome:

Birthday: Happy Birthday

Appointment: Appointment

Display in Title Bar
- Age
- Alert
- Chart Number
- Daytime Phone
- Home Phone
- Insurance Type
- Notes
- Provider
- Social Security Number
- Patient Balance
- Patient Credit

Reminder Data
- Address Line 1
- City
- State
- Zip
- Social Security Number
- Sex
- Date of Birth
- Provider
- Source
- Daytime Phone
- Home Phone
- Cell Phone
- Pager Number
- Fax Number
- Email Address

Make reminder fields mandatory ○ Yes ● No

Use Patient Center ● Yes ○ No

5. 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.

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

For more information on setting up financial preferences, watch the “Finance Preferences” video.

▶ To set up financial preferences

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

   The System Preferences window opens.
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.

Preference	Setting to Yes...	Setting to No...
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.
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	Activates the detailed benefits and maximum allotments methods for setting up insurance plans and calculating patient eligibility and copays. 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. For more information about detailed benefits, go to Setting Up Plan Detailed Benefits on page 166. For information about maximum allotments, go to Setting Up Plan Maximum Allotments on page 191.	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 90.	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	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. For information about the General Ledger Interface, go to Using the General Ledger Interface on page 765. This setting automatically disables preferences listed hereafter.	Disables the General Ledger Interface, and therefore, the ability to export financial data to MAS 90, MAS 200, or QuickBooks. Enables the preferences listed hereafter.

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 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 record a payment reversal in the Receipts History window and rerecord the payment using the correct payment method.

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

▶ To set up miscellaneous preferences

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

   The System Preferences window opens.

2. Click the **Misc** tab.
3. Select the **VisionWeb Integration** check box if you are integrating with VisionWeb.
4. 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.

5. Select the **CLX Integration** check box if you are integrating with the CLX System to submit soft contact lens orders to a distributor. For more

information on setting up the CLX interface with OfficeMate, go to www.eyefinity.com/dam/eyefinity/documentation/OM/OfficeMate-CLX-Interface.pdf.

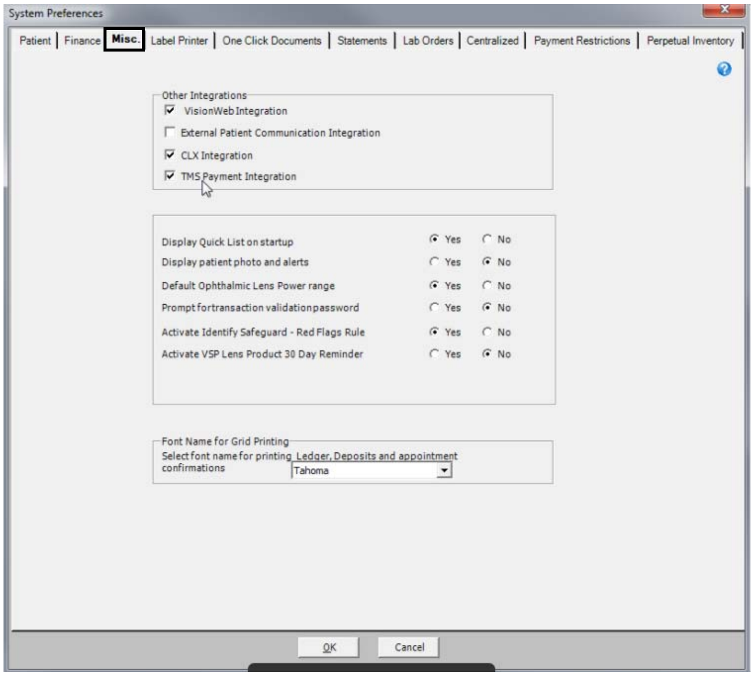
6. Select the **TMS Payment Integration** check box if you are integrating with Total Merchant Services (TMS) to process debit and credit card payments, refunds, and returns. For more information on setting up the TMS integration with OfficeMate, go to www.eyefinity.com/dam/eyefinity/documentation/OM/OM_TMS_Interface.pdf.
7. Select the **Yes** and **No** radio buttons to choose the other options.

For more information on setting up Quick List, photo/alert, password validation, and Red Flags rule display options, 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.

Preference	Setting to Yes...	Setting to No...
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 confidentially of your patients' information.	Deactivates the Safeguard - Red Flags rule feature.
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.

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


System Preferences
Patient
Finance
Misc.
Label Printer
One Click Documents
Statements
Lab Orders
Centralized
Payment Restrictions
Perpetual Inventory
OK
Cancel

Other Integrations
☑ VisionWeb Integration
☐ External Patient Communication Integration
☑ CLX Integration
☑ TMS Payment Integration

Display Quick List on startup ● Yes ○ No
Display patient photo and alerts ○ Yes ● No
Default Ophthalmic Lens Power range ● Yes ○ No
Prompt for transaction validation password ○ Yes ● No
Activate Identify Safeguard - Red Flags Rule ● Yes ○ No
Activate VSP Lens Product 30 Day Reminder ○ Yes ● No

Font Name for Grid Printing
Select font name for printing Ledger, Deposits and appointment confirmations: Tahoma

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

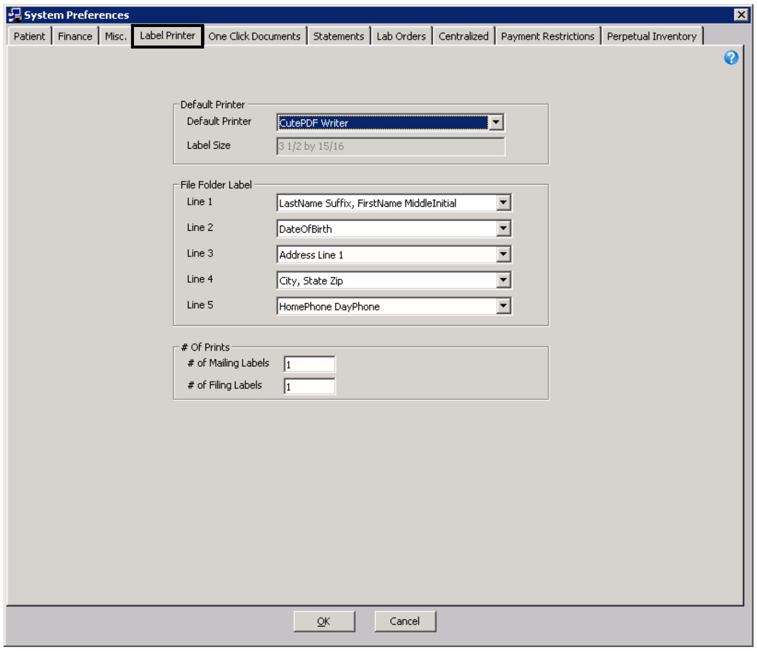
▶ To set up label printer preferences

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

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

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

   The System Preferences window opens.
2. Click the **Label Printer** tab.
3. Select the default printer and label size from the **Default Printer** box drop-down menus.
4. Select file folder label lines from the **File Folder Label** drop-down menus.
5. Type the number of mailing and filing labels to print in the **# of Prints** box text boxes.



Default Printer
Default Printer: CutePDF Writer
Label Size: 3 1/2 by 15/16

File Folder Label
Line 1: LastName Suffix, FirstName MiddleInitial
Line 2: DateOfBirth
Line 3: Address Line 1
Line 4: City, State Zip
Line 5: HomePhone DayPhone

Of Prints
# of Mailing Labels: 1
# of Filing Labels: 1

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

▶ To set up one-click document preferences

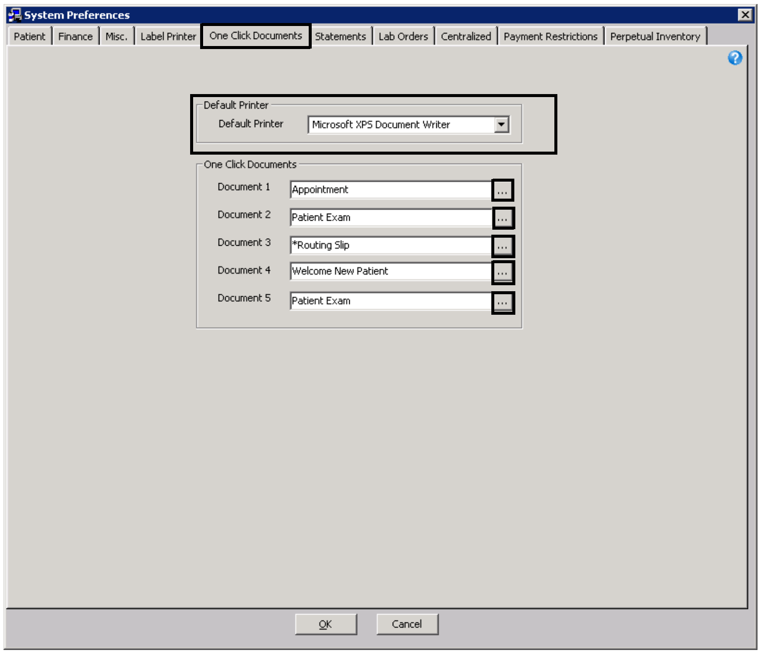
For more information on setting up one-click document preferences, watch the "One-Click Documents" video.

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 835.

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

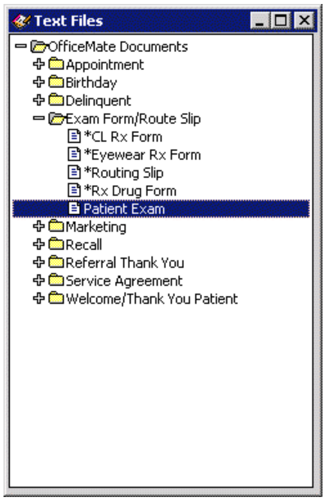

System Preferences
Patient
Finance
Misc.
Label Printer
One Click Documents
Statements
Lab Orders
Centralized
Payment Restrictions
Perpetual Inventory
OK
Cancel

Default Printer
Default Printer: Microsoft XPS Document Writer

One Click Documents
Document 1: Appointment
Document 2: Patient Exam
Document 3: *Routing Slip
Document 4: Welcome New Patient
Document 5: Patient Exam

The Text Files window opens.

5. Click the **+** next to OfficeMate Documents to expand the folder.


Text Files
OfficeMate Documents
Appointment
Birthday
Delinquent
Exam Form/Route Slip
*CL Rx Form
*Eyewear Rx Form
*Routing Slip
*Rx Drug Form
Patient Exam
Marketing
Recall
Referral Thank You
Service Agreement
Welcome/Thank You Patient

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

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

▶ To set up statement preferences

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

   The System Preferences window opens.
2. Click the **Statements** tab.
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.

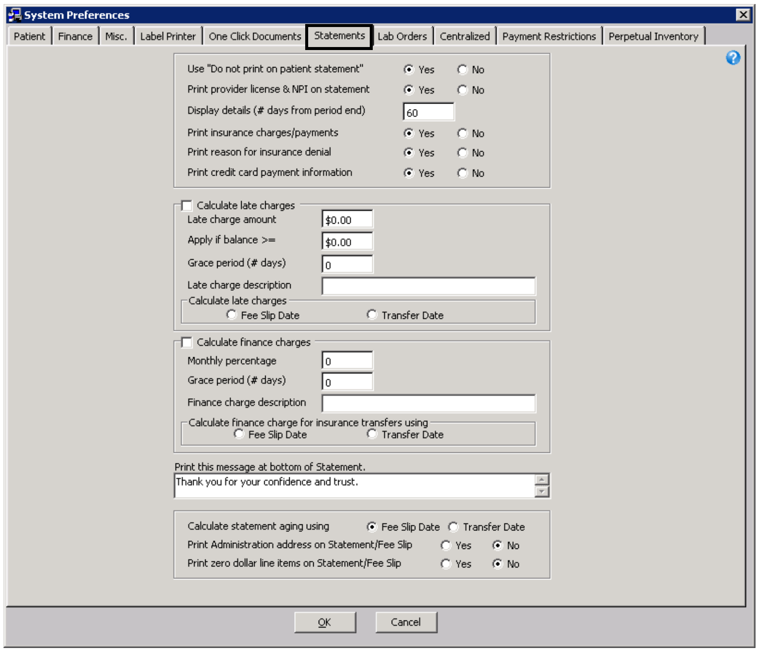
Preference	Setting to Yes...	Setting to No...
Use "Do not print on patient statement"	Enables the "Do not print on patient statement" check box in the Fee Slip Item Adjustment window and prevents ledger items marked as DNP from printing on patient statements.	Disables the "Do not print on patient statement" 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.
    a. Select the **Calculate late charges** check box.
    b. 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.
    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.
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.



Use "Do not print on patient statement" ● Yes ○ No
Print provider license & NPI on statement ● Yes ○ No
Display details (# days from period end) 60
Print insurance charges/payments ● Yes ○ No
Print reason for insurance denial ● Yes ○ No
Print credit card payment information ● Yes ○ No

☐ Calculate late charges
Late charge amount $0.00
Apply if balance >= $0.00
Grace period (# days) 0
Late charge description
Calculate late charges ○ Fee Slip Date ○ Transfer Date

☐ Calculate finance charges
Monthly percentage 0
Grace period (# days) 0
Finance charge description
Calculate finance charge for insurance transfers using ○ Fee Slip Date ○ Transfer Date

Print this message at bottom of Statement.
Thank you for your confidence and trust.

Calculate statement aging using ● Fee Slip Date ○ Transfer Date
Print Administration address on Statement/Fee Slip ○ Yes ● No
Print zero dollar line items on Statement/Fee Slip ○ Yes ● No

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

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

▶ To set up lab order preferences

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

   The System Preferences window opens.

2. Click the **Lab Orders** tab.
3. 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	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: • 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.

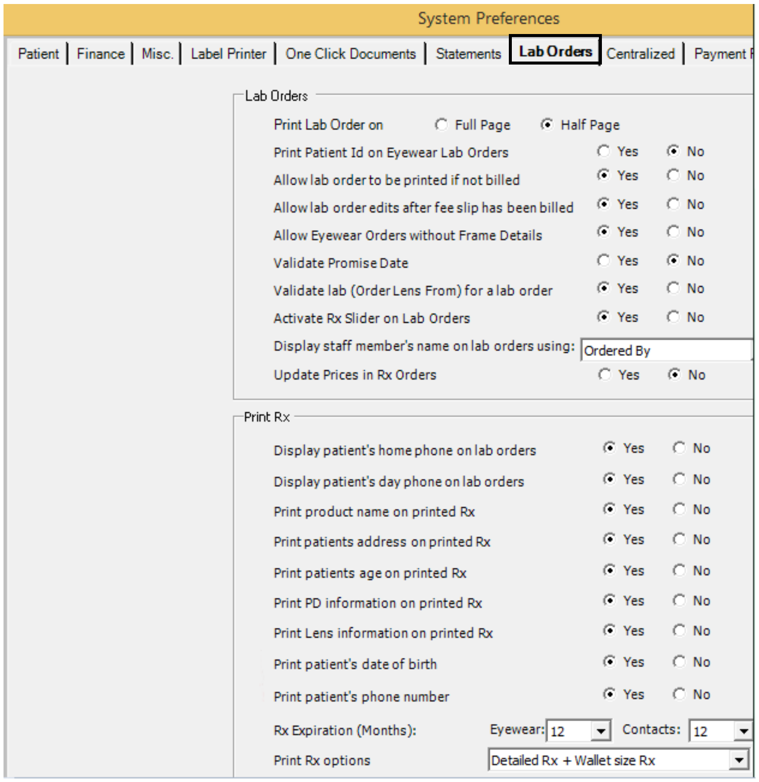
5. Select which staff member's name, if any, appears on the lab order from the **Display staff member's name on lab order using** drop-down menu.
6. Select the **Yes** and **No** radio buttons to choose printed prescription preferences.

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.
Print patient's date of birth	Prints the patient's date of birth on spectacle and contact lens prescriptions.	Does not print the patient's date of birth on spectacle and contact lens prescriptions.
Print patient's phone number	Prints the patient's cell phone number (or, if not recorded, day phone number) on spectacle and contact lens prescriptions.	Does not print the patient's cell phone number (or, if not recorded, day phone number) on spectacle and contact lens prescriptions.

7. Select the appropriate default Eyewear and Contacts **Rx Expiration (Months)**.
8. Select the Rx printing size from the **Print Rx options** drop-down menu.

9. Select the default lab order printer from the **Default Printer** drop-down menu.



Lab Orders

Print Lab Order on ○ Full Page ● Half Page
Print Patient Id on Eyewear Lab Orders ○ Yes ● No
Allow lab order to be printed if not billed ● Yes ○ No
Allow lab order edits after fee slip has been billed ● Yes ○ No
Allow Eyewear Orders without Frame Details ● Yes ○ No
Validate Promise Date ○ Yes ● No
Validate lab (Order Lens From) for a lab order ● Yes ○ No
Activate Rx Slider on Lab Orders ● Yes ○ No
Display staff member's name on lab orders using: Ordered By
Update Prices in Rx Orders ○ Yes ● No

Print Rx

Display patient's home phone on lab orders ● Yes ○ No
Display patient's day phone on lab orders ● Yes ○ No
Print product name on printed Rx ● Yes ○ No
Print patients address on printed Rx ● Yes ○ No
Print patients age on printed Rx ● Yes ○ No
Print PD information on printed Rx ● Yes ○ No
Print Lens information on printed Rx ● Yes ○ No
Print patient's date of birth ● Yes ○ No
Print patient's phone number ● Yes ○ No
Rx Expiration (Months): Eyewear: 12 Contacts: 12
Print Rx options Detailed Rx + Wallet size Rx

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

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

▶ To set up centralized preferences

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

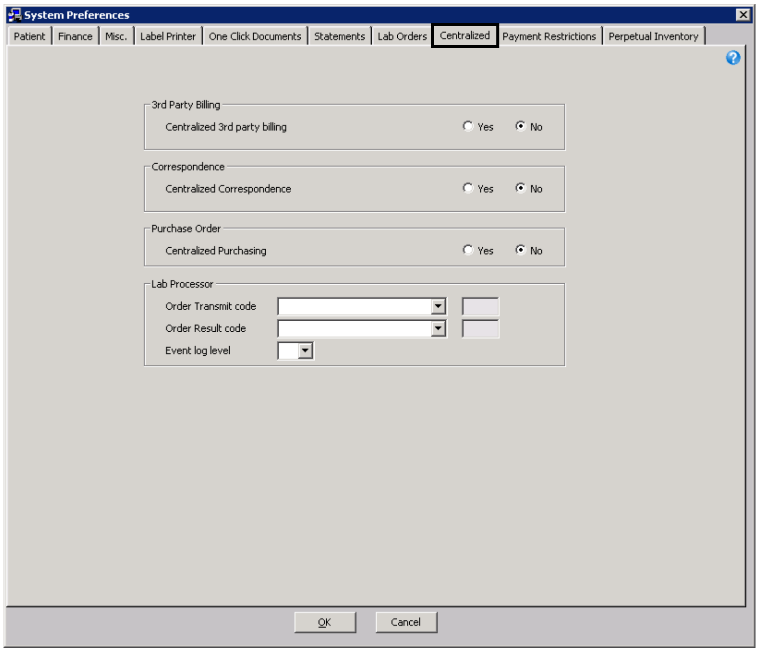
   The System Preferences window opens.

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.

Preference	Setting to Yes...	Setting to No...
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.


System Preferences
Patient
Finance
Misc.
Label Printer
One Click Documents
Statements
Lab Orders
Centralized
Payment Restrictions
Perpetual Inventory
OK
Cancel

3rd Party Billing
Centralized 3rd party billing ○ Yes ● No

Correspondence
Centralized Correspondence ○ Yes ● No

Purchase Order
Centralized Purchasing ○ Yes ● No

Lab Processor
Order Transmit code
Order Result code
Event log level

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

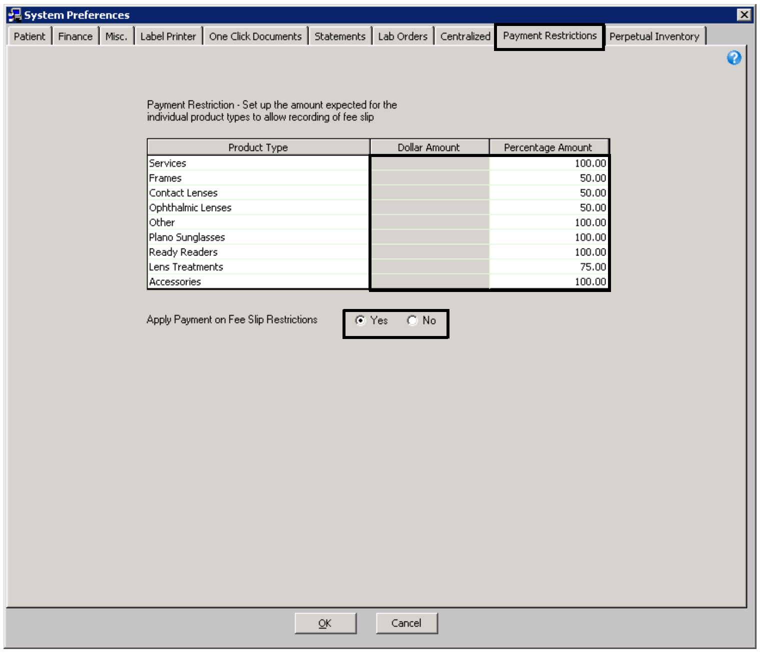
For more information on defining and changing payment restriction preferences, watch the “Payment Restrictions” video.

▶ 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 97.

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.
4. 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.



Payment Restriction - Set up the amount expected for the individual product types to allow recording of fee slip

Product Type	Dollar Amount	Percentage Amount
Services		100.00
Frames		50.00
Contact Lenses		50.00
Ophthalmic Lenses		50.00
Other		100.00
Plano Sunglasses		100.00
Ready Readers		100.00
Lens Treatments		75.00
Accessories		100.00

Apply Payment on Fee Slip Restrictions ● Yes ○ No

5. 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 “Perpetual Inventory Preferences” video.

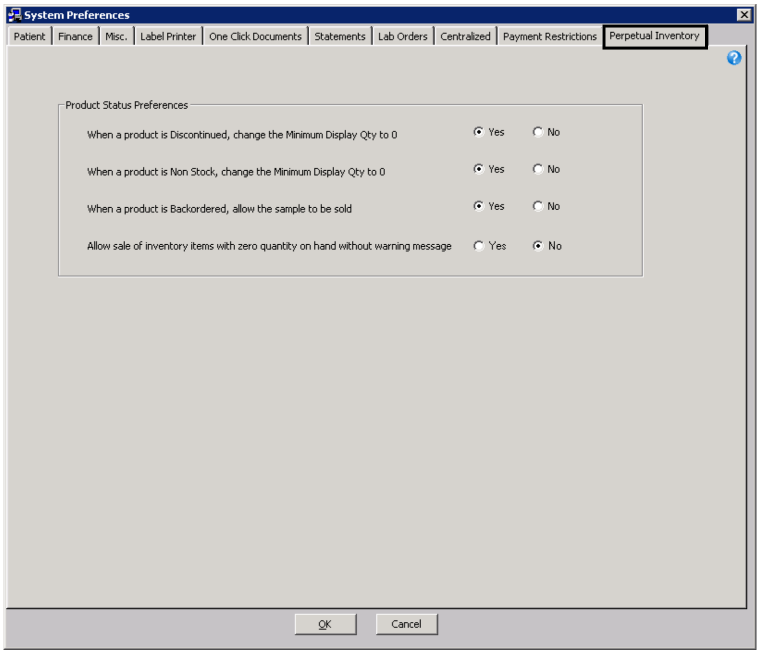
Use the perpetual inventory preference to adjust how display, or sample, products are counted and sold.

1. 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** 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**.


System Preferences
Patient
Finance
Misc.
Label Printer
One Click Documents
Statements
Lab Orders
Centralized
Payment Restrictions
Perpetual Inventory
OK
Cancel

Product Status Preferences

When a product is Discontinued, change the Minimum Display Qty to 0 ● Yes ○ No

When a product is Non Stock, change the Minimum Display Qty to 0 ● Yes ○ No

When a product is Backordered, allow the sample to be sold ● Yes ○ No

Allow sale of inventory items with zero quantity on hand without warning message ○ Yes ● No

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

Setting Up Sales Tax Codes

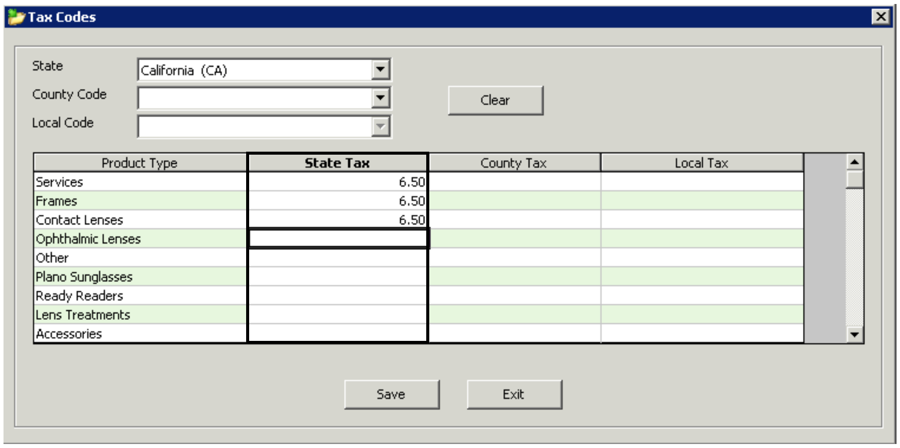
For more information on setting up sales tax codes, watch the "Sales Tax Codes" video.

1. From the OfficeMate Administration main window, click **Setup**, and select **Sales Tax Codes**.

   The Tax Codes window opens.

2. Select a state from the **State** drop-down menu.

3. Type the state sales tax percentages for the various product types in the **State Tax** column.


Tax Codes
Clear
Save
Exit

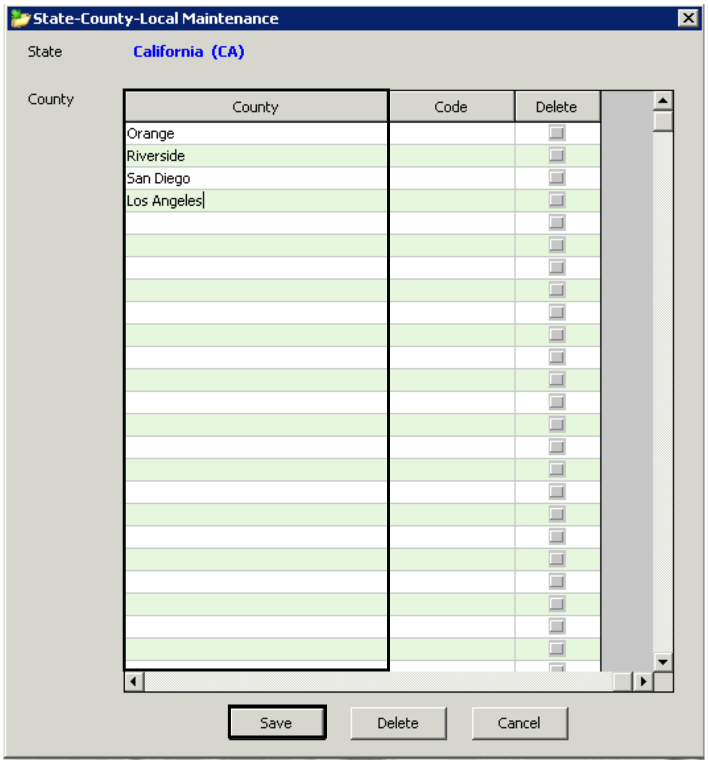
State: California (CA)
County Code:
Local Code:

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

4. 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**.



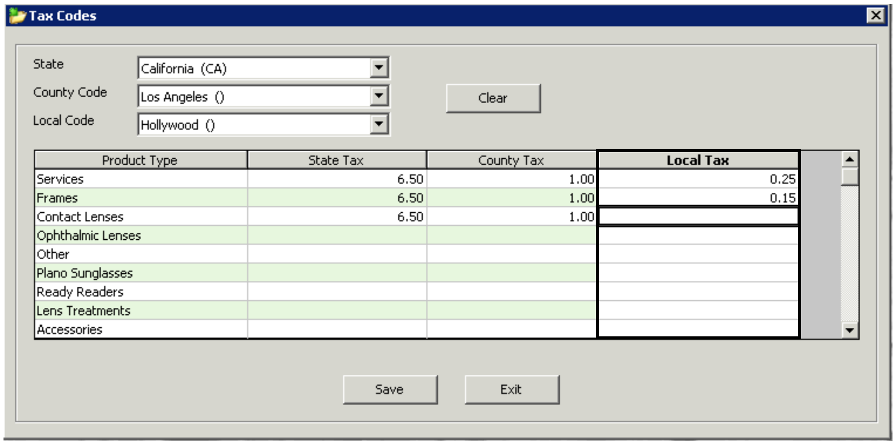
State California (CA)

County

County	Code	Delete
Orange		☐
Riverside		☐
San Diego		☐
Los Angeles		☐

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.



State California (CA)
County Code Los Angeles ()
Local Code Hollywood ()

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			

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, 86
- To select soft contact order preferences, 87
- To select hard contact order preferences, 89

▶ 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.

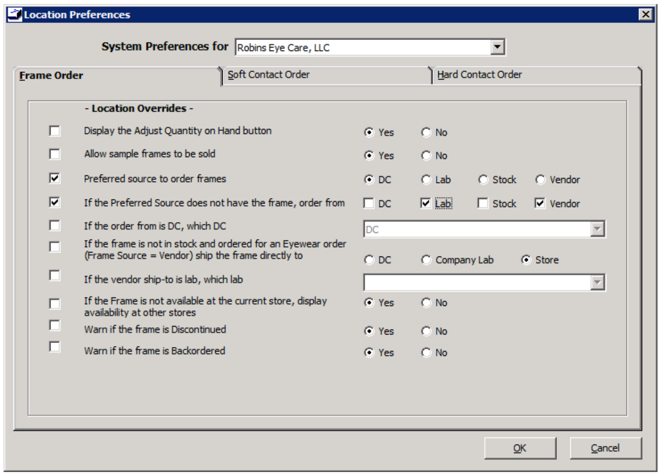
NOTE	A dialog will display warning the user that he or she is selling the sample.

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 stack 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.



System Preferences for: Robins Eye Care, LLC

☐ Display the Adjust Quantity on Hand button ● Yes ○ No
☐ Allow sample frames to be sold ● Yes ○ No
☑ Preferred source to order frames ● DC ○ Lab ○ Stock ○ Vendor
☑ If the Preferred Source does not have the frame, order from ☐ DC ☑ Lab ☐ Stock ☑ Vendor
☐ If the order from is DC, which DC: DC
☐ If the frame is not in stock and ordered for an Eyewear order (Frame Source = Vendor) ship the frame directly to ○ DC ○ Company Lab ● Store
☐ If the vendor ship-to is lab, which lab
☐ If the Frame is not available at the current store, display availability at other stores ● Yes ○ No
☐ Warn if the frame is Discontinued ● Yes ○ No
☐ Warn if the frame is Backordered ● Yes ○ No

▶ 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.

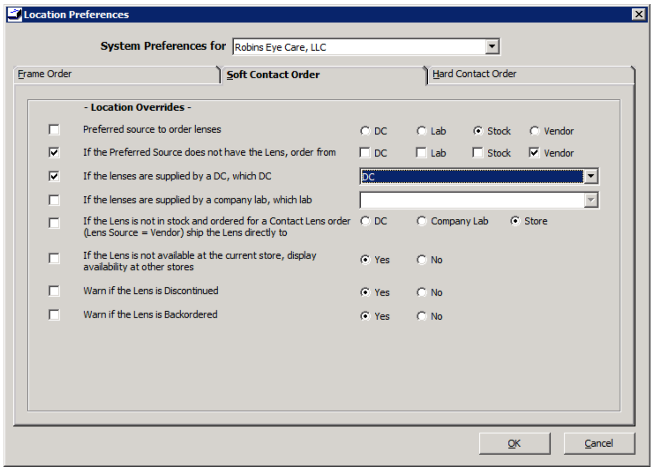
NOTES	• If your practice is setting up location inventory preferences for the first time, select All to set defaults for all locations. Later, select the individual stores to change only those defaults that are different from other locations. • Changes made to these preferences do not take effect until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

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



System Preferences for: Robins Eye Care, LLC

- Location Overrides -

☐ Preferred source to order lenses ○ DC ○ Lab ● Stock ○ Vendor
☑ If the Preferred Source does not have the Lens, order from ☐ DC ☐ Lab ☐ Stock ☑ Vendor
☑ If the lenses are supplied by a DC, which DC: DC
☐ If the lenses are supplied by a company lab, which lab:
☐ If the Lens is not in stock and ordered for a Contact Lens order (Lens Source = Vendor) ship the Lens directly to ○ DC ○ Company Lab ● Store
☐ If the Lens is not available at the current store, display availability at other stores ● Yes ○ No
☐ Warn if the Lens is Discontinued ● Yes ○ No
☐ Warn if the Lens is Backordered ● Yes ○ No

▶ To select hard 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

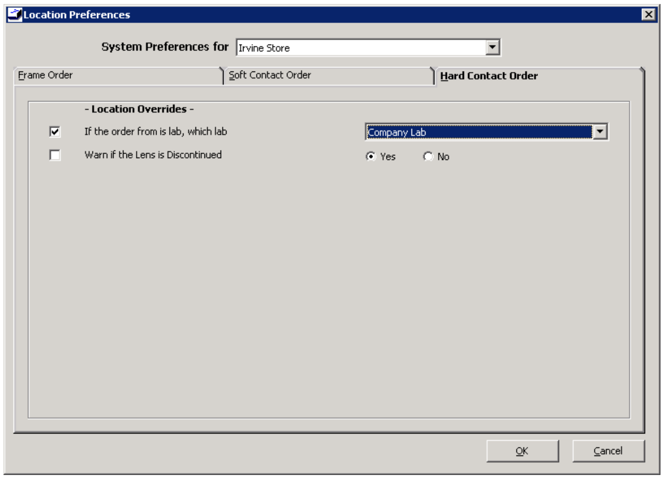
   Select a store from the **System Preference For** drop-down menu to set the preferences for an individual location.

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 **Hard 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 an internal lab from the **Lab to Supply Hard Contact Lens Orders** drop-down menu, as needed.
7. 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.

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



System Preferences for: Irvine Store

- Location Overrides -

☑ If the order from is lab, which lab: Company Lab

☐ Warn if the Lens is Discontinued: ● Yes ○ No

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, 90
- To select discount products, 91
- To build discount groups, 92
- To set up discounts and packages, 94

For more information on setting up discounts and packages, watch the "Discount & Packages" 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 90.
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.

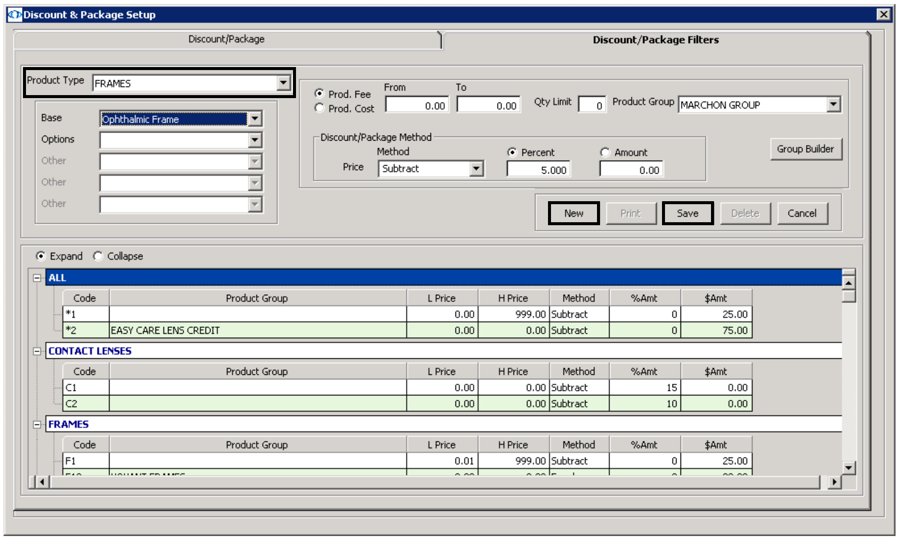
    OR

    Click **Group Builder** to create a new product group. For information on creating discount groups, go to To build discount groups on page 92.

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.



Product Type: FRAMES
Base: Ophthalmic Frame
Options:
Other:
Other:
Other:
● Prod. Fee ○ Prod. Cost
From: 0.00
To: 0.00
Qty Limit: 0
Product Group: MARCHON GROUP
Discount/Package Method
Price Method: Subtract
● Percent: 5.000
○ Amount: 0.00
● Expand ○ Collapse

ALL

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

Code	Product Group	L Price	H Price	Method	%Amt	$Amt
C1		0.00	0.00	Subtract	15	0.00
C2		0.00	0.00	Subtract	10	0.00

FRAMES

Code	Product Group	L Price	H Price	Method	%Amt	$Amt
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 94.

▶ 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 90.
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.

5. 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.

6. Click **Find Products** to locate products to add to the discount group.

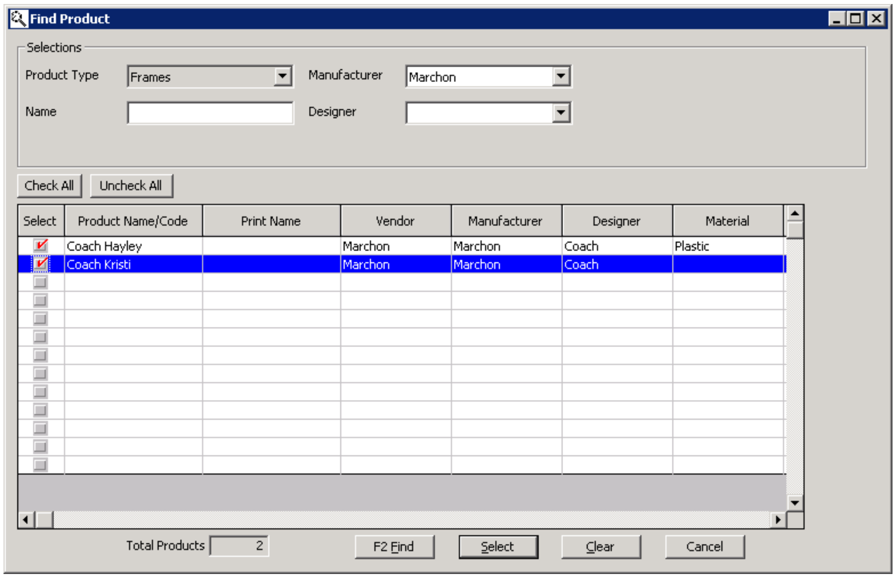
   The Find Product window opens.

7. Type the first few letters of the name of the product(s) that you want to find in the **Name** field as needed.
8. Select a manufacturer from the **Manufacturer** drop-down menu if it is available and if it is needed to refine your search.
9. Select a designer from the **Designer** drop-down menu as needed.
10. Click **F2 Find** to locate the product(s).
11. 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.

12. Click **Select** to save your selections.
13. Repeat steps 7–12 to add additional products to the group as needed.



Product Type: Frames
Manufacturer: Marchon
Name:
Designer:

Select	Product Name/Code	Print Name	Vendor	Manufacturer	Designer	Material
☑	Coach Hayley		Marchon	Marchon	Coach	Plastic
☑	Coach Kristi		Marchon	Marchon	Coach	

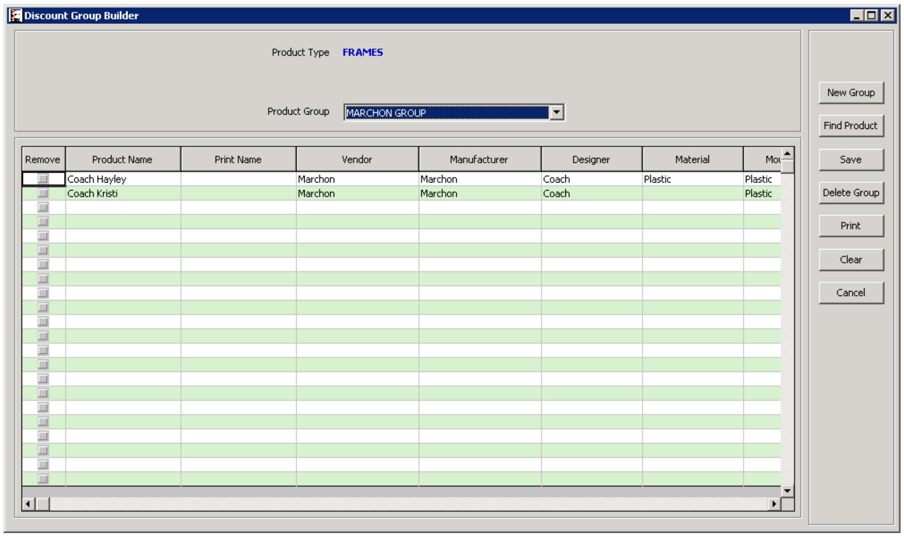
Total Products: 2

14. Close the Find Product window when you are finished.

    The products you selected are displayed in the Discount Group Builder window.

15. 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.



Product Type FRAMES

Product Group MARCHON GROUP

Remove	Product Name	Print Name	Vendor	Manufacturer	Designer	Material	Mo
☐	Coach Hayley		Marchon	Marchon	Coach	Plastic	Plastic
☐	Coach Kristi		Marchon	Marchon	Coach		Plastic

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 91.

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 90.
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 charges being assigned or allocated to insurance. 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 opthalmic lenses and get a free scratch coat.* • Discounts are applied to the fee slip after charges have been assigned or allocated to insurance. 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.

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.

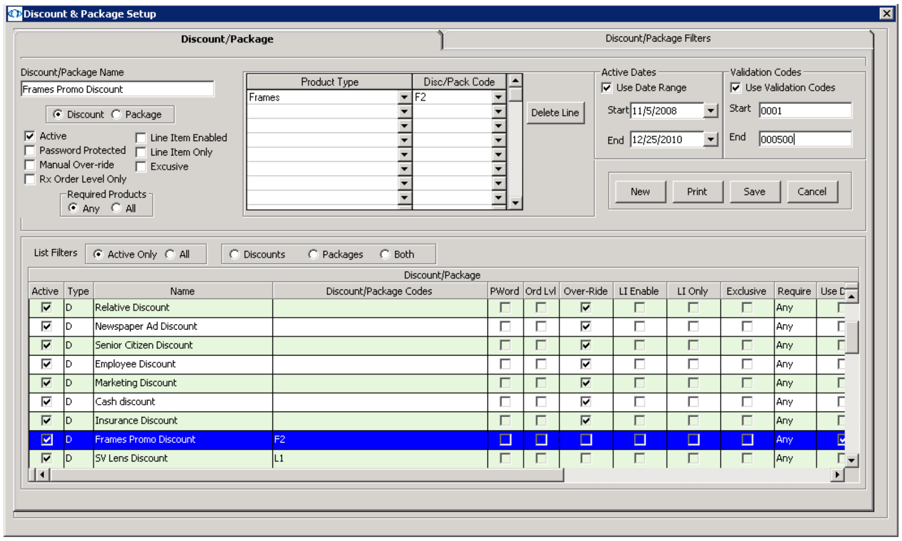
NOTES

- 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 91.
- 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.



Discount & Package Setup

Discount/Package Name: Frames Promo Discount
● Discount ○ Package
☑ Active
☐ Password Protected
☐ Manual Over-ride
☐ Rx Order Level Only
☐ Line Item Enabled
☐ Line Item Only
☐ Excusive
Required Products: ● Any ○ All

Product Type	Disc/Pack Code
Frames	F2

Active Dates
☑ Use Date Range
Start 11/5/2008
End 12/25/2010

Validation Codes
☑ Use Validation Codes
Start 0001
End 000500

List Filters: ● Active Only ○ All
○ Discounts ○ Packages ○ Both

Active	Type	Name	Discount/Package Codes	PWord	Ord Lvl	Over-Ride	LI Enable	LI Only	Exclusive	Require	Use D
☑	D	Relative Discount		☐	☐	☑	☐	☐	☐	Any	☐
☑	D	Newspaper Ad Discount		☐	☐	☑	☐	☐	☐	Any	☐
☑	D	Senior Citizen Discount		☐	☐	☑	☐	☐	☐	Any	☐
☑	D	Employee Discount		☐	☐	☑	☐	☐	☐	Any	☐
☑	D	Marketing Discount		☐	☐	☑	☐	☐	☐	Any	☐
☑	D	Cash discount		☐	☐	☑	☐	☐	☐	Any	☐
☑	D	Insurance Discount		☐	☐	☑	☐	☐	☐	Any	☐
☑	D	Frames Promo Discount	F2	☐	☐	☐	☐	☐	☐	Any	☑
☑	D	SV Lens Discount	L1	☐	☐	☐	☐	☐	☐	Any	☐

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

Setting Up Security

For more information on setting up security preferences, watch the "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, 97
- Creating, Modifying, & Copying Security Roles, 99
- Assigning Roles and Passwords to Users, 107
- Setting Up Security Preferences, 108

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.

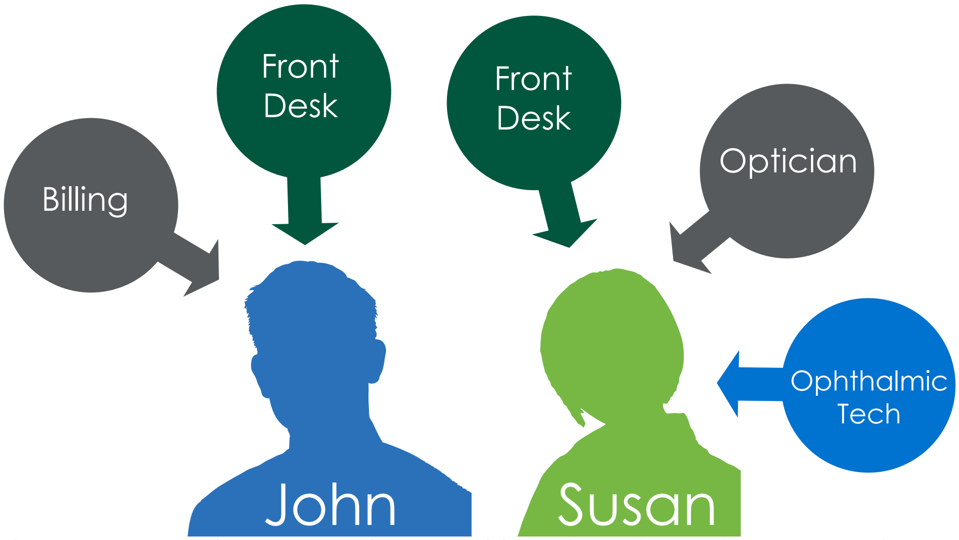

Billing
Front Desk
Front Desk
Optician
Ophthalmic Tech
John
Susan

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.

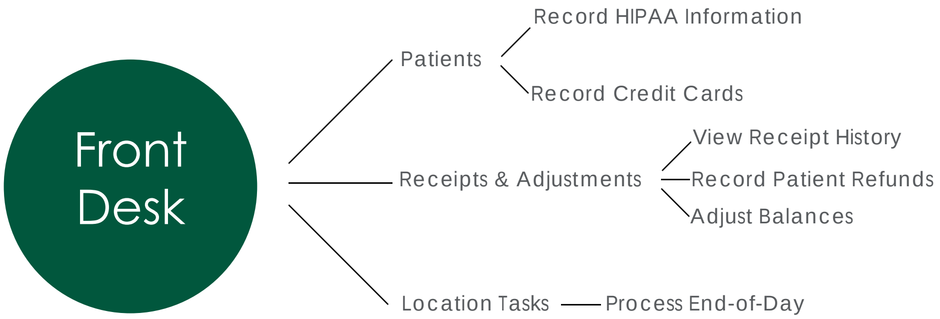

Front Desk
Patients
Record HIPAA Information
Record Credit Cards
Receipts & Adjustments
View Receipt History
Record Patient Refunds
Adjust Balances
Location Tasks
Process End-of-Day

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 99.

Creating, Modifying, & Copying Security Roles

For more information on setting up security preferences, watch the "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 97. 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, 100
- To change the name of a role, 102
- To copy a role, 102
- To define role details, 103

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 107 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:

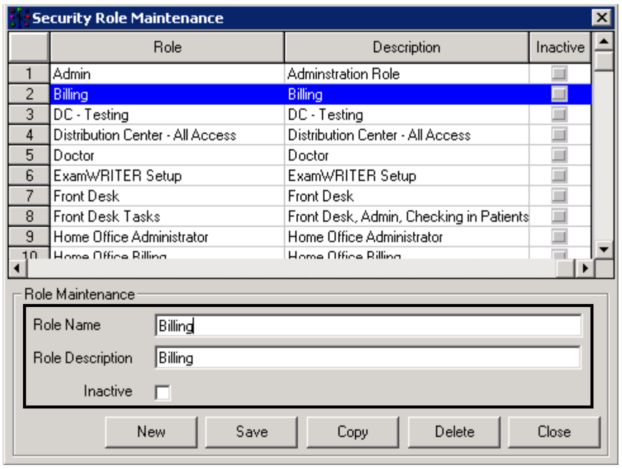
1. Click the Ellipses (**...**) next to the Role text box.

   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.”

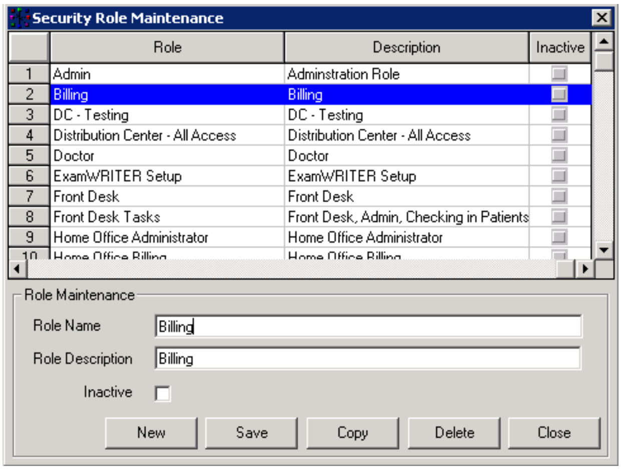
3. Type a description of the new role in the **Role Description** text box.
4. If you don’t want the role to be assigned to anyone yet, select the **Inactive** check box.



	Role	Description	Inactive
1	Admin	Adminstration Role	☐
2	Billing	Billing	☐
3	DC - Testing	DC - Testing	☐
4	Distribution Center - All Access	Distribution Center - All Access	☐
5	Doctor	Doctor	☐
6	ExamWRITER Setup	ExamWRITER Setup	☐
7	Front Desk	Front Desk	☐
8	Front Desk Tasks	Front Desk, Admin, Checking in Patients	☐
9	Home Office Administrator	Home Office Administrator	☐
10	Home Office Billing	Home Office Billing	☐

Role Name: Billing
Role Description: Billing
Inactive ☐

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.



	Role	Description	Inactive
1	Admin	Adminstration Role	☐
2	Billing	Billing	☐
3	DC - Testing	DC - Testing	☐
4	Distribution Center - All Access	Distribution Center - All Access	☐
5	Doctor	Doctor	☐
6	ExamWRITER Setup	ExamWRITER Setup	☐
7	Front Desk	Front Desk	☐
8	Front Desk Tasks	Front Desk, Admin, Checking in Patients	☐
9	Home Office Administrator	Home Office Administrator	☐
10	Home Office Billing	Home Office Billing	☐

Role Name: Billing
Role Description: Billing
Inactive ☐

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 103.

▶ 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 103.

▶ 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 103.

▶ 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

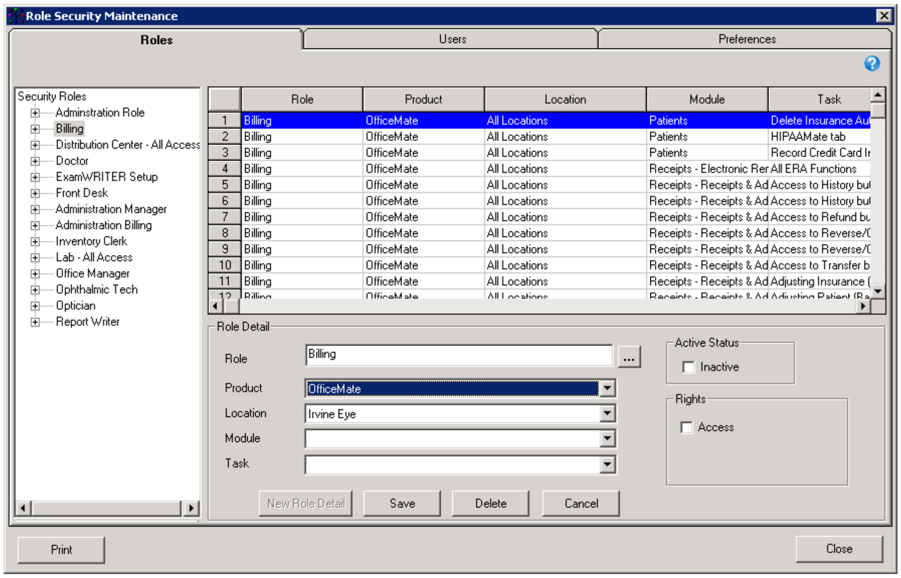
- The areas of access that you assign to a role can be as broad or limiting as you desire.
- You can assign multiple functions to a role so that a single role can access various parts of the software.
- You can assign multiple roles to a user, so you don't need to squeeze all of an individual's access 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.

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



Security Roles
- Adminstration Role
- Billing
- Distribution Center - All Access
- Doctor
- ExamWRITER Setup
- Front Desk
- Administration Manager
- Administration Billing
- Inventory Clerk
- Lab - All Access
- Office Manager
- Ophthalmic Tech
- Optician
- Report Writer

	Role	Product	Location	Module	Task
1	Billing	OfficeMate	All Locations	Patients	Delete Insurance Au
2	Billing	OfficeMate	All Locations	Patients	HIPAAMate tab
3	Billing	OfficeMate	All Locations	Patients	Record Credit Card Ir
4	Billing	OfficeMate	All Locations	Receipts - Electronic Rer	All ERA Functions
5	Billing	OfficeMate	All Locations	Receipts - Receipts & Ad	Access to History bu
6	Billing	OfficeMate	All Locations	Receipts - Receipts & Ad	Access to History bu
7	Billing	OfficeMate	All Locations	Receipts - Receipts & Ad	Access to Refund bu
8	Billing	OfficeMate	All Locations	Receipts - Receipts & Ad	Access to Reverse/(
9	Billing	OfficeMate	All Locations	Receipts - Receipts & Ad	Access to Reverse/(
10	Billing	OfficeMate	All Locations	Receipts - Receipts & Ad	Access to Transfer b
11	Billing	OfficeMate	All Locations	Receipts - Receipts & Ad	Adjusting Insurance (

Role Detail

Role: Billing
Product: OfficeMate
Location: Irvine Eye
Module:
Task:

Active Status
☐ Inactive

Rights
☐ Access

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 our 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.

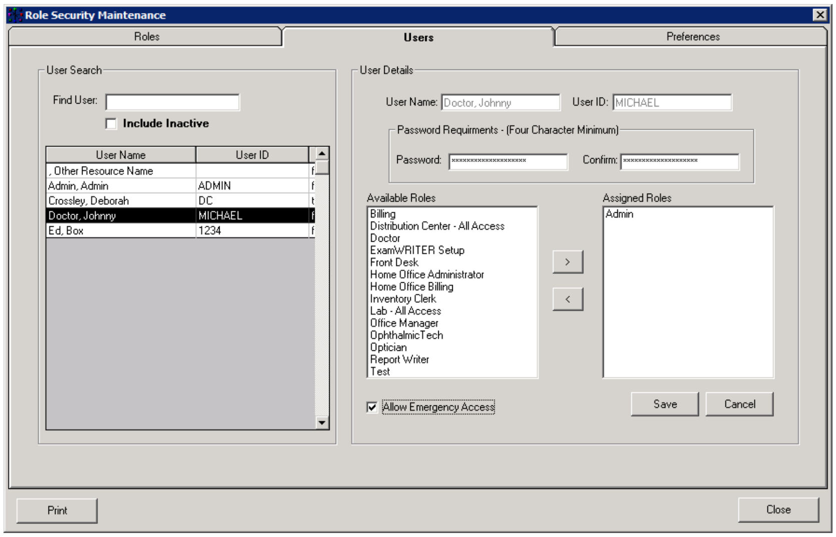
To assign roles to users, perform the following steps:

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 129.

7. Click **Save**.

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


Role Security Maintenance
Roles
Users
Preferences
User Search
User Details
Password Requirments - (Four Character Minimum)
Available Roles
Assigned Roles
>
<
Save
Cancel
Print
Close

Find User:

☐ Include Inactive

User Name	User ID	
, Other Resource Name		f
Admin, Admin	ADMIN	f
Crossley, Deborah	DC	t
Doctor, Johnny	MICHAEL	f
Ed, Box	1234	f

User Name: Doctor, Johnny

User ID: MICHAEL

Password: ********************

Confirm: ********************

Available Roles:
Billing
Distribution Center - All Access
Doctor
ExamWRITER Setup
Front Desk
Home Office Administrator
Home Office Billing
Inventory Clerk
Lab - All Access
Office Manager
OphthalmicTech
Optician
Report Writer
Test

Assigned Roles:
Admin

☑ Allow Emergency Access

Setting Up Security Preferences

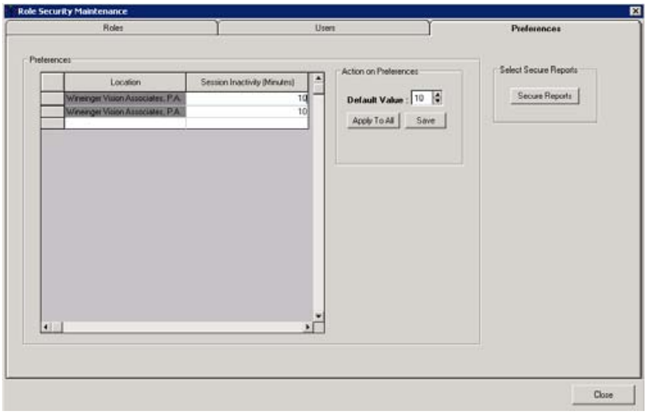
Security preferences allow you to control, globally or by location, the amount of time a user may be inactive before being logged out of the software and establish which reports are secure. This section tells you how to set up security preferences including how

- To set up inactivity periods, 108
- To secure reports, 109

▶ To set up inactivity periods

1. Click **Setup** and select **Security**.
2. Click the **Preferences** tab.
3. 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.
4. 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**.


Role Security Maintenance
Roles
Users
Preferences
Preferences
Action on Preferences
Apply To All
Save
Select Secure Reports
Secure Reports
Close

Location	Session Inactivity (Minutes)
Wineinger Vision Associates, P.A.	10
Wineinger Vision Associates, P.A.	10

Default Value : 10

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

▶ To secure reports

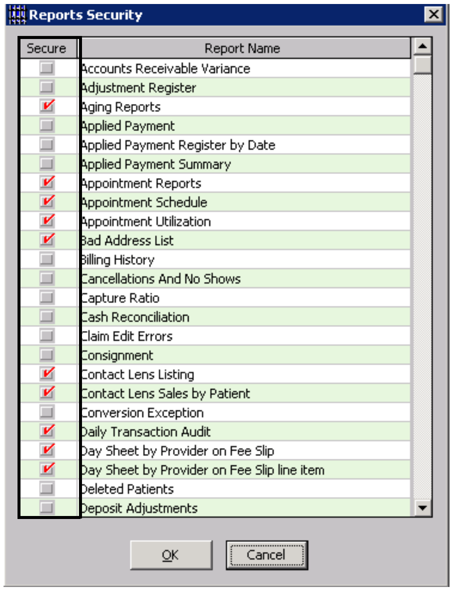
1. Click **Setup** and select **Security**.
2. Click the **Preferences** tab.
3. Click **Secure Reports** to restrict user access to reports.

   The Reports Security window opens.

4. 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 99. For information about assigning roles, go to Assigning Roles and Passwords to Users on page 107.
- Deselected reports are not secured and can be viewed and printed by any user.



Reports Security

Secure	Report Name
☐	Accounts Receivable Variance
☐	Adjustment Register
☑	Aging Reports
☐	Applied Payment
☐	Applied Payment Register by Date
☐	Applied Payment Summary
☑	Appointment Reports
☑	Appointment Schedule
☑	Appointment Utilization
☑	Bad Address List
☐	Billing History
☐	Cancellations And No Shows
☐	Capture Ratio
☐	Cash Reconciliation
☐	Claim Edit Errors
☐	Consignment
☑	Contact Lens Listing
☑	Contact Lens Sales by Patient
☐	Conversion Exception
☑	Daily Transaction Audit
☑	Day Sheet by Provider on Fee Slip
☑	Day Sheet by Provider on Fee Slip line item
☐	Deleted Patients
☐	Deposit Adjustments

5. Click **OK** to close the Reports Security window.
6. 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, 111
- Maintaining Medication Information, 118
- Customizing Exam Data, Exam Text, & Auto Letter Sequences, 124

Setting Up Preferences

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

- To set up general preferences, 111
- To set up report settings preferences, 113
- To set up default preferences, 114
- To set up copy forward preferences, 116
- To set up Rx print option preferences, 117

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

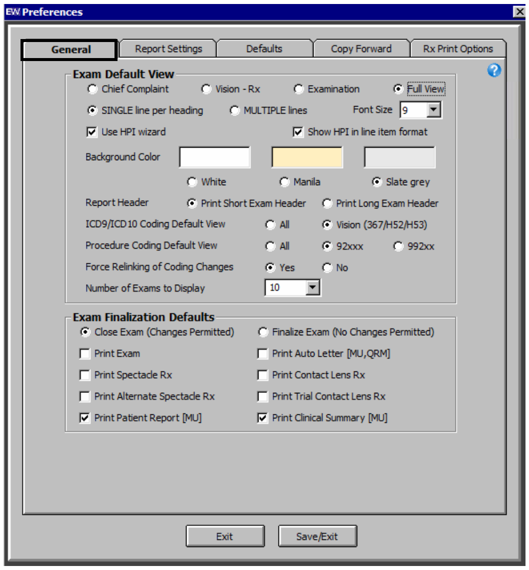
NOTE You can change your ExamWRITER preferences any time you are *not* in an exam record. Close all exam records in the ExamWRITER chart window before changing ExamWRITER preferences.

▶ 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.



Exam Default View

○ Chief Complaint ○ Vision - Rx ○ Examination ● Full View

● SINGLE line per heading ○ MULTIPLE lines Font Size 9

☑ Use HPI wizard ☑ Show HPI in line item format

Background Color ○ White ○ Manila ● Slate grey

Report Header ● Print Short Exam Header ○ Print Long Exam Header

ICD9/ICD10 Coding Default View ○ All ● Vision (367/H52/H53)

Procedure Coding Default View ○ All ● 92xxx ○ 992xx

Force Relinking of Coding Changes ● Yes ○ No

Number of Exams to Display 10

Exam Finalization Defaults

● Close Exam (Changes Permitted) ○ Finalize Exam (No Changes Permitted)

☐ Print Exam ☐ Print Auto Letter [MU,QRM]

☐ Print Spectacle Rx ☐ Print Contact Lens Rx

☐ Print Alternate Spectacle Rx ☐ Print Trial Contact Lens Rx

☑ Print Patient Report [MU] ☑ Print Clinical Summary [MU]

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.

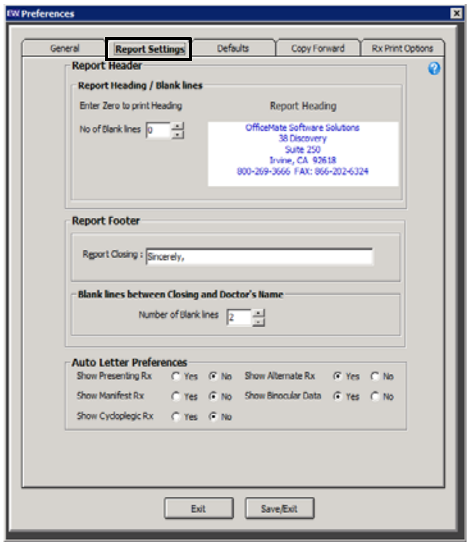
13. Click **Save/Exit** to save your changes and close the Preferences window.

▶ 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.



Report Header

Report Heading / Blank lines

Enter Zero to print Heading

No of Blank lines 0

Report Heading
OfficeMate Software Solutions
38 Discovery
Suite 250
Irvine, CA 92618
800-269-3666 FAX: 866-202-6324

Report Footer

Report Closing : Sincerely,

Blank lines between Closing and Doctor's Name

Number of Blank lines 2

Auto Letter Preferences

Show Presenting Rx ○ Yes ● No
Show Alternate Rx ● Yes ○ No
Show Manifest Rx ○ Yes ● No
Show Binocular Data ● Yes ○ No
Show Cycloplegic Rx ○ Yes ● No

3. 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.

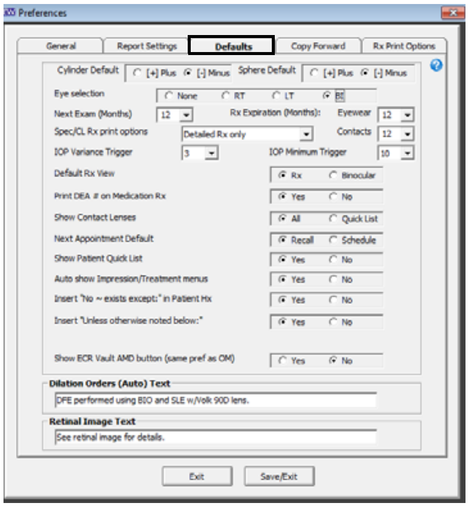
4. Type the **Report Closing** that you want to appear in your report footer.
5. Enter the number of blank lines that you want to appear between the closing and doctor's name.
6. Select appropriate **Auto Letter Preferences** Yes or No radio buttons to display or hide the presenting Rx, manifest Rx,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

▶ To set up default preferences

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

   The Preferences window opens.

2. Click the **Defaults** tab.



Cylinder Default ○ [+] Plus ● [-] Minus
Sphere Default ○ [+] Plus ● [-] Minus
Eye selection ○ None ○ RT ○ LT ● BI
Next Exam (Months) 12
Rx Expiration (Months): Eyewear 12
Contacts 12
Spec/CL Rx print options Detailed Rx only
IOP Variance Trigger 3
IOP Minimum Trigger 10
Default Rx View ● Rx ○ Binocular
Print DEA # on Medication Rx ● Yes ○ No
Show Contact Lenses ● All ○ Quick List
Next Appointment Default ● Recall ○ Schedule
Show Patient Quick List ● Yes ○ No
Auto show Impression/Treatment menus ● Yes ○ No
Insert "No ~ exists except:" in Patient Hx ● Yes ○ No
Insert "Unless otherwise noted below:" ● Yes ○ No
Show ECR Vault AMD button (same pref as OM) ○ Yes ● No

Dilation Orders (Auto) Text
DFE performed using BIO and SLE w/Volk 90D lens.

Retinal Image Text
See retinal image for details.

3. Select the appropriate default **Cylinder Default Sign**.

   The default is [-] Minus.

4. Select the appropriate default **Sphere Default Sign**.

   The default is [-] Minus.

5. 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.

6. 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.

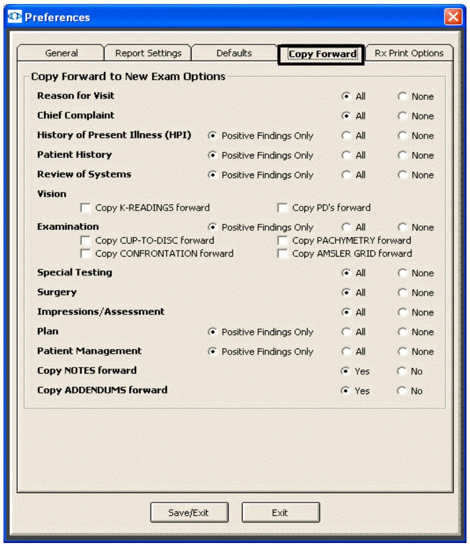
23. Click **Save/Exit** to save your changes and close the Preferences window.

▶ 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.

2. Click the **Copy Forward** tab.


Preferences
General
Report Settings
Defaults
Copy Forward
Rx Print Options
Save/Exit
Exit

Copy Forward to New Exam Options

Reason for Visit ● All ○ None
Chief Complaint ● All ○ None
History of Present Illness (HPI) ● Positive Findings Only ○ All ○ None
Patient History ● Positive Findings Only ○ All ○ None
Review of Systems ● Positive Findings Only ○ All ○ None
Vision
☐ Copy K-READINGS forward ☐ Copy PD's forward
Examination ● Positive Findings Only ○ All ○ None
☐ Copy CUP-TO-DISC forward ☐ Copy PACHYMETRY forward
☐ Copy CONFRONTATION forward ☐ Copy AMSLER GRID forward
Special Testing ● All ○ None
Surgery ● All ○ None
Impressions/Assessment ● All ○ None
Plan ● Positive Findings Only ○ All ○ None
Patient Management ● Positive Findings Only ○ All ○ None
Copy NOTES forward ● Yes ○ No
Copy ADDENDUMS forward ● Yes ○ No

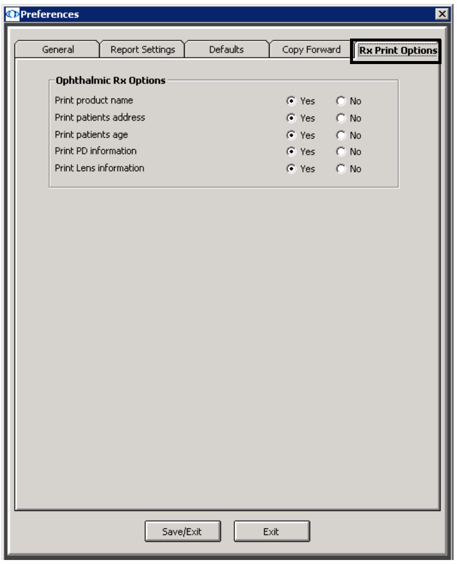
3. Select the appropriate **Copy Forward To New Exam Options** to copy former patient specific exam template information to a new patient exam.
4. Click **Save/Exit** to save your changes and close the Preferences window.

▶ To set up Rx print option preferences

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

   The Preferences window opens.

2. Click the **Rx Print Options** tab.


Preferences
General
Report Settings
Defaults
Copy Forward
Rx Print Options
Save/Exit
Exit

Ophthalmic Rx Options

Print product name ● Yes ○ No
Print patients address ● Yes ○ No
Print patients age ● Yes ○ No
Print PD information ● Yes ○ No
Print Lens information ● Yes ○ No

3. Select appropriate **Ophthalmic Rx Options**.
4. 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, 118
- To add new medication information, 120
- To delete medication information, 122

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**.

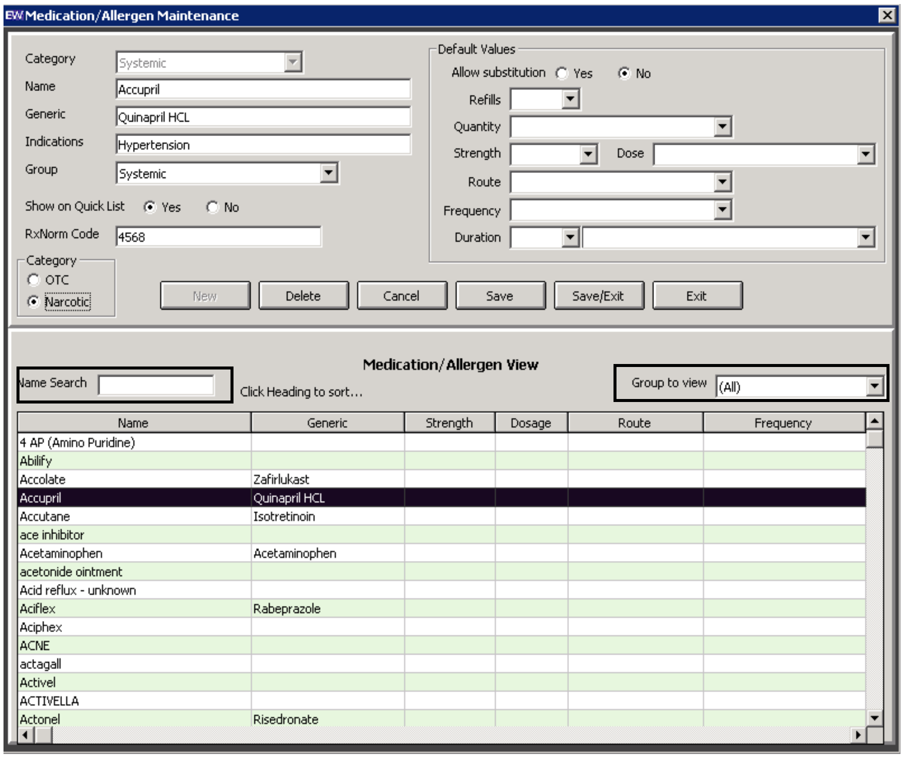
   The Medications Maintenance window opens with a list of the most commonly prescribed medications.

2. 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.



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:
Quantity:
Strength: Dose:
Route:
Frequency:
Duration:

Name Search:
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				
acetonide ointment					
Acid reflux - unknown					
Aciflex	Rabeprazole				
Aciphex					
ACNE					
actagall					
Activel					
ACTIVELLA					
Actonel	Risedronate				

3. 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.

4. Click the **Yes** radio button to show the medication in the Quick List of medications.

   OR

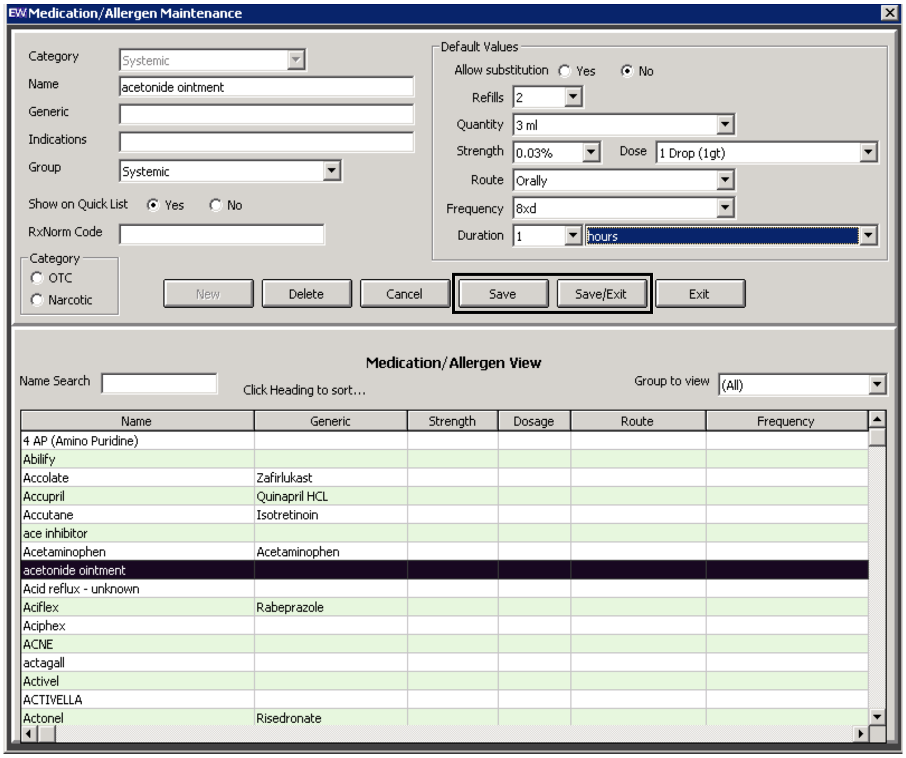
   Click the **No** radio button to keep the medication in the database, but hide it in the Quick List of medications.

5. Modify the **Category, Name**, **Generic, Indications**, **Group**, and **Default Values** information.

6. 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.



Medication/Allergen Maintenance

Category: Systemic
Name: acetonide 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

Medication/Allergen View

Name Search:
Click Heading to sort...
Group to view: (All)

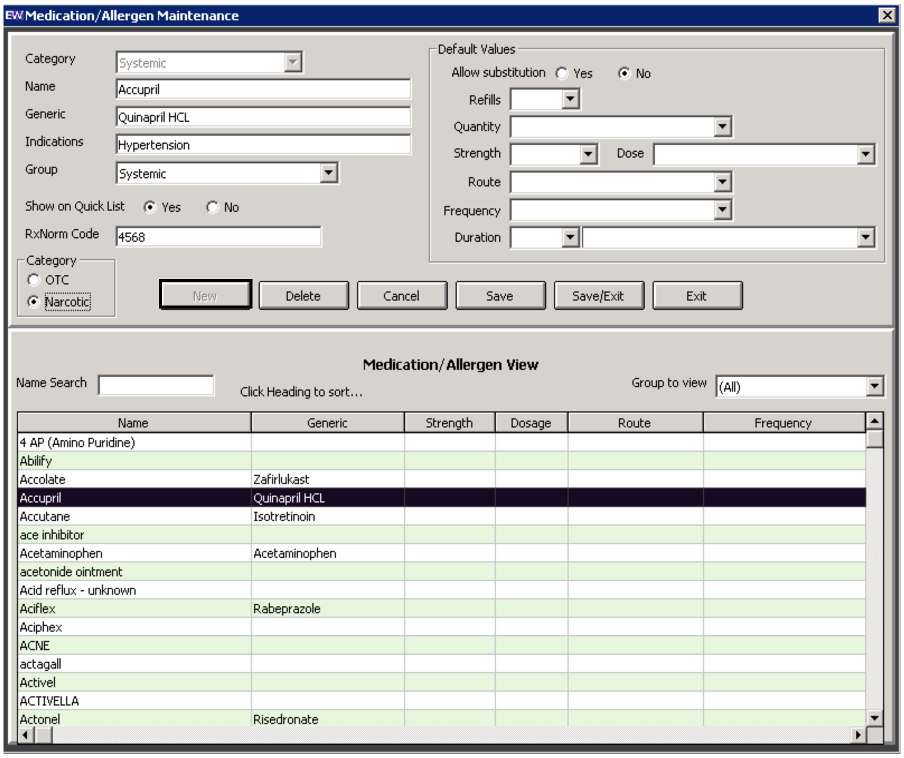
Name	Generic	Strength	Dosage	Route	Frequency
4 AP (Amino Puridine)					
Abilify					
Accolate	Zafirlukast				
Accupril	Quinapril HCL				
Accutane	Isotretinoin				
ace inhibitor					
Acetaminophen	Acetaminophen				
acetonide ointment					
Acid reflux - unknown					
Aciflex	Rabeprazole				
Aciphex				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

▶ To add new 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.

2. Click **New**.



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
Quantity
Strength
Dose
Route
Frequency
Duration

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				
acetonide ointment					
Acid reflux - unknown					
Aciflex	Rabeprazole				
Aciphex					
ACNE					
actagall					
Activel					
ACTIVELLA					
Actonel	Risedronate				

3. Click the **Yes** radio button to show the medication in the Quick List of medications.

   OR

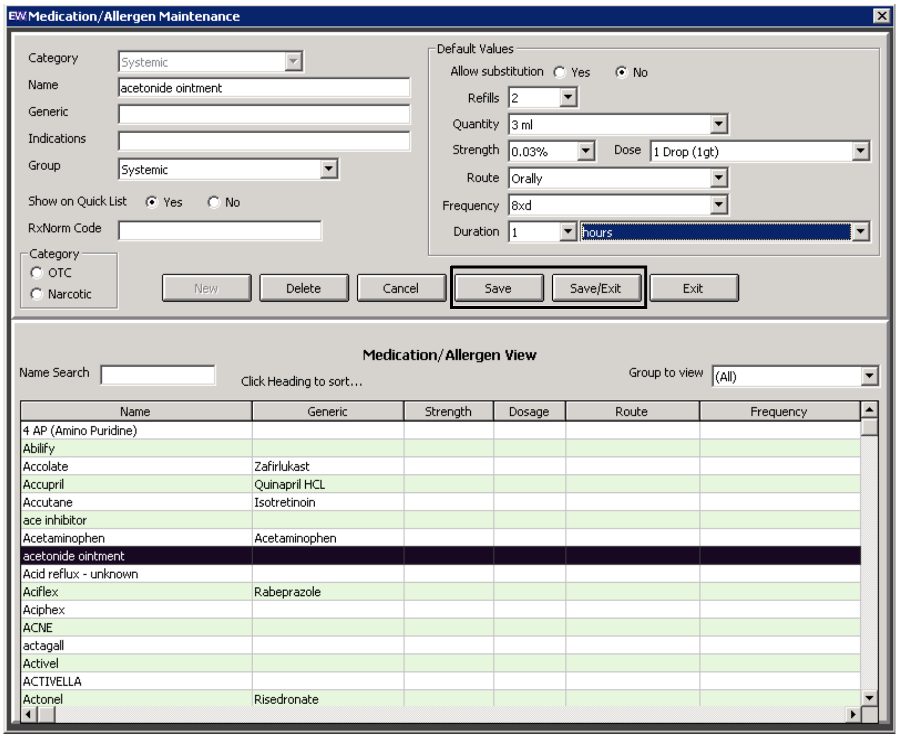
   Click the **No** radio button to keep the medication in the database, but hide it in the Quick List of medications.

4. Add information to the **Category**, **Name**, **Generic**, **Indications**, **Group**, and **Default Values** text boxes and drop-down menus.

5. 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
Default Values
New
Delete
Cancel
Save
Save/Exit
Exit
Medication/Allergen View
Click Heading to sort…

Category: Systemic
Name: acetonide ointment
Generic:
Indications:
Group: Systemic
Show on Quick List ● Yes ○ No
RxNorm Code:
Category ○ OTC ○ Narcotic
Allow substitution ○ Yes ● No
Refills: 2
Quantity: 3 ml
Strength: 0.03%
Dose: 1 Drop (1gt)
Route: Orally
Frequency: 8xd
Duration: 1 hours
Name Search:
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				
acetonide ointment					
Acid reflux - unknown					
Aciflex	Rabeprazole				
Aciphex					
ACNE					
actagall					
Activel					
ACTIVELLA					
Actonel	Risedronate				

▶ To delete medication information

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

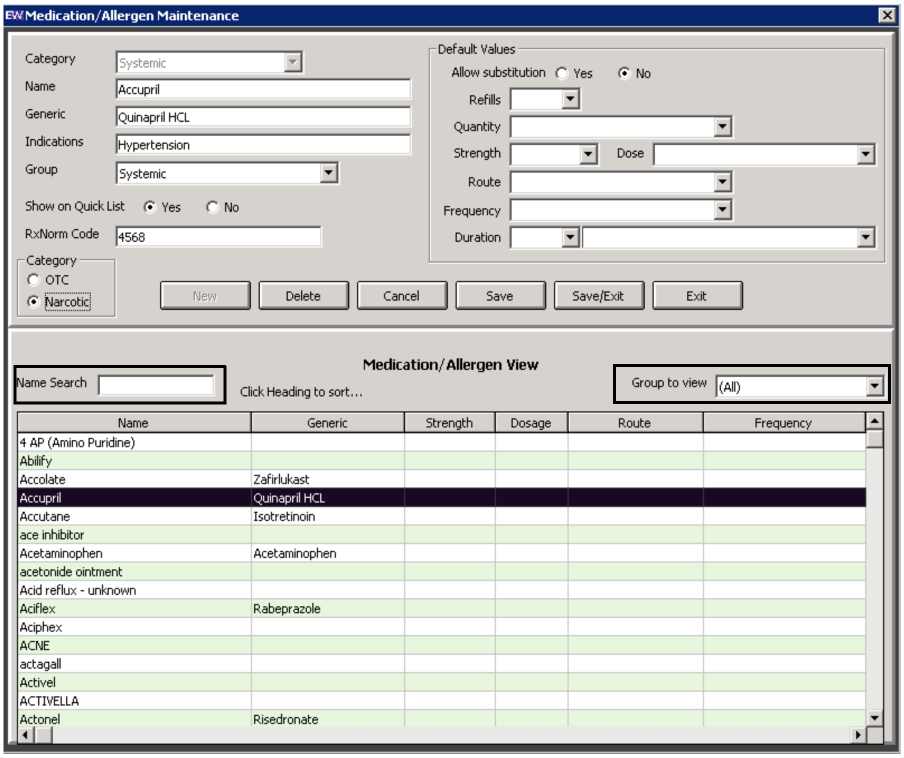
   The Medications Maintenance window opens with a list of the most commonly prescribed medications.

2. 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.


EW Medication/Allergen Maintenance
Default Values
New
Delete
Cancel
Save
Save/Exit
Exit
Medication/Allergen View
Click Heading to sort...

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

Allow substitution ○ Yes ● No
Refills:
Quantity:
Strength:
Dose:
Route:
Frequency:
Duration:

Name Search:
Group to view: (All)

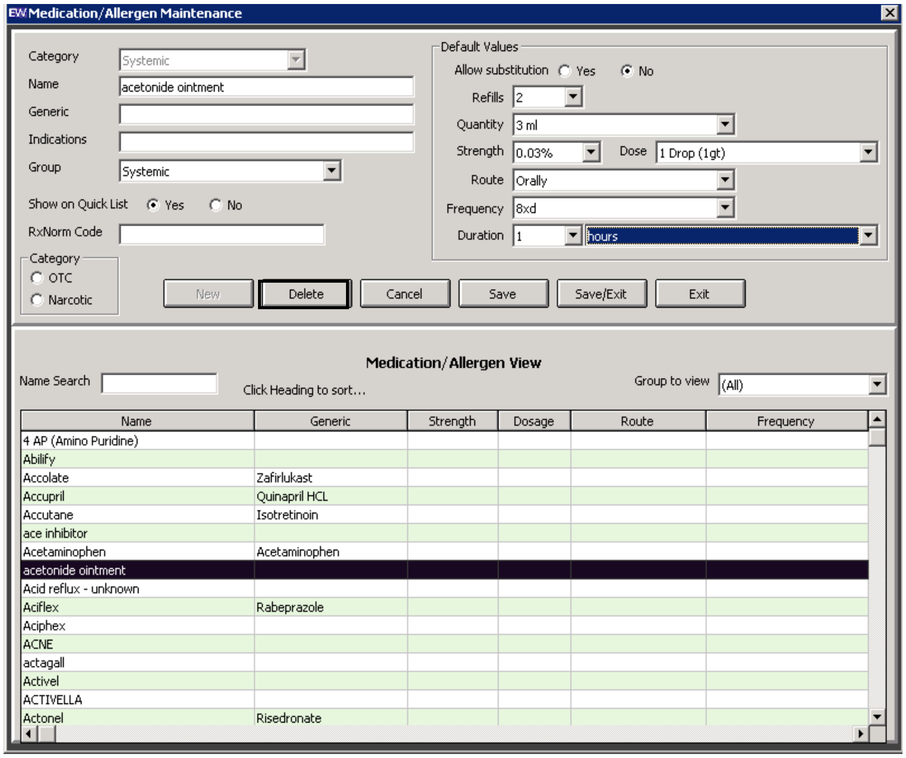
Name	Generic	Strength	Dosage	Route	Frequency
4 AP (Amino Puridine)					
Abilify					
Accolate	Zafirlukast				
Accupril	Quinapril HCL				
Accutane	Isotretinoin				
ace inhibitor					
Acetaminophen	Acetaminophen				
acetonide ointment					
Acid reflux - unknown					
Aciflex	Rabeprazole				
Aciphex				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

3. 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.

4. Click **Delete**.

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



Category: Systemic
Name: acetonide 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

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				
acetonide ointment					
Acid reflux - unknown					
Aciflex	Rabeprazole				
Aciphex					
ACNE					
actagall					
Activel					
ACTIVELLA					
Actonel	Risedronate				

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

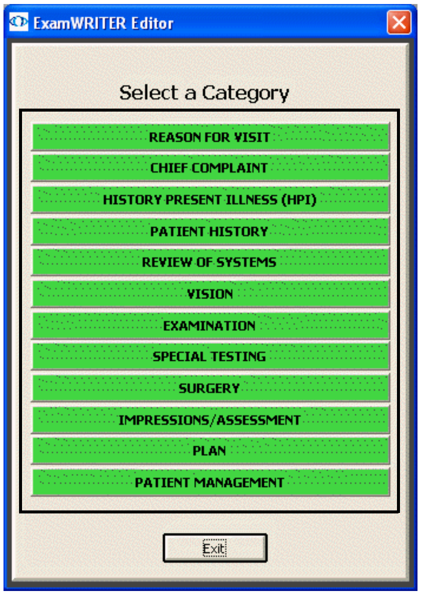
Customizing Exam Data, Exam Text, & Auto Letter Sequences

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

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

   The ExamWRITER Editor window opens.

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

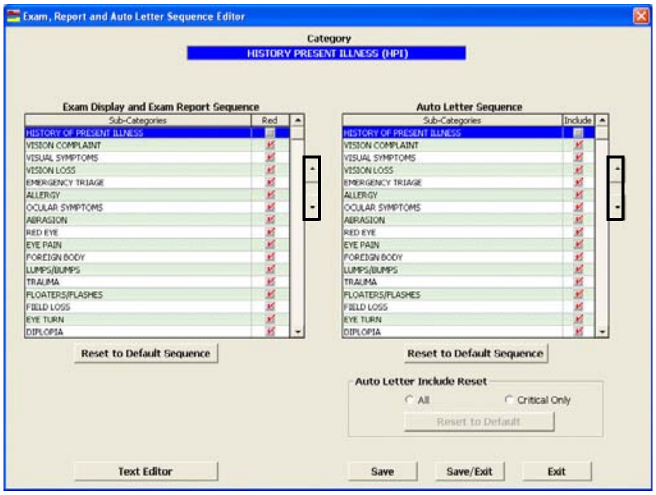

ExamWRITER Editor
Select a Category
REASON FOR VISIT
CHIEF COMPLAINT
HISTORY PRESENT ILLNESS (HPI)
PATIENT HISTORY
REVIEW OF SYSTEMS
VISION
EXAMINATION
SPECIAL TESTING
SURGERY
IMPRESSIONS/ASSESSMENT
PLAN
PATIENT MANAGEMENT
Exit

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

3. 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.


Exam, Report and Auto Letter Sequence Editor

Category: HISTORY PRESENT ILLNESS (HPI)

Exam Display and Exam Report Sequence

Sub-Categories	Red
HISTORY OF PRESENT ILLNESS	☐
VISION COMPLAINT	☑
VISUAL SYMPTOMS	☑
VISION LOSS	☑
EMERGENCY TRIAGE	☑
ALLERGY	☑
OCULAR SYMPTOMS	☑
ABRASION	☑
RED EYE	☑
EYE PAIN	☑
FOREIGN BODY	☑
LUMPS/BUMPS	☑
TRAUMA	☑
FLOATERS/FLASHES	☑
FIELD LOSS	☑
EYE TURN	☑
DIPLOPIA	☑

Auto Letter Sequence

Sub-Categories	Include
HISTORY OF PRESENT ILLNESS	☐
VISION COMPLAINT	☑
VISUAL SYMPTOMS	☑
VISION LOSS	☑
EMERGENCY TRIAGE	☑
ALLERGY	☑
OCULAR SYMPTOMS	☑
ABRASION	☑
RED EYE	☑
EYE PAIN	☑
FOREIGN BODY	☑
LUMPS/BUMPS	☑
TRAUMA	☑
FLOATERS/FLASHES	☑
FIELD LOSS	☑
EYE TURN	☑
DIPLOPIA	☑

Reset to Default Sequence
Reset to Default Sequence
Auto Letter Include Reset
○ All
○ Critical Only
Reset to Default
Text Editor
Save
Save/Exit
Exit

4. 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.

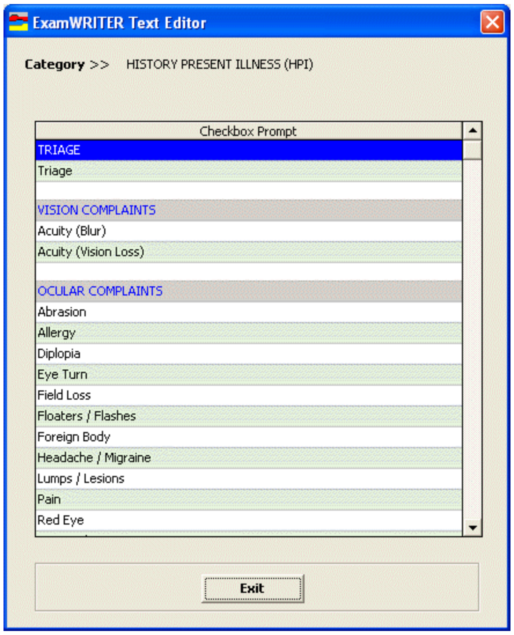
NOTES

- 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.

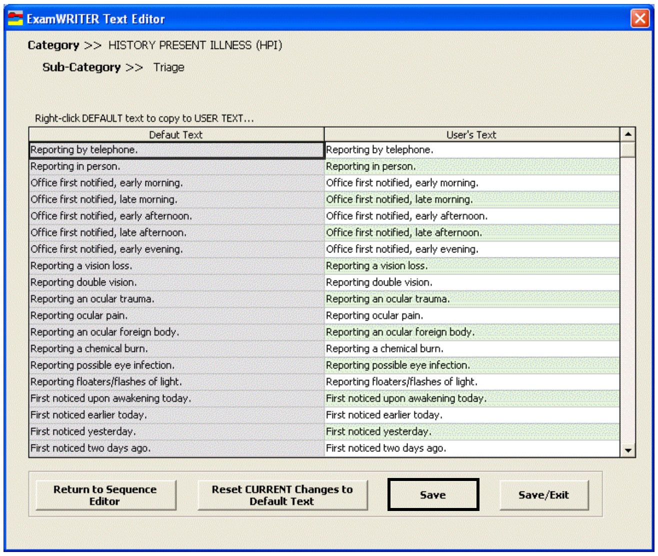
7. Double-click a subcategory to customize the exam text within the category.


ExamWRITER Text Editor
Category >> HISTORY PRESENT ILLNESS (HPI)
Checkbox Prompt
TRIAGE
Triage
VISION COMPLAINTS
Acuity (Blur)
Acuity (Vision Loss)
OCULAR COMPLAINTS
Abrasion
Allergy
Diplopia
Eye Turn
Field Loss
Floaters / Flashes
Foreign Body
Headache / Migraine
Lumps / Lesions
Pain
Red Eye
Exit

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.


ExamWRITER Text Editor
Return to Sequence Editor
Reset CURRENT Changes to Default Text
Save
Save/Exit

Category >> HISTORY PRESENT ILLNESS (HPI)

Sub-Category >> Triage

Right-click DEFAULT text to copy to USER TEXT...

Defaut Text	User's Text
Reporting by telephone.	Reporting by telephone.
Reporting in person.	Reporting in person.
Office first notified, early morning.	Office first notified, early morning.
Office first notified, late morning.	Office first notified, late morning.
Office first notified, early afternoon.	Office first notified, early afternoon.
Office first notified, late afternoon.	Office first notified, late afternoon.
Office first notified, early evening.	Office first notified, early evening.
Reporting a vision loss.	Reporting a vision loss.
Reporting double vision.	Reporting double vision.
Reporting an ocular trauma.	Reporting an ocular trauma.
Reporting ocular pain.	Reporting ocular pain.
Reporting an ocular foreign body.	Reporting an ocular foreign body.
Reporting a chemical burn.	Reporting a chemical burn.
Reporting possible eye infection.	Reporting possible eye infection.
Reporting floaters/flashes of light.	Reporting floaters/flashes of light.
First noticed upon awakening today.	First noticed upon awakening today.
First noticed earlier today.	First noticed earlier today.
First noticed yesterday.	First noticed yesterday.
First noticed two days ago.	First noticed two days ago.

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, 128
- To decrypt the database, 129

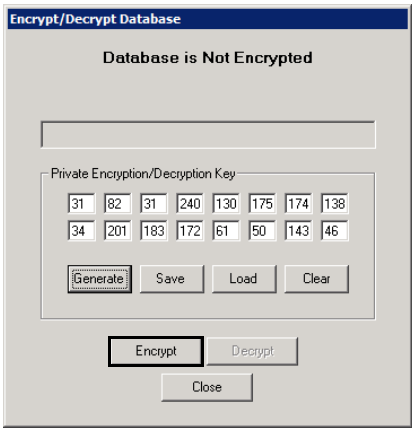
▶ To encrypt the database

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.


Encrypt/Decrypt Database

Database is Not Encrypted

Private Encryption/Decryption Key

31 82 31 240 130 175 174 138
34 201 183 172 61 50 143 46

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

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

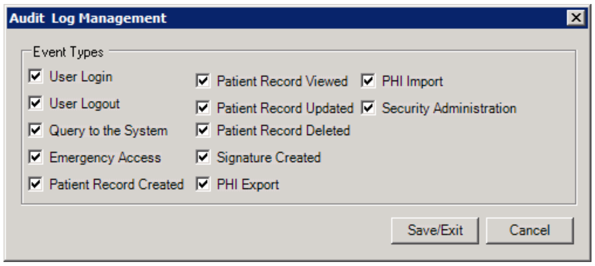
For more information on using the audit log, watch the "Audit Log" video.

- Managing Auditable Transactions, 129
- Viewing & Printing Audit Logs, 130
- Understanding the Audit Log, 131

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.



☑ User Login
☑ User Logout
☑ Query to the System
☑ Emergency Access
☑ Patient Record Created
☑ Patient Record Viewed
☑ Patient Record Updated
☑ Patient Record Deleted
☑ Signature Created
☑ PHI Export
☑ PHI Import
☑ Security Administration

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

For more information on audit logs, watch the "Audit Logs" video.

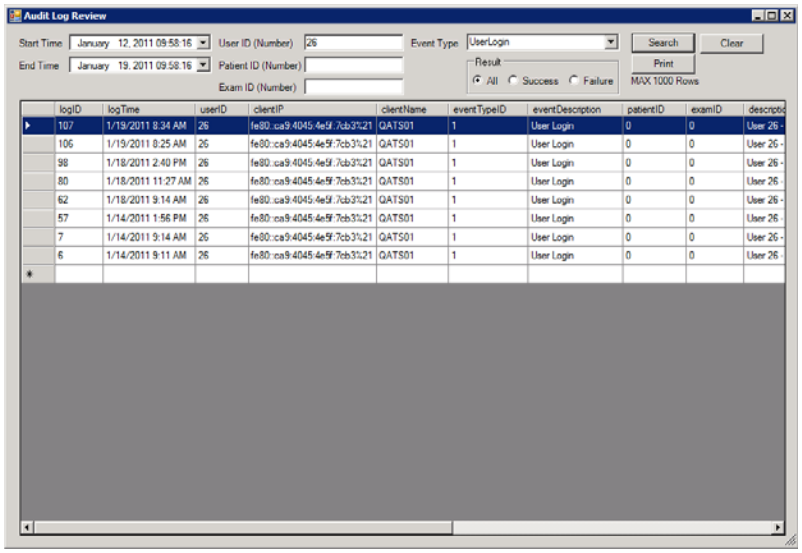
1. Click **Setup** and select **Audit Log Review**.

   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 131.
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:
    a. Double-click an entry to view it in the Audit Log Entry window.
    b. 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.

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



Start Time: January 12, 2011 09:58:16
End Time: January 19, 2011 09:58:16
User ID (Number): 26
Patient ID (Number):
Exam ID (Number):
Event Type: UserLogin
Result: ● All ○ Success ○ Failure

logID	logTime	userID	clientIP	clientName	eventTypeID	eventDescription	patientID	examID	descriptio
107	1/19/2011 8:34 AM	26	fe80::ca9:4045:4e5f:7cb3%21	QATS01	1	User Login	0	0	User 26 -
106	1/19/2011 8:25 AM	26	fe80::ca9:4045:4e5f:7cb3%21	QATS01	1	User Login	0	0	User 26 -
98	1/18/2011 2:40 PM	26	fe80::ca9:4045:4e5f:7cb3%21	QATS01	1	User Login	0	0	User 26 -
80	1/18/2011 11:27 AM	26	fe80::ca9:4045:4e5f:7cb3%21	QATS01	1	User Login	0	0	User 26 -
62	1/18/2011 9:14 AM	26	fe80::ca9:4045:4e5f:7cb3%21	QATS01	1	User Login	0	0	User 26 -
57	1/14/2011 1:56 PM	26	fe80::ca9:4045:4e5f:7cb3%21	QATS01	1	User Login	0	0	User 26 -
7	1/14/2011 9:14 AM	26	fe80::ca9:4045:4e5f:7cb3%21	QATS01	1	User Login	0	0	User 26 -
6	1/14/2011 9:11 AM	26	fe80::ca9:4045:4e5f:7cb3%21	QATS01	1	User Login	0	0	User 26 -

Understanding the Audit Log

For more information on audit logs, watch the "Audit Logs" video.

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 132.
eventDescription	A description of the transaction performed. For more information, refer to Event Types on page 132.
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, a nd 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

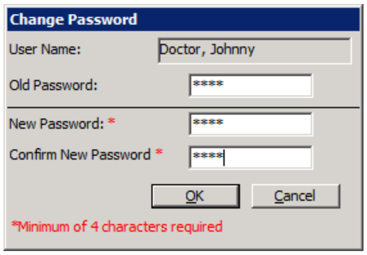
To change your own password, follow the instructions below:

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 97.
- 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.



User Name: Doctor, Johnny

Old Password: ****

New Password: * ****

Confirm New Password * ****

*Minimum of 4 characters required

5. Click **OK**.

Setting Up Insurance Carriers & Plans

2

In this chapter:

For more information on setting up insurance carriers and plans, watch the "Insurance Carriers" and "Insurance Plans" videos.

- Understanding the Insurance Carriers & Plans, 135
- Setting Up Insurance Codes, Modifiers, & Attributes, 136
- Setting Up Insurance Carriers, 147
- Setting Up Insurance Plans, 156
- Setting Up Plan Detailed Benefits, 166
- Setting Up Plan Maximum Allotments, 191
- Setting Up Plan Percentages, 195
- Attaching Electronic Documents to Insurance Carriers & Plans, 196

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. 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.

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 166

For this much detail...	Select this pricing method...	Go to this section for more information...
Moderate detail	Maximum Allotments	Setting Up Plan Maximum Allotments on page 191
Least detail	Percentage	Setting Up Plan Percentages on page 195

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.

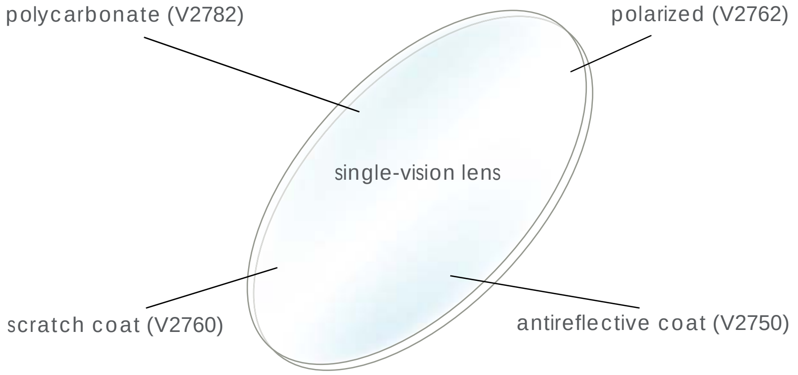


Figure 2-3: An example of the attributes that make up a lens. OfficeMate allows you to select a product and automatically populate the insurance claim with the product's basic attributes.

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, 138
- To add & modify procedure modifiers, 140
- To add & modify attributes, 140
- To add & modify additional attributes, 142
- To add & modify places of service, 143
- To set up lens power range codes, 144
- To set up SNOMED codes, 146

▶ 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

For more information on setting up procedure codes, watch the "Procedure Codes" video.

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.
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).

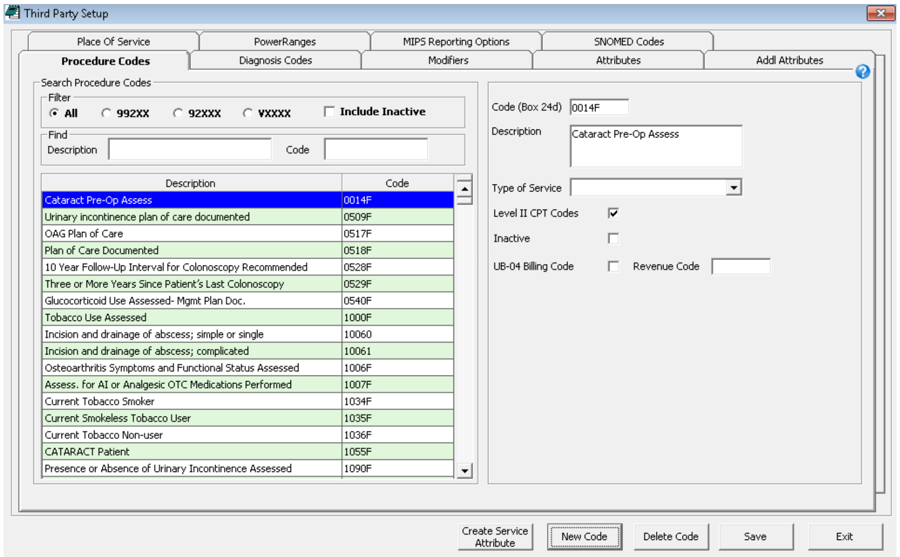
NOTES

- 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 138. For more information on auto populating PQRS codes, go to To set up insurance billing preferences on page 151.

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 140.
11. Click **Save** when you are finished.
12. Repeat steps 2–11 to add or modify additional procedures as needed.


Third Party Setup
Place Of Service
PowerRanges
MIPS Reporting Options
SNOMED Codes
Procedure Codes
Diagnosis Codes
Modifiers
Attributes
Addl Attributes
Search Procedure Codes
Filter
● All
○ 992XX
○ 92XXX
○ VXXXX
☐ Include Inactive
Find
Description
Code
Create Service Attribute
New Code
Delete Code
Save
Exit

Description	Code
Cataract Pre-Op Assess	0014F
Urinary incontinence plan of care documented	0509F
OAG Plan of Care	0517F
Plan of Care Documented	0518F
10 Year Follow-Up Interval for Colonoscopy Recommended	0528F
Three or More Years Since Patient's Last Colonoscopy	0529F
Glucocorticoid Use Assessed- Mgmt Plan Doc.	0540F
Tobacco Use Assessed	1000F
Incision and drainage of abscess; simple or single	10060
Incision and drainage of abscess; complicated	10061
Osteoarthritis Symptoms and Functional Status Assessed	1006F
Assess. for AI or Analgesic OTC Medications Performed	1007F
Current Tobacco Smoker	1034F
Current Smokeless Tobacco User	1035F
Current Tobacco Non-user	1036F
CATARACT Patient	1055F
Presence or Absence of Urinary Incontinence Assessed	1090F

Code (Box 24d) 0014F
Description Cataract Pre-Op Assess
Type of Service
Level II CPT Codes ☑
Inactive ☐
UB-04 Billing Code ☐ Revenue Code

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

To add & modify diagnosis codes

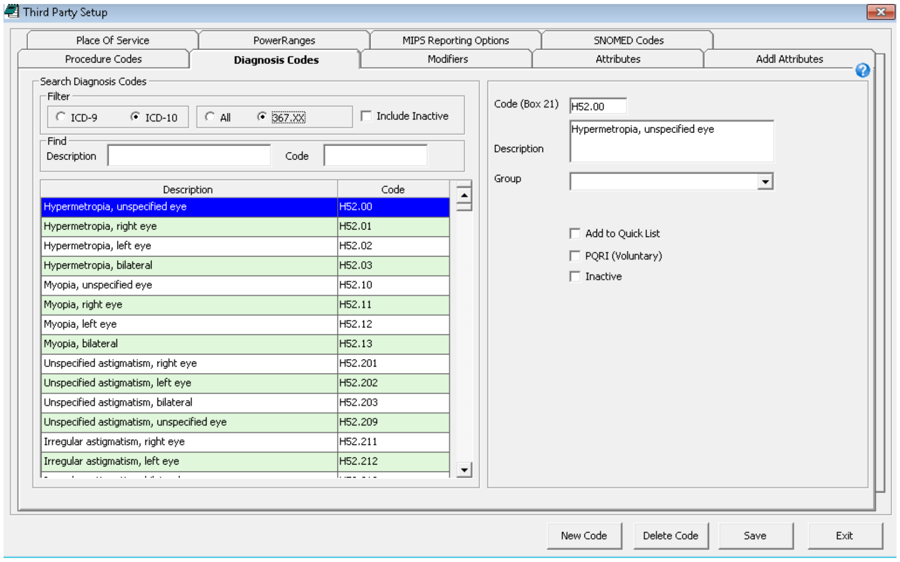
For more information on setting up diagnosis codes, watch the "Diagnosis Codes" video.

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 **Diagnosis Codes** tab.
3. Click **New Code** to create a new code, select a code from the list, or click **Add ICD-10 Code** to search for and select an ICD-10 code to add it to your list of codes and make it available to record on fee slips.
   - 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.
4. In the **Code (Box 21)** field, type the ICD-9 or ICD-10 code.
5. In the **Description** text box, type a short description for the diagnosis code.

6. From the **Group** drop-down menu, select a category for the diagnosis code.
7. Select the **Add to Quick List** to add the diagnosis code to the Quick List of frequently used codes.
8. 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 151.

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



○ ICD-9 ● ICD-10
○ All ● 367.XX
☐ Include Inactive

Description:
Code:

Description	Code
Hypermetropia, unspecified eye	H52.00
Hypermetropia, right eye	H52.01
Hypermetropia, left eye	H52.02
Hypermetropia, bilateral	H52.03
Myopia, unspecified eye	H52.10
Myopia, right eye	H52.11
Myopia, left eye	H52.12
Myopia, bilateral	H52.13
Unspecified astigmatism, right eye	H52.201
Unspecified astigmatism, left eye	H52.202
Unspecified astigmatism, bilateral	H52.203
Unspecified astigmatism, unspecified eye	H52.209
Irregular astigmatism, right eye	H52.211
Irregular astigmatism, left eye	H52.212

Code (Box 21): H52.00
Description: Hypermetropia, unspecified eye
Group:
☐ Add to Quick List
☐ PQRI (Voluntary)
☐ Inactive

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

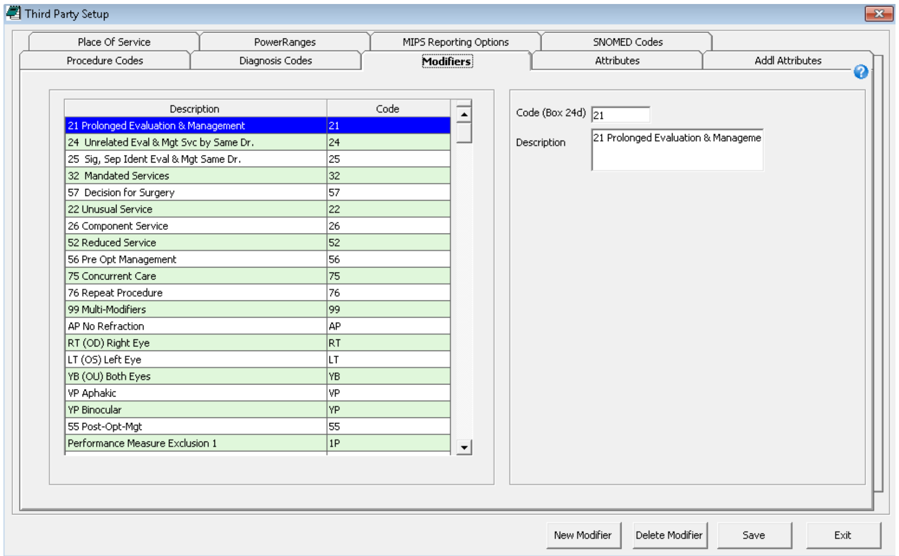
▶ To add & modify procedure modifiers

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.

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.



Description	Code
21 Prolonged Evaluation & Management	21
24 Unrelated Eval & Mgt Svc by Same Dr.	24
25 Sig, Sep Ident Eval & Mgt Same Dr.	25
32 Mandated Services	32
57 Decision for Surgery	57
22 Unusual Service	22
26 Component Service	26
52 Reduced Service	52
56 Pre Opt Management	56
75 Concurrent Care	75
76 Repeat Procedure	76
99 Multi-Modifiers	99
AP No Refraction	AP
RT (OD) Right Eye	RT
LT (OS) Left Eye	LT
YB (OU) Both Eyes	YB
VP Aphakic	VP
YP Binocular	YP
55 Post-Opt-Mgt	55
Performance Measure Exclusion 1	1P

Code (Box 24d) 21

Description 21 Prolonged Evaluation & Manageme

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.

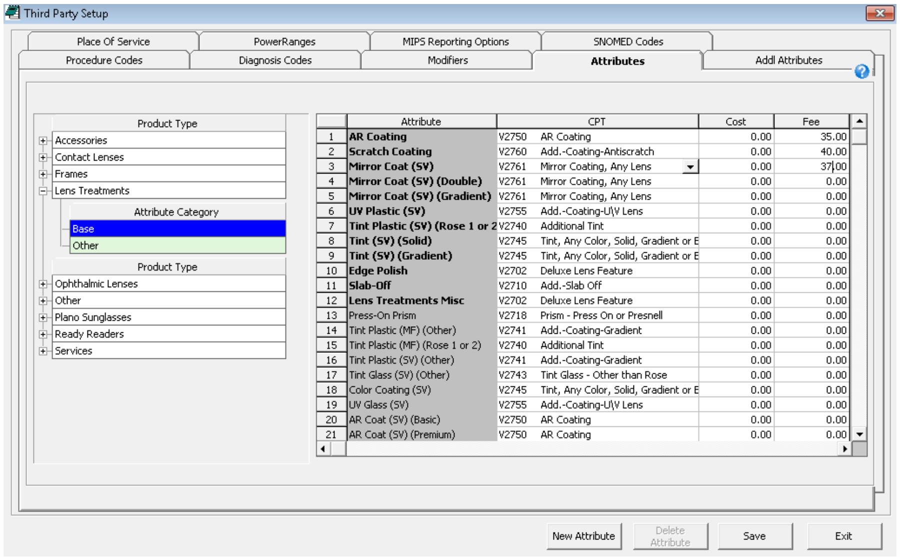
   OR

   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 270. For information on updating the attribute cost or fee for multiple products, go to Updating Many Products & Services on page 287. • 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.


Third Party Setup
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Procedure Codes
Diagnosis Codes
Modifiers
Attributes
Addl Attributes
Product Type
Accessories
Contact Lenses
Frames
Lens Treatments
Attribute Category
Base
Other
Product Type
Ophthalmic Lenses
Other
Plano Sunglasses
Ready Readers
Services
New Attribute
Delete Attribute
Save
Exit

	Attribute	CPT		Cost	Fee
1	**AR Coating**	V2750	AR Coating	0.00	35.00
2	**Scratch Coating**	V2760	Add.-Coating-Antiscratch	0.00	40.00
3	**Mirror Coat (SV)**	V2761	Mirror Coating, Any Lens	0.00	37.00
4	**Mirror Coat (SV) (Double)**	V2761	Mirror Coating, Any Lens	0.00	0.00
5	**Mirror Coat (SV) (Gradient)**	V2761	Mirror Coating, Any Lens	0.00	0.00
6	**UV Plastic (SV)**	V2755	Add.-Coating-U\V Lens	0.00	0.00
7	**Tint Plastic (SV) (Rose 1 or 2**	V2740	Additional Tint	0.00	0.00
8	**Tint (SV) (Solid)**	V2745	Tint, Any Color, Solid, Gradient or E	0.00	0.00
9	**Tint (SV) (Gradient)**	V2745	Tint, Any Color, Solid, Gradient or E	0.00	0.00
10	**Edge Polish**	V2702	Deluxe Lens Feature	0.00	0.00
11	**Slab-Off**	V2710	Add.-Slab Off	0.00	0.00
12	**Lens Treatments Misc**	V2702	Deluxe Lens Feature	0.00	0.00
13	Press-On Prism	V2718	Prism - Press On or Presnell	0.00	0.00
14	Tint Plastic (MF) (Other)	V2741	Add.-Coating-Gradient	0.00	0.00
15	Tint Plastic (MF) (Rose 1 or 2)	V2740	Additional Tint	0.00	0.00
16	Tint Plastic (SV) (Other)	V2741	Add.-Coating-Gradient	0.00	0.00
17	Tint Glass (SV) (Other)	V2743	Tint Glass - Other than Rose	0.00	0.00
18	Color Coating (SV)	V2745	Tint, Any Color, Solid, Gradient or E	0.00	0.00
19	UV Glass (SV)	V2755	Add.-Coating-U\V Lens	0.00	0.00
20	AR Coat (SV) (Basic)	V2750	AR Coating	0.00	0.00
21	AR Coat (SV) (Premium)	V2750	AR Coating	0.00	0.00

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

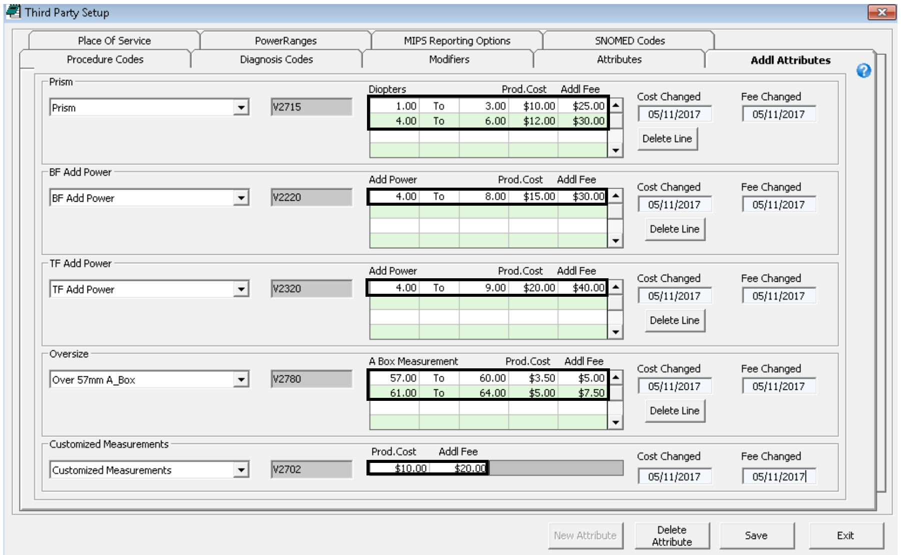
▶ To add & modify additional attributes

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 **Addl 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.


Third Party Setup
Place Of Service
PowerRanges
MIPS Reporting Options
SNOMED Codes
Procedure Codes
Diagnosis Codes
Modifiers
Attributes
Addl Attributes
Delete Line
New Attribute
Delete Attribute
Save
Exit

Prism: Prism V2715

Diopters			Prod.Cost	Addl Fee
1.00	To	3.00	$10.00	$25.00
4.00	To	6.00	$12.00	$30.00

Cost Changed 05/11/2017
Fee Changed 05/11/2017

BF Add Power: BF Add Power V2220

Add Power			Prod.Cost	Addl Fee
4.00	To	8.00	$15.00	$30.00

Cost Changed 05/11/2017
Fee Changed 05/11/2017

TF Add Power: TF Add Power V2320

Add Power			Prod.Cost	Addl Fee
4.00	To	9.00	$20.00	$40.00

Cost Changed 05/11/2017
Fee Changed 05/11/2017

Oversize: Over 57mm A_Box V2780

A Box Measurement			Prod.Cost	Addl Fee
57.00	To	60.00	$3.50	$5.00
61.00	To	64.00	$5.00	$7.50

Cost Changed 05/11/2017
Fee Changed 05/11/2017

Customized Measurements: Customized Measurements V2702

Prod.Cost	Addl Fee
$10.00	$20.00

Cost Changed 05/11/2017
Fee Changed 05/11/2017

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 276.

▶ To add & modify places of service

For more information on setting up places of service, watch the "Places 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

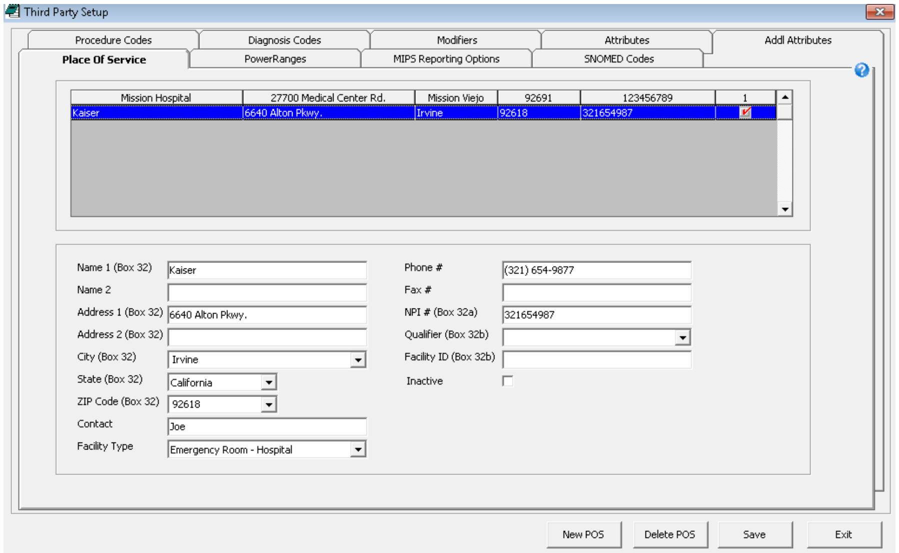
   Select a place from the list.
4. Enter the place of service location information in the appropriate fields:
   - Name 1 (Box 32)
   - Name 2
   - Address 1 (Box 32)
   - Address 2 (Box 32)
   - City (Box 32)
   - State (Box 32)
   - ZIP Code (Box 32)
5. Type the name of the primary contact person in 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.



Mission Hospital	27700 Medical Center Rd.	Mission Viejo	92691	123456789	1
Kaiser	6640 Alton Pkwy.	Irvine	92618	321654987	☑

Name 1 (Box 32): Kaiser
Name 2:
Address 1 (Box 32): 6640 Alton Pkwy.
Address 2 (Box 32):
City (Box 32): Irvine
State (Box 32): California
ZIP Code (Box 32): 92618
Contact: Joe
Facility Type: Emergency Room - Hospital
Phone #: (321) 654-9877
Fax #:
NPI # (Box 32a): 321654987
Qualifier (Box 32b):
Facility ID (Box 32b):
Inactive ☐

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

▶ To set up lens power range codes

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

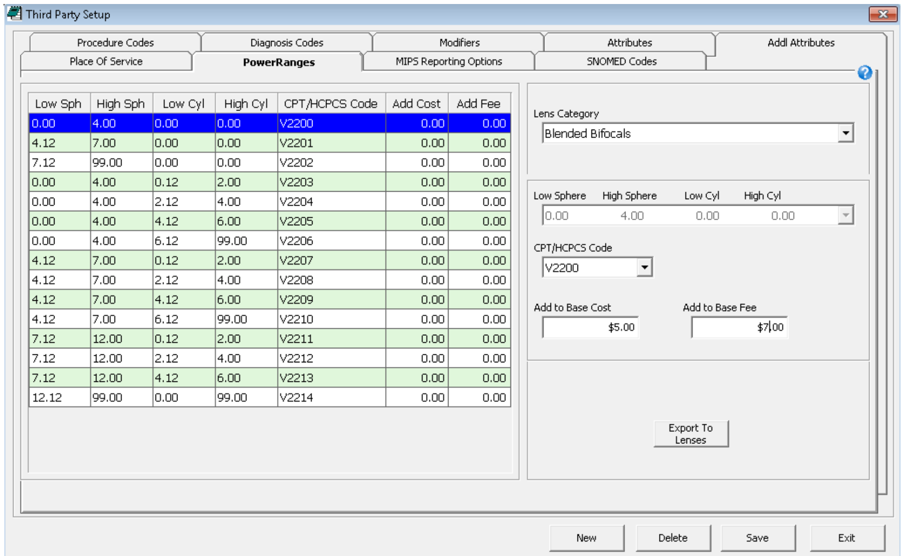
For more information on setting up lens power range codes, watch the "Power Ranges" video.

(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.



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

Lens Category: Blended Bifocals

Low Sphere	High Sphere	Low Cyl	High Cyl
0.00	4.00	0.00	0.00

CPT/HCPCS Code: V2200

Add to Base Cost: $5.00

Add to Base Fee: $7.00

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.

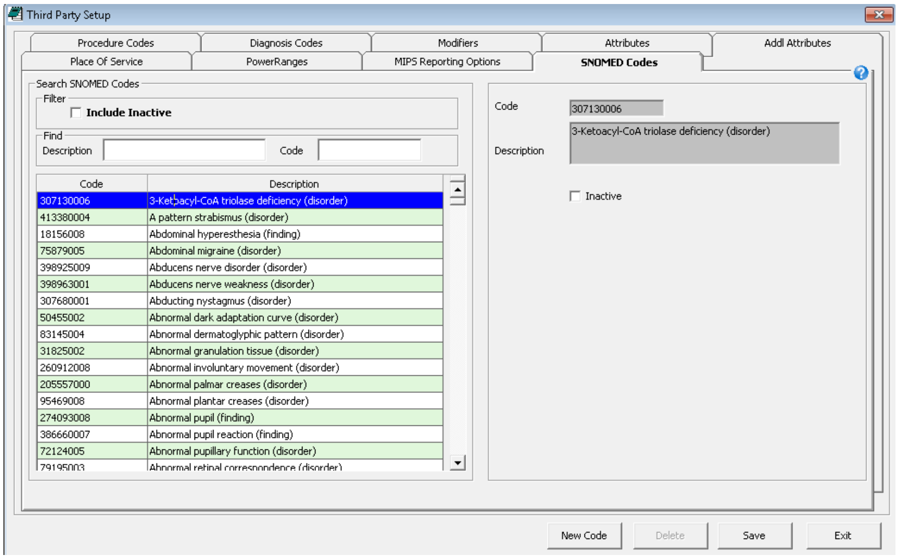
    c. Repeat steps a–b for each lens type as needed.
11. Click **Exit** to close the Third Party Setup window.

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 267.

▶ 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**.



☐ Include Inactive

Description:

Code:

Code	Description
307130006	3-Ketoacyl-CoA triolase deficiency (disorder)
413380004	A pattern strabismus (disorder)
18156008	Abdominal hyperesthesia (finding)
75879005	Abdominal migraine (disorder)
398925009	Abducens nerve disorder (disorder)
398963001	Abducens nerve weakness (disorder)
307680001	Abducting nystagmus (disorder)
50455002	Abnormal dark adaptation curve (disorder)
83145004	Abnormal dermatoglyphic pattern (disorder)
31825002	Abnormal granulation tissue (disorder)
260912008	Abnormal involuntary movement (disorder)
205557000	Abnormal palmar creases (disorder)
95469008	Abnormal plantar creases (disorder)
274093008	Abnormal pupil (finding)
386660007	Abnormal pupil reaction (finding)
72124005	Abnormal pupillary function (disorder)
79195003	Abnormal retinal correspondence (disorder)

Code: 307130006

Description: 3-Ketoacyl-CoA triolase deficiency (disorder)

☐ Inactive

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

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 "Insurance Carriers" video.

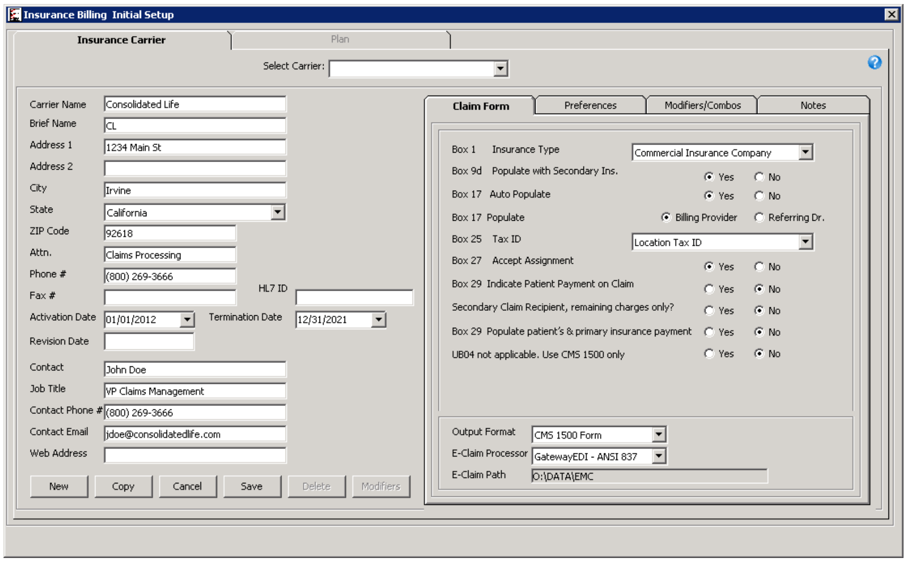
This section tells you how to set up insurance carriers, including how to

- To open the Insurance Billing Initial Setup window, 147
- To add & modify insurance carriers, 148
- To set up insurance billing preferences, 151
- To combine lines on insurance claims, 152
- To add & modify insurance carrier notes, 153
- To create & modify insurance modifiers, 154
- To copy insurance carriers, 155

▶ 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.



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:

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: O:\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 147.
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 155 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. Select **Yes** from the **Print Location Tax ID on Statement** radio buttons to print the location's tax ID on statements for patients who use this insurance carrier.

19. 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.
20. 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.

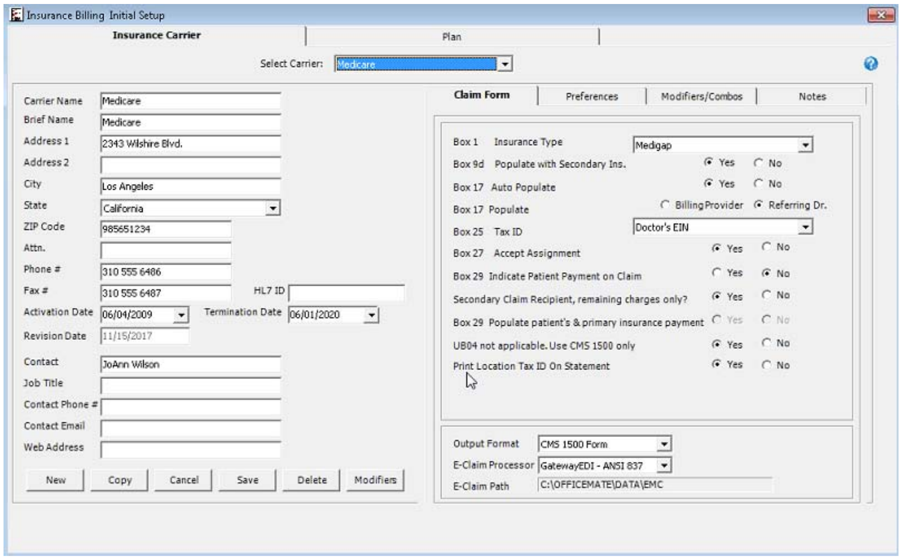
21. Select an electronic clearinghouse from the **E-Claim Processor** drop-down menu.

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.

22. 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.



Select Carrier: Medicare

Carrier Name: Medicare
Brief Name: Medicare
Address 1: 2343 Wilshire Blvd.
Address 2:
City: Los Angeles
State: California
ZIP Code: 985651234
Attn.:
Phone #: 310 555 6486
Fax #: 310 555 6487
HL7 ID:
Activation Date: 06/04/2009
Termination Date: 06/01/2020
Revision Date: 11/15/2017
Contact: JoAnn Wilson
Job Title:
Contact Phone #:
Contact Email:
Web Address:

Box 1 Insurance Type: Medigap
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: Doctor's EIN
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
Print Location Tax ID On Statement ● Yes ○ No

Output Format: CMS 1500 Form
E-Claim Processor: GatewayEDI - ANSI 837
E-Claim Path: C:\OFFICEMATE\DATA\EMC

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 147.
2. Select an insurance carrier from the **Carrier** drop-down menu.

   OR

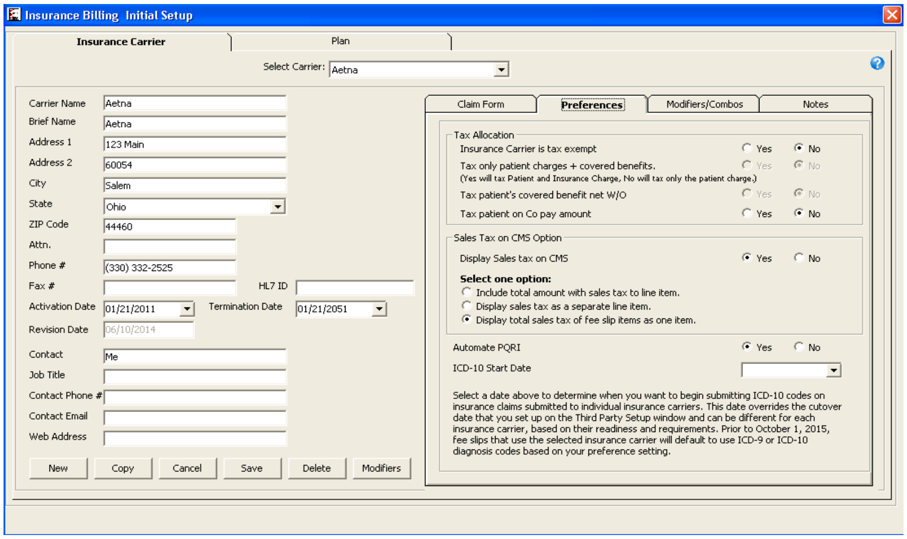
   Click **New** to add an insurance carrier. For information on adding insurance carriers, go to To add & modify insurance carriers on page 148.
3. Click the **Preferences** tab.
4. Select **Yes** from the **Insurance Carrier is tax exempt** radio buttons if the insurance carrier is exempt from sales tax 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 138. 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** calender.

NOTES	
	- This date can be different for each insurance carrier, based on their readiness and requirements. If you do not select an ICD-10 start date for an insurance carrier, then the ICD-10 start date will default to October 1, 2015. - 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.



Select Carrier: Aetna

Carrier Name: Aetna
Brief Name: Aetna
Address 1: 123 Main
Address 2: 60054
City: Salem
State: Ohio
ZIP Code: 44460
Attn.:
Phone #: (330) 332-2525
Fax #:
HL7 ID:
Activation Date: 01/21/2011
Termination Date: 01/21/2051
Revision Date: 06/10/2014
Contact: Me
Job Title:
Contact Phone #:
Contact Email:
Web Address:

Tax Allocation
Insurance Carrier is tax exempt ○ Yes ● No
Tax only patient charges + covered benefits. ○ Yes ● No
(Yes will tax Patient and Insurance Charge, No will tax only the patient charge.)
Tax patient's covered benefit net W/O ○ Yes ● No
Tax patient on Co pay amount ○ Yes ● No

Sales Tax on CMS Option
Display Sales tax on CMS ● Yes ○ No
Select one option:
○ 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.

Automate PQRI ● Yes ○ No
ICD-10 Start Date

Select a date above to determine when you want to begin submitting ICD-10 codes on insurance claims submitted to individual insurance carriers. 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.

▶ 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 147.
2. Select an insurance carrier from the **Carrier** drop-down menu.

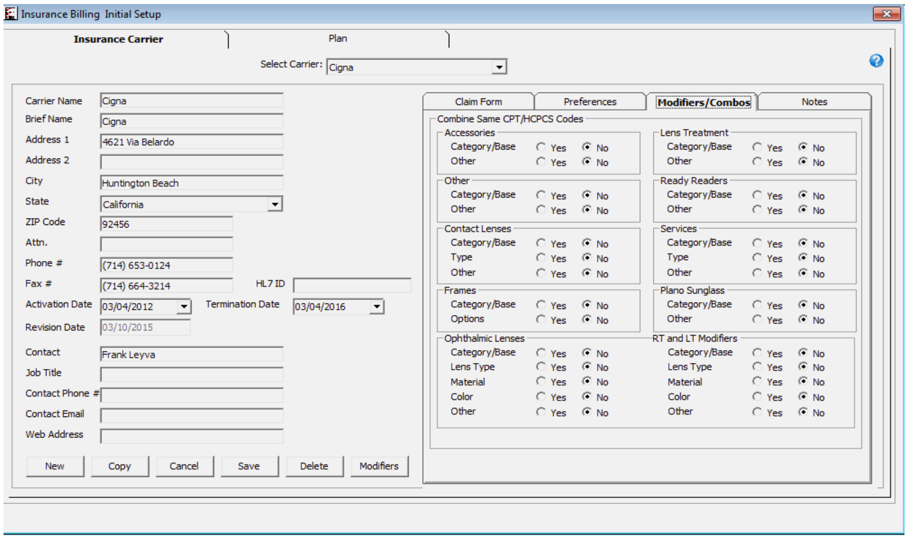
   OR

   Click **New** to add an insurance carrier. For information on adding insurance carriers, go to To add & modify insurance carriers on page 148.
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.



Select Carrier: Cigna

Carrier Name: Cigna
Brief Name: Cigna
Address 1: 4621 Via Belardo
Address 2:
City: Huntington Beach
State: California
ZIP Code: 92456
Attn.:
Phone #: (714) 653-0124
Fax #: (714) 664-3214
HL7 ID:
Activation Date: 03/04/2012
Termination Date: 03/04/2016
Revision Date: 03/10/2015
Contact: Frank Leyva
Job Title:
Contact Phone #:
Contact Email:
Web Address:

Combine Same CPT/HCPCS Codes

Accessories
Category/Base ○ Yes ● No
Other ○ Yes ● No

Other
Category/Base ○ Yes ● No
Other ○ Yes ● No

Contact Lenses
Category/Base ○ Yes ● No
Type ○ Yes ● No
Other ○ Yes ● No

Frames
Category/Base ○ Yes ● No
Options ○ Yes ● No

Ophthalmic Lenses
Category/Base ○ Yes ● No
Lens Type ○ Yes ● No
Material ○ Yes ● No
Color ○ Yes ● No
Other ○ Yes ● No

Lens Treatment
Category/Base ○ Yes ● No
Other ○ Yes ● No

Ready Readers
Category/Base ○ Yes ● No
Other ○ Yes ● No

Services
Category/Base ○ Yes ● No
Type ○ Yes ● No
Other ○ Yes ● No

Plano Sunglass
Category/Base ○ Yes ● No
Other ○ Yes ● No

RT and LT Modifiers
Category/Base ○ Yes ● No
Lens Type ○ Yes ● No
Material ○ Yes ● No
Color ○ Yes ● No
Other ○ Yes ● No

▶ To add & modify insurance carrier notes

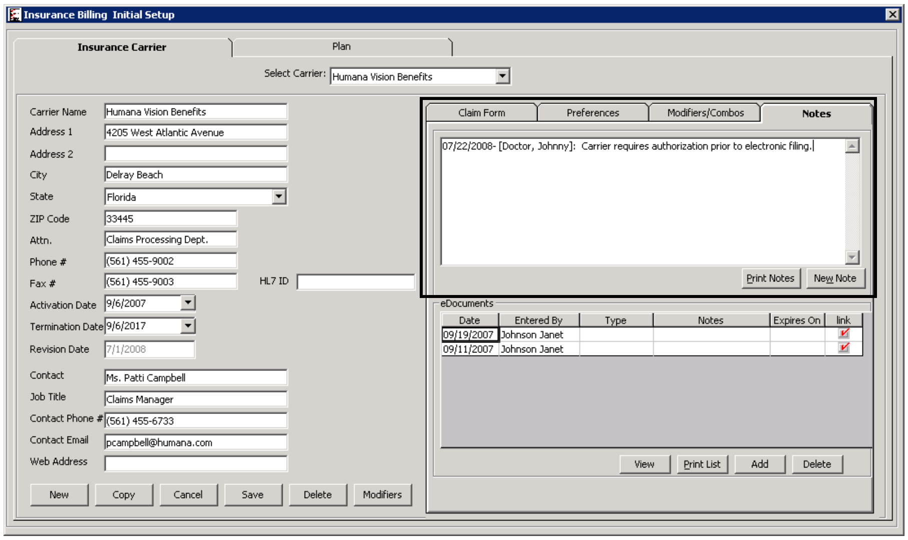
1. Open the Insurance Billing Initial Setup window. For information on opening the Insurance Billing Setup window, go to To open the Insurance Billing Initial Setup window on page 147.
2. Select an insurance carrier from the **Carrier** drop-down menu.

   OR

   Click **New** to add an insurance carrier. For information on adding insurance carriers, go to To add & modify insurance carriers on page 148.
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.


Insurance Billing Initial Setup
Insurance Carrier
Plan
Claim Form
Preferences
Modifiers/Combos
Notes
Print Notes
New Note
eDocuments
View
Print List
Add
Delete
New
Copy
Cancel
Save
Delete
Modifiers

Select Carrier: Humana Vision Benefits

Carrier Name: Humana Vision Benefits
Address 1: 4205 West Atlantic Avenue
Address 2:
City: Delray Beach
State: Florida
ZIP Code: 33445
Attn.: Claims Processing Dept.
Phone #: (561) 455-9002
Fax #: (561) 455-9003
HL7 ID:
Activation Date: 9/6/2007
Termination Date: 9/6/2017
Revision Date: 7/1/2008
Contact: Ms. Patti Campbell
Job Title: Claims Manager
Contact Phone #: (561) 455-6733
Contact Email: pcampbell@humana.com
Web Address:

07/22/2008- [Doctor, Johnny]: Carrier requires authorization prior to electronic filing.

Date	Entered By	Type	Notes	Expires On	link
09/19/2007	Johnson Janet				✓
09/11/2007	Johnson Janet				✓

NOTE	For information on attaching eDocuments (e.g., insurance contracts, plan descriptions), go to Attaching Electronic Documents to Insurance Carriers & Plans on page 196.

▶ 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 147.
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 148.
3. Click the **Modifiers** button.

   The Insurance Modifiers window opens.
4. Select a product type from the **Product Type** drop-down menu.

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

   OR

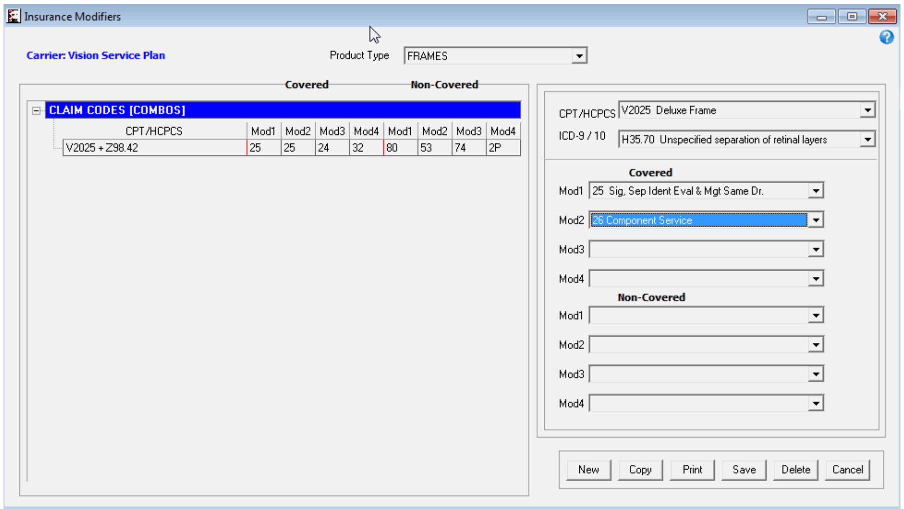
   Select a product from the tree to modify an insurance modifier.

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.

6. Select a procedure code from the **CPT/HCPCS** drop-down menu.
7. Select a diagnosis code from the **ICD-9 / 10** drop-down menu as needed.
8. Select up to four modifiers from the drop-down menus in the **Covered** column as needed.
9. 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 160.

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



Carrier: Vision Service Plan

Product Type: FRAMES

CLAIM CODES [COMBOS]

	Covered				Non-Covered			
CPT/HCPCS	Mod1	Mod2	Mod3	Mod4	Mod1	Mod2	Mod3	Mod4
V2025 + Z98.42	25	25	24	32	80	53	74	2P

CPT/HCPCS: V2025 Deluxe Frame

ICD-9 / 10: H35.70 Unspecified separation of retinal layers

Covered

Mod1: 25 Sig, Sep Ident Eval & Mgt Same Dr.

Mod2: 26 Component Service

Mod3:

Mod4:

Non-Covered

Mod1:

Mod2:

Mod3:

Mod4:

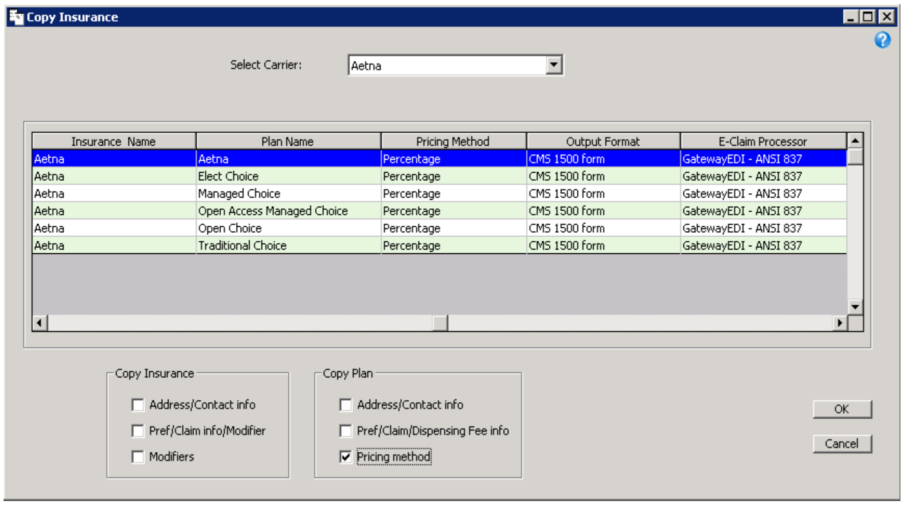
▶ To copy insurance carriers

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 147.
2. Click **Copy**.

   The Copy Insurance 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 carrier as needed. For information on modifying insurance carrier information, go to To add & modify insurance carriers on page 148.



Select Carrier: Aetna

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

Setting Up Insurance Plans

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

- To open the insurance Plan tab, 157
- To add & modify insurance plans, 157
- To set up insurance plan preferences, 160
- To set up insurance plan dispensing fees, 162
- To set up insurance plan notes, 163
- To add & modify at-a-glance information, 164
- To copy insurance plans, 165

For more information on setting up insurance plans, watch the "Insurance Plans" 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 147.
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 148 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 157.
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 165.

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 166
Moderate detail	Maximum Allotments	Setting Up Plan Maximum Allotments on page 191
Least detail	Percentage	Setting Up Plan Percentages on page 195

- 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.

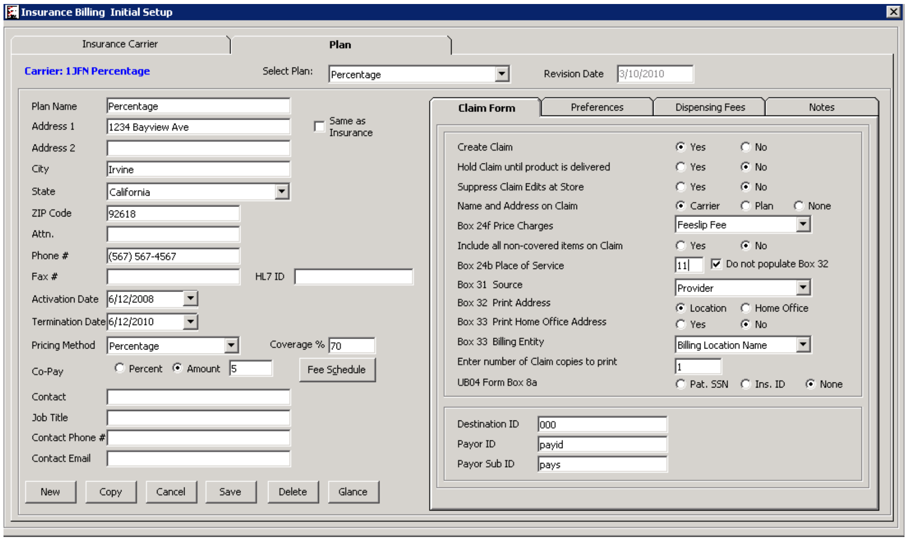
13. Select the fee that populates box 24F on the CMS 1500 form from the **Box 24f Price Charges** drop-down menu.

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 148 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 148 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.



Carrier: 1JFN Percentage

Select Plan: Percentage

Revision Date: 3/10/2010

Plan Name: Percentage

Address 1: 1234 Bayview Ave

Address 2:

☐ Same as Insurance

City: Irvine

State: California

ZIP Code: 92618

Attn.:

Phone #: (567) 567-4567

Fax #:

HL7 ID:

Activation Date: 6/12/2008

Termination Date: 6/12/2010

Pricing Method: Percentage

Coverage %: 70

Co-Pay: ○ Percent ● Amount 5

Contact:

Job Title:

Contact Phone #:

Contact Email:

Create Claim: ● Yes ○ No

Hold Claim until product is delivered: ○ Yes ● No

Suppress Claim Edits at Store: ○ Yes ● No

Name and Address on Claim: ● Carrier ○ Plan ○ None

Box 24f Price Charges: Feeslip Fee

Include all non-covered items on Claim: ○ Yes ● No

Box 24b Place of Service: 11 ☑ Do not populate Box 32

Box 31 Source: Provider

Box 32 Print Address: ● Location ○ Home Office

Box 33 Print Home Office Address: ○ Yes ● No

Box 33 Billing Entity: Billing Location Name

Enter number of Claim copies to print: 1

UB04 Form Box 8a: ○ Pat. SSN ○ Ins. ID ● None

Destination ID: 000

Payor ID: payid

Payor Sub ID: pays

▶ 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 157.
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 157.
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**.

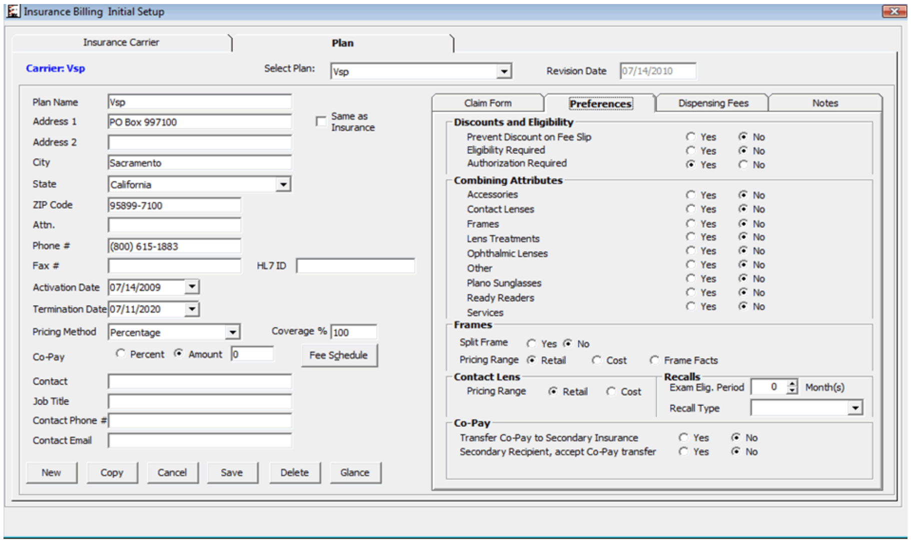
NOTES	- Selecting the Yes radio button combines two or more items with the same CPT code onto one line on the insurance claim. The quantity on the claim reflects the number of items, and the charges on the claim reflects the sum of the charges for the individual items. - Selecting the No radio button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



Carrier: Vsp
Select Plan: Vsp
Revision Date 07/14/2010

Plan Name: Vsp
Address 1: PO Box 997100
Address 2:
☐ Same as Insurance
City: Sacramento
State: California
ZIP Code: 95899-7100
Attn.:
Phone #: (800) 615-1883
Fax #:
HL7 ID:
Activation Date: 07/14/2009
Termination Date: 07/11/2020
Pricing Method: Percentage
Coverage %: 100
Co-Pay: ○ Percent ● Amount 0
Contact:
Job Title:
Contact Phone #:
Contact Email:

Discounts and Eligibility
Prevent Discount on Fee Slip ○ Yes ● No
Eligibility Required ○ Yes ● No
Authorization Required ● Yes ○ No

Combining Attributes
Accessories ○ Yes ● No
Contact Lenses ○ Yes ● No
Frames ○ Yes ● No
Lens Treatments ○ Yes ● No
Ophthalmic Lenses ○ Yes ● No
Other ○ Yes ● No
Plano Sunglasses ○ Yes ● No
Ready Readers ○ Yes ● No
Services ○ Yes ● No

Frames
Split Frame ○ Yes ● No
Pricing Range ● Retail ○ Cost ○ Frame Facts

Contact Lens
Pricing Range ● Retail ○ Cost

Recalls
Exam Elig. Period 0 Month(s)
Recall Type

Co-Pay
Transfer Co-Pay to Secondary Insurance ○ Yes ● No
Secondary Recipient, accept Co-Pay transfer ○ Yes ● No

▶ 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 157.
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 157.
3. Click the **Dispensing Fees** tab.
4. Click **New** to create a new dispensing fee.

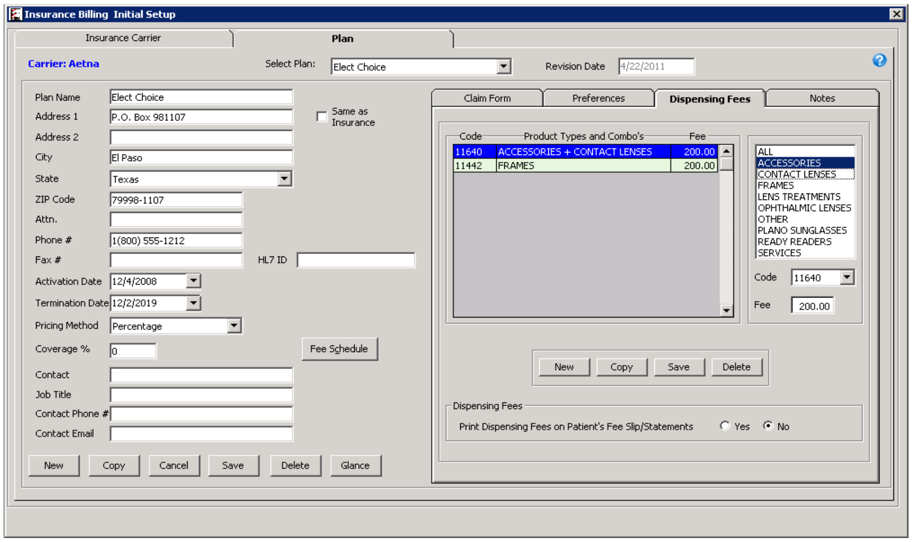
   OR

   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.

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


Insurance Billing Initial Setup
Insurance Carrier
Plan
Claim Form
Preferences
Dispensing Fees
Notes
New
Copy
Cancel
Save
Delete
Glance
Fee Schedule
New
Copy
Save
Delete

Carrier: Aetna

Select Plan: Elect Choice

Revision Date 4/22/2011

Plan Name: Elect Choice
Address 1: P.O. Box 981107
Address 2:
City: El Paso
State: Texas
ZIP Code: 79998-1107
Attn.:
Phone #: 1(800) 555-1212
Fax #:
HL7 ID:
Activation Date: 12/4/2008
Termination Date: 12/2/2019
Pricing Method: Percentage
Coverage %: 0
Contact:
Job Title:
Contact Phone #:
Contact Email:

☐ Same as Insurance

Code	Product Types and Combo's	Fee
11640	ACCESSORIES + CONTACT LENSES	200.00
11442	FRAMES	200.00

ALL
ACCESSORIES
CONTACT LENSES
FRAMES
LENS TREATMENTS
OPHTHALMIC LENSES
OTHER
PLANO SUNGLASSES
READY READERS
SERVICES

Code: 11640
Fee: 200.00

Dispensing Fees
Print Dispensing Fees on Patient's Fee Slip/Statements ○ Yes ● No

▶ To set up insurance plan notes

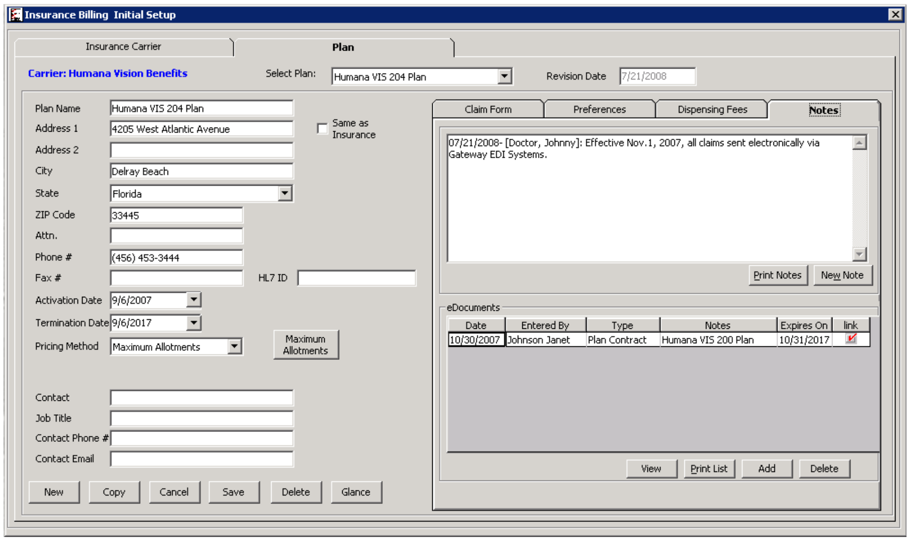
1. Open the Plan tab on the Insurance Billing Initial Setup window. For information on opening the Plan tab, go to To open the insurance Plan tab on page 157.
2. Select an insurance plan from the **Select Plan** drop-down menu.

   OR

   Click **New** to add a plan. For information on adding plans, go to To add & modify insurance plans on page 157.
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.



Carrier: Humana Vision Benefits

Select Plan: Humana VIS 204 Plan

Revision Date: 7/21/2008

Plan Name: Humana VIS 204 Plan

Address 1: 4205 West Atlantic Avenue

☐ Same as Insurance

Address 2:

City: Delray Beach

State: Florida

ZIP Code: 33445

Attn.:

Phone #: (456) 453-3444

Fax #:

HL7 ID:

Activation Date: 9/6/2007

Termination Date: 9/6/2017

Pricing Method: Maximum Allotments

Contact:

Job Title:

Contact Phone #:

Contact Email:

07/21/2008- [Doctor, Johnny]: Effective Nov.1, 2007, all claims sent electronically via Gateway EDI Systems.

eDocuments

Date	Entered By	Type	Notes	Expires On	link
10/30/2007	Johnson Janet	Plan Contract	Humana VIS 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 196.

▶ 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.

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 157.
2. Select an insurance plan from the **Select Plan** drop-down menu.

   OR

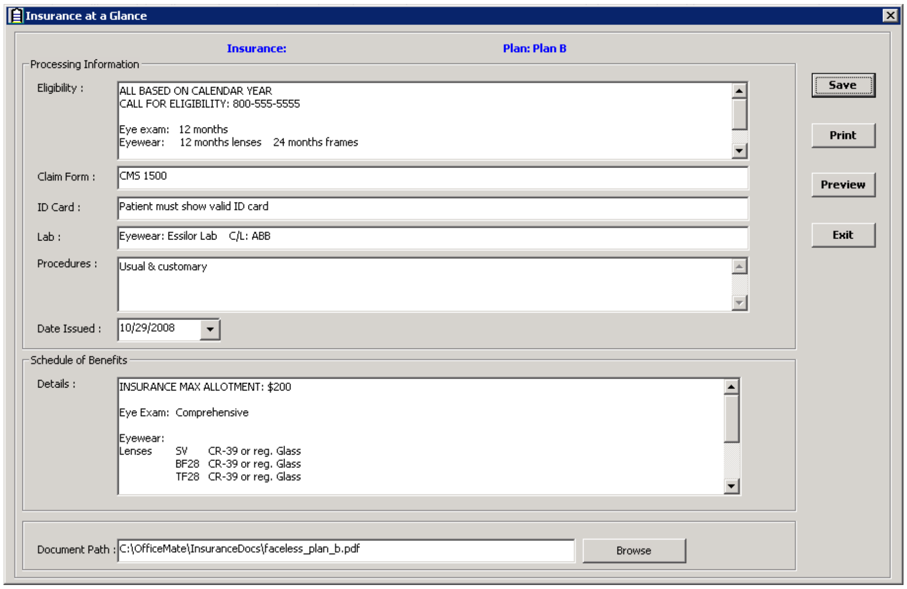
   Click **New** to add a plan. For information on adding plans, go to To add & modify insurance plans on page 157.
3. Click **Glance**.

   The Insurance at a Glance window opens.
4. Type information in the text boxes as needed.
5. If you have an electronic or scanned copy of the insurance plan information, perform the following steps:
   a. Save the file to a folder within the OfficeMate folder on the network so the file is accessible to everyone.
   b. Type the path to the file in the **Document Path** field.
6. Click **Save** when you are finished.
7. 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.



Insurance:
Plan: Plan B

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

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

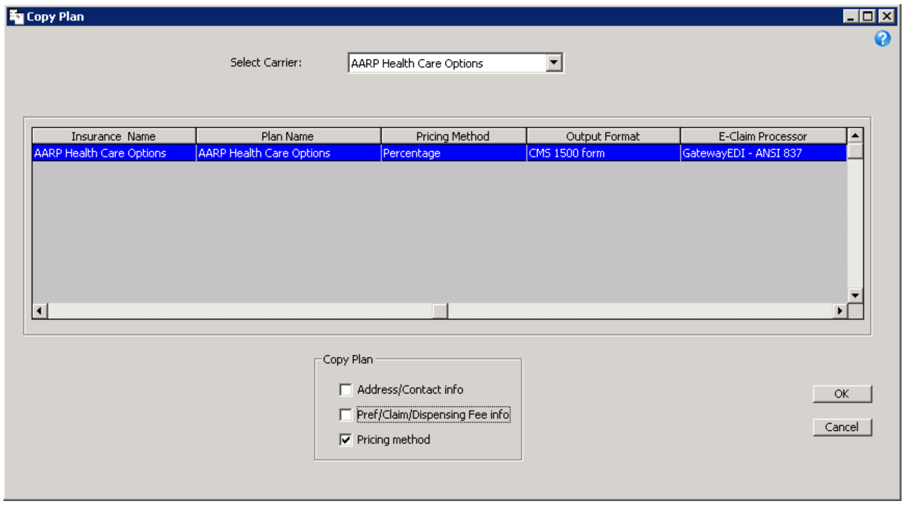
▶ To copy insurance plans

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 157.
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 157.



Select Carrier: AARP Health Care Options

Insurance Name	Plan Name	Pricing Method	Output Format	E-Claim Processor
AARP Health Care Options	AARP Health Care Options	Percentage	CMS 1500 form	GatewayEDI - ANSI 837

Copy Plan
☐ Address/Contact info
☐ Pref/Claim/Dispensing Fee info
☑ Pricing method

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 191 or Setting Up Plan Percentages on page 195 for additional options.

This section explains how to set up detailed benefits, including how

- To open the Detail Benefits window, 167
- To set up accessory detailed benefits, 168
- To set up contact lens detailed benefits, 169
- To set up frame detailed benefits, 171
- To set up lens treatment detailed benefits, 173
- To set up ophthalmic lens detailed benefits, 174
- To set up other detailed benefits, 177
- To set up plano sunglass detailed benefits, 179
- To set up ready reader detailed benefits, 181
- To set up service detailed benefits, 182
- To add & modify detailed benefit groups, 184
- To copy detailed benefit groups, 185
- To copy detailed benefits, 186
- To set up a schedule of benefits, 187
- To set up maximum detailed benefits, 190

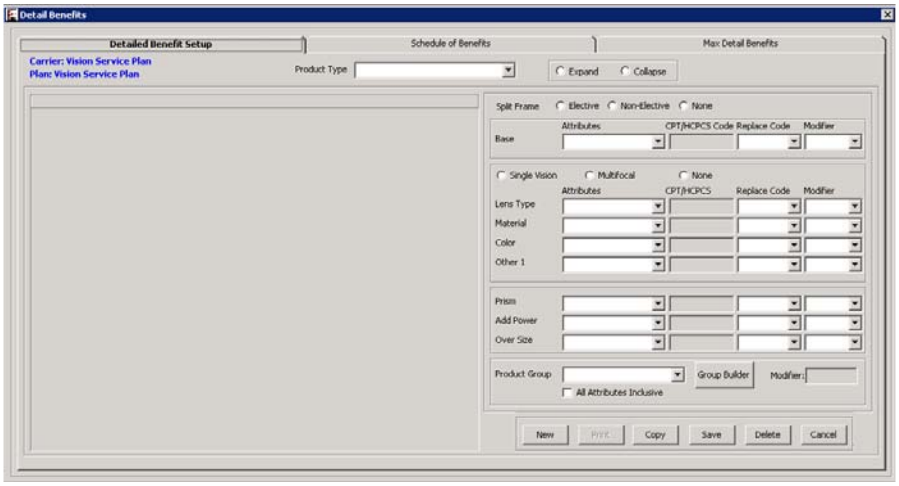
▶ To open the Detail Benefits window

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 157.
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 157.
3. Select **Detailed Benefits** from the **Pricing Method** drop-down menu.
4. Click **Detail Benefits**.

   The Detail Benefits window opens.


Detail Benefits
Detailed Benefit Setup
Schedule of Benefits
Max Detail Benefits
Product Type
○ Expand
○ Collapse
Split Frame
○ Elective
○ Non-Elective
○ None
Attributes
CPT/HCPCS Code
Replace Code
Modifier
Base
○ Single Vision
○ Multifocal
○ None
Attributes
CPT/HCPCS
Replace Code
Modifier
Lens Type
Material
Color
Other 1
Prism
Add Power
Over Size
Product Group
Group Builder
Modifier:
☐ All Attributes Inclusive
New
Print
Copy
Save
Delete
Cancel

Carrier: Vision Service Plan
Plan: Vision Service Plan

▶ 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 167.
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 186.

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.

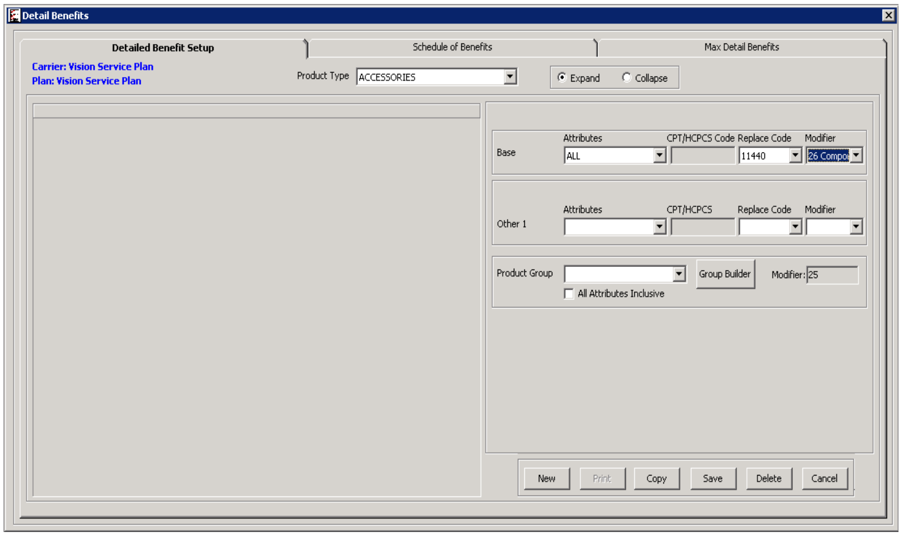
6. Select a product group from the **Product Group** drop-down menu as needed.

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 184.

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.

9. Repeat steps 3–8 for each of the detailed benefits covered in the plan.


Detail Benefits
Detailed Benefit Setup
Schedule of Benefits
Max Detail Benefits
Attributes
CPT/HCPCS Code
CPT/HCPCS
Replace Code
All Attributes Inclusive
Group Builder
New
Print
Copy
Save
Delete
Cancel

Carrier: Vision Service Plan
Plan: Vision Service Plan
Product Type: ACCESSORIES
● Expand ○ Collapse
Base: Attributes: ALL; CPT/HCPCS Code: ; Replace Code: 11440; Modifier: 26 Compo
Other 1: Attributes: ; CPT/HCPCS: ; Replace Code: ; Modifier:
Product Group: ☐ All Attributes Inclusive
Modifier: 25

▶ To set up contact 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 167.
2. Select **Contact 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 186.

4. 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.

5. Select the **Lens 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.

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.

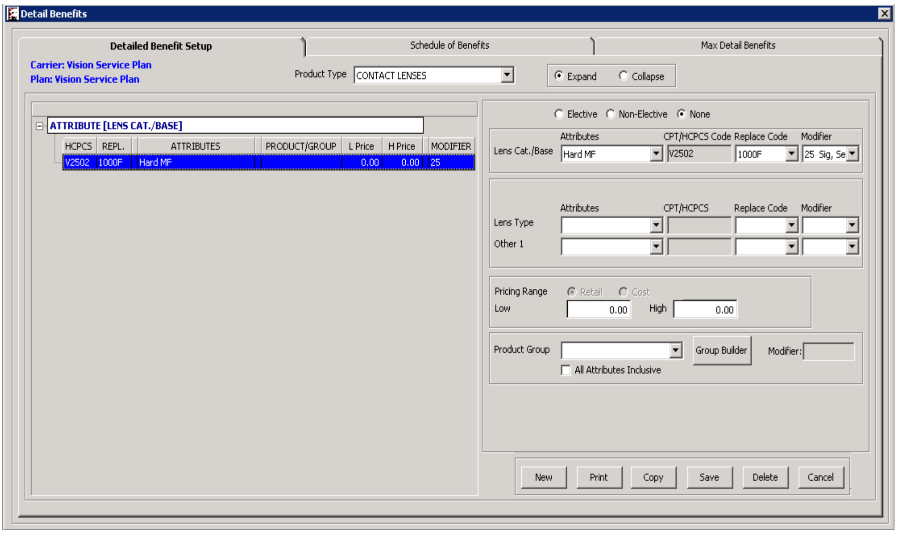
NOTES	• The Pricing Range radio buttons are not active. To set the price range to retail or to cost, go to the plan Preference tab. For information about the plan Preference tab, go to To open the insurance Plan tab on page 157. • If the option to combine attributes for contact lenses is selected on 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 184.

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.


Detail Benefits
Detailed Benefit Setup
Schedule of Benefits
Max Detail Benefits
Attributes
CPT/HCPCS
Replace Code
Modifier
Lens Type
Other 1
Pricing Range
○ Cost
Product Group
Group Builder
Modifier:
New
Print
Copy
Save
Delete
Cancel

Carrier: Vision Service Plan
Plan: Vision Service Plan

Product Type: CONTACT LENSES

● Expand ○ Collapse

ATTRIBUTE [LENS CAT./BASE]

HCPCS	REPL.	ATTRIBUTES	PRODUCT/GROUP	L Price	H Price	MODIFIER
V2502	1000F	Hard MF		0.00	0.00	25

○ Elective ○ Non-Elective ● None

	Attributes	CPT/HCPCS Code	Replace Code	Modifier
Lens Cat./Base	Hard MF	V2502	1000F	25 Sig, Se

Pricing Range: ● Retail
Low 0.00 High 0.00

☐ All Attributes Inclusive

▶ 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 167.
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 186. - 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 157.

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.

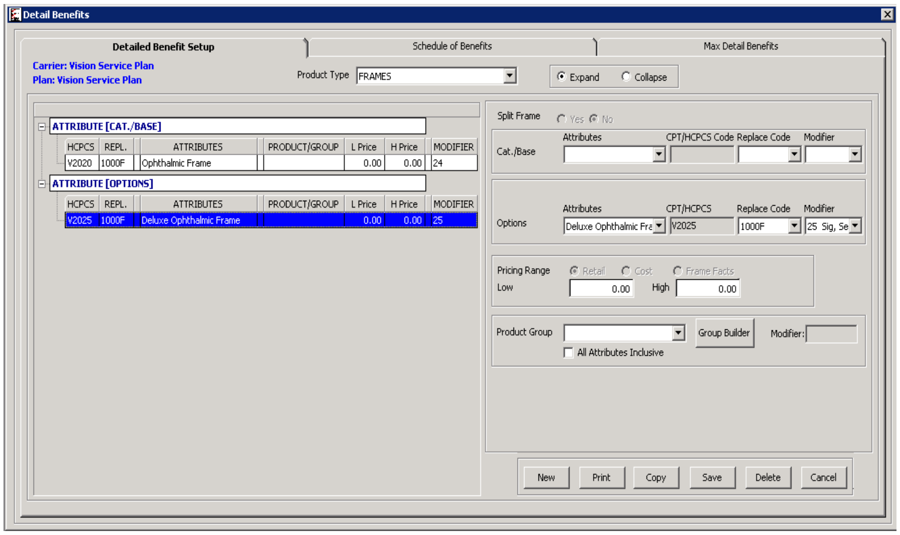
NOTES	• The Pricing Range radio buttons are not active. To set the price range to retail, cost, or Frame Facts, go to the plan Preference tab. For information about the plan Preference tab, go to To open the insurance Plan tab on page 157. • If the option to combine attributes for frames is selected 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 184.

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.



Carier: Vision Service Plan
Plan: Vision Service Plan

Product Type: FRAMES

● Expand ○ Collapse

ATTRIBUTE [CAT./BASE]

HCPCS	REPL.	ATTRIBUTES	PRODUCT/GROUP	L Price	H Price	MODIFIER
V2020	1000F	Ophthalmic Frame		0.00	0.00	24

ATTRIBUTE [OPTIONS]

HCPCS	REPL.	ATTRIBUTES	PRODUCT/GROUP	L Price	H Price	MODIFIER
V2025	1000F	Deluxe Ophthalmic Frame		0.00	0.00	25

Split Frame ○ Yes ● No

	Attributes	CPT/HCPCS Code	Replace Code	Modifier
Cat./Base				
Options	Deluxe Ophthalmic Fra	V2025	1000F	25 Sig, Se

Pricing Range ● Retail ○ Cost ○ Frame Facts
Low 0.00 High 0.00

Product Group:
☐ All Attributes Inclusive
Modifier:

▶ 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 167.
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 186.

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.

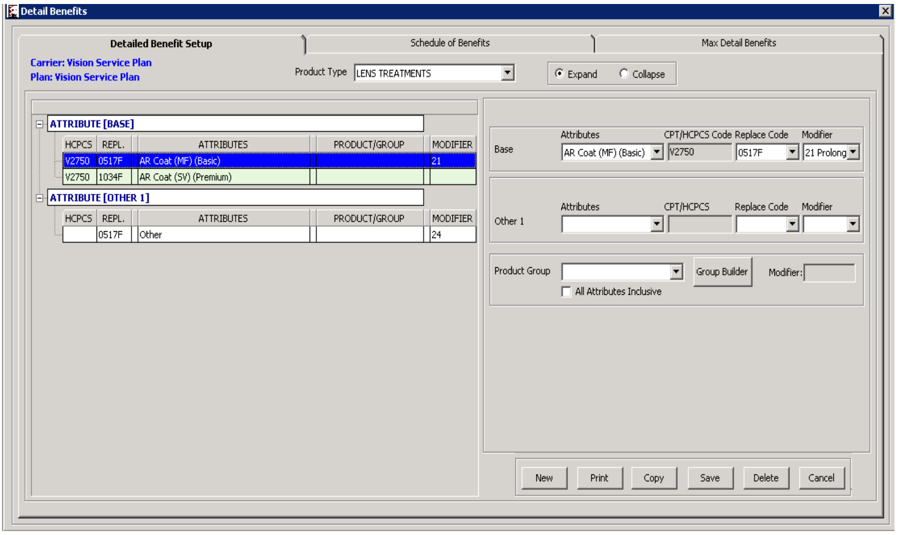
5. Select the **Other 1** information if required by the plan benefit as needed:
    a. Select an attribute from the **Attribute** drop-down menu.
    b. Select a code from the **Replace Code** drop-down menu if the insurance carrier requires a code other than the standard CPT/HCPCS code.
    c. Select 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 184.

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.



Carrier: Vision Service Plan
Plan: Vision Service Plan

Product Type: LENS TREATMENTS

● Expand ○ Collapse

ATTRIBUTE [BASE]

HCPCS	REPL.	ATTRIBUTES	PRODUCT/GROUP	MODIFIER
V2750	0517F	AR Coat (MF) (Basic)		21
V2750	1034F	AR Coat (SV) (Premium)		

ATTRIBUTE [OTHER 1]

HCPCS	REPL.	ATTRIBUTES	PRODUCT/GROUP	MODIFIER
	0517F	Other		24

	Attributes	CPT/HCPCS Code	Replace Code	Modifier
Base	AR Coat (MF) (Basic)	V2750	0517F	21 Prolong

	Attributes	CPT/HCPCS	Replace Code	Modifier
Other 1				

Product Group:
☐ All Attributes Inclusive
Modifier:

▶ 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 167.
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 186.

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.

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.

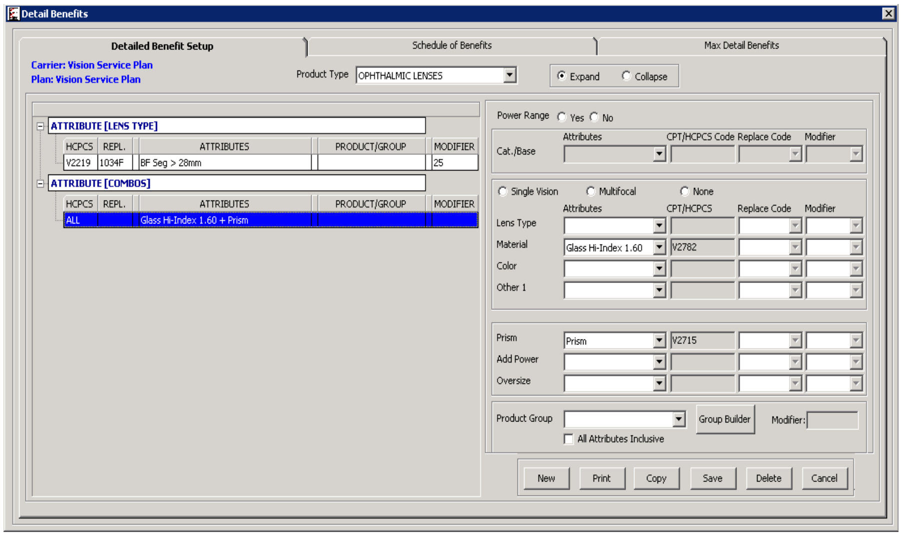
NOTE	If the option to combine attributes for ophthalmic lenses is selected on the plan Preferences tab, the Other 1 drop-down menus will not be available.

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 184.

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 OPHTHALMIC LENSES
● Expand ○ Collapse

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 Hi-Index 1.60 + Prism		

Power Range ○ Yes ○ No

	Attributes	CPT/HCPCS Code	Replace Code	Modifier
Cat./Base				

○ Single Vision ○ Multifocal ○ None

	Attributes	CPT/HCPCS	Replace Code	Modifier
Lens Type				
Material	Glass Hi-Index 1.60	V2782		
Color				
Other 1				
Prism	Prism	V2715		
Add Power				
Oversize				

Product Group
☐ All Attributes Inclusive
Modifier:

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 167.
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 186.

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.

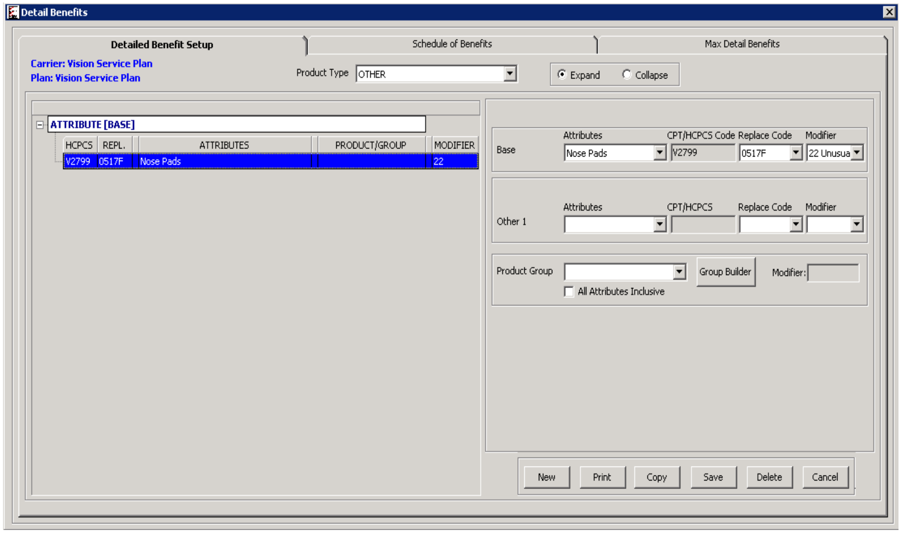
   > **NOTE** If the option to combine attributes for other is selected on the plan Preferences tab, the Other 1 drop-down menus will not be available.

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 184.

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.



Carrier: Vision Service Plan
Plan: Vision Service Plan

Product Type: OTHER

● Expand ○ Collapse

ATTRIBUTE [BASE]

HCPCS	REPL.	ATTRIBUTES	PRODUCT/GROUP	MODIFIER
V2799	0517F	Nose Pads		22

	Attributes	CPT/HCPCS Code	Replace Code	Modifier
Base	Nose Pads	V2799	0517F	22 Unusua
Other 1				

Product Group:
☐ All Attributes Inclusive
Group Builder
Modifier:

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 167.
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 186.

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.

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 157.
- 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.

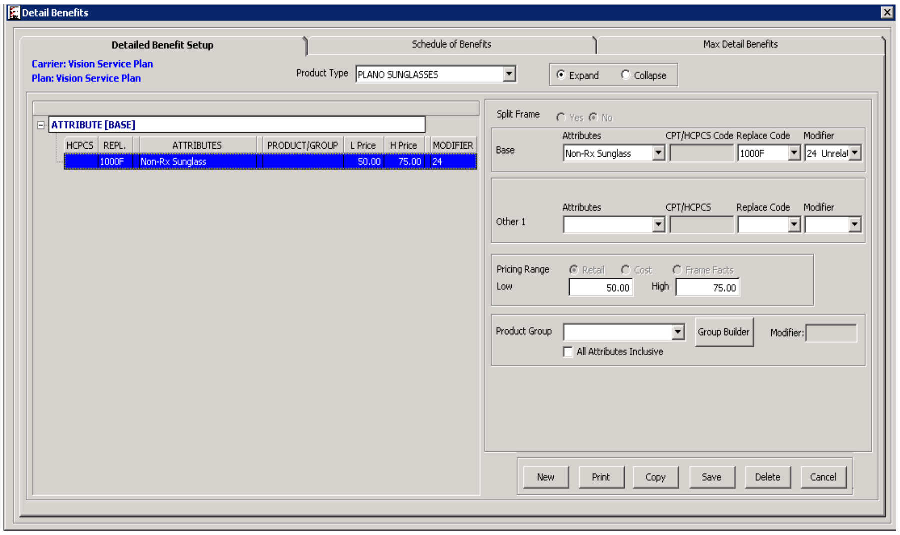
7. Select a product group from the **Product Group** drop-down menu as needed.

NOTES

- 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 184.

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.



Detail Benefits
Detailed Benefit Setup
Schedule of Benefits
Max Detail Benefits
○ Yes ● No
Other 1
Attributes
CPT/HCPCS
Replace Code
Modifier
Pricing Range
● Retail ○ Cost ○ Frame Facts
Product Group
Group Builder
Modifier:
☐ All Attributes Inclusive
New
Print
Copy
Save
Delete
Cancel

Carrier: Vision Service Plan
Plan: Vision Service Plan

Product Type: PLANO SUNGLASSES

● Expand ○ Collapse

Split Frame: No

ATTRIBUTE [BASE]

HCPCS	REPL.	ATTRIBUTES	PRODUCT/GROUP	L Price	H Price	MODIFIER
	1000F	Non-Rx Sunglass		50.00	75.00	24

Base: Attributes: Non-Rx Sunglass; CPT/HCPCS Code: ; Replace Code: 1000F; Modifier: 24 Unrelat

Pricing Range: Retail
Low: 50.00
High: 75.00

▶ 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 167.
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 186.

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.

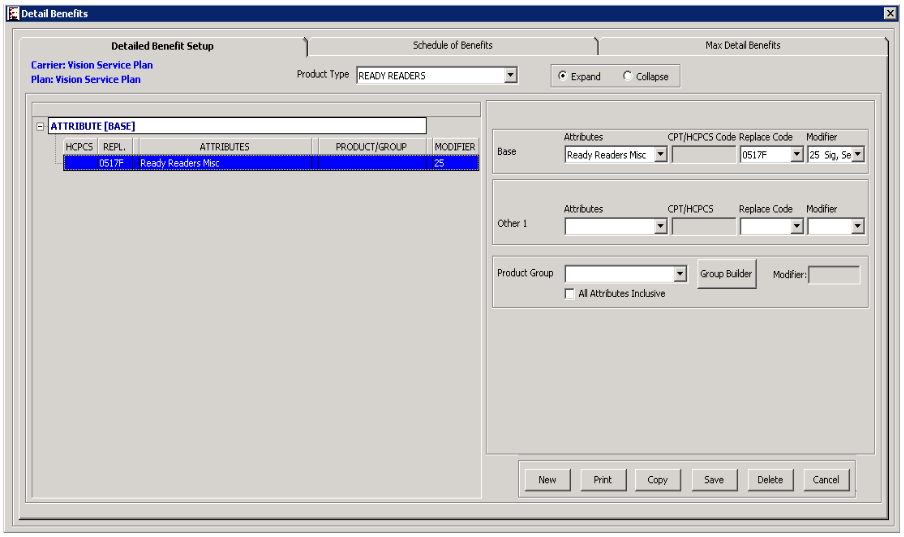
5. Select the **Other 1** information if required by the plan benefit as needed:
   a. Select an attribute from the **Attribute** drop-down menu.
   b. Select a code from the **Replace Code** drop-down menu if the insurance carrier requires a code other than the standard CPT/HCPCS code.
   c. Select 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 184.

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.



Carrier: Vision Service Plan
Plan: Vision Service Plan

Product Type: READY READERS

ATTRIBUTE [BASE]

HCPCS	REPL.	ATTRIBUTES	PRODUCT/GROUP	MODIFIER
	0517F	Ready Readers Misc		25

	Attributes	CPT/HCPCS Code	Replace Code	Modifier
Base	Ready Readers Misc		0517F	25 Sig, Se
Other 1				

Product Group:
Modifier:
☐ All Attributes Inclusive

▶ 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 167.
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 186.

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.

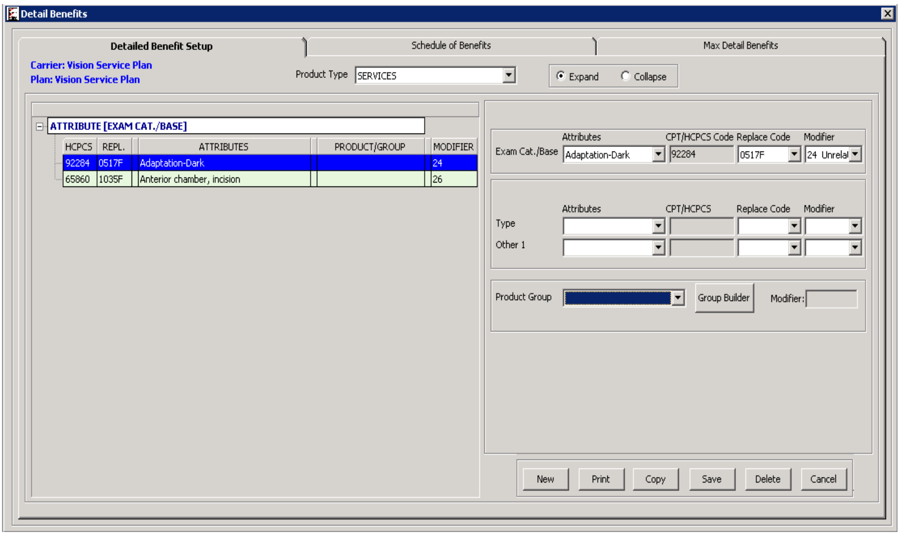
6. Select the **Other 1** information if required by the plan benefit as needed:
   a. Select an attribute from the **Attribute** drop-down menu.
   b. Select a code from the **Replace Code** drop-down menu if the insurance carrier requires a code other than the standard CPT/HCPCS code.
   c. Select 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 184.

8. Click **Save**.
9. Repeat steps 3–8 for each of the detailed benefits covered in the plan.



Carier: Vision Service Plan
Plan: Vision Service Plan

Product Type: SERVICES

● Expand ○ Collapse

ATTRIBUTE [EXAM CAT./BASE]

HCPCS	REPL.	ATTRIBUTES	PRODUCT/GROUP	MODIFIER
92284	0517F	Adaptation-Dark		24
65860	1035F	Anterior chamber, incision		26

	Attributes	CPT/HCPCS Code	Replace Code	Modifier
Exam Cat./Base	Adaptation-Dark	92284	0517F	24 Unrelat

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 167.
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 185.

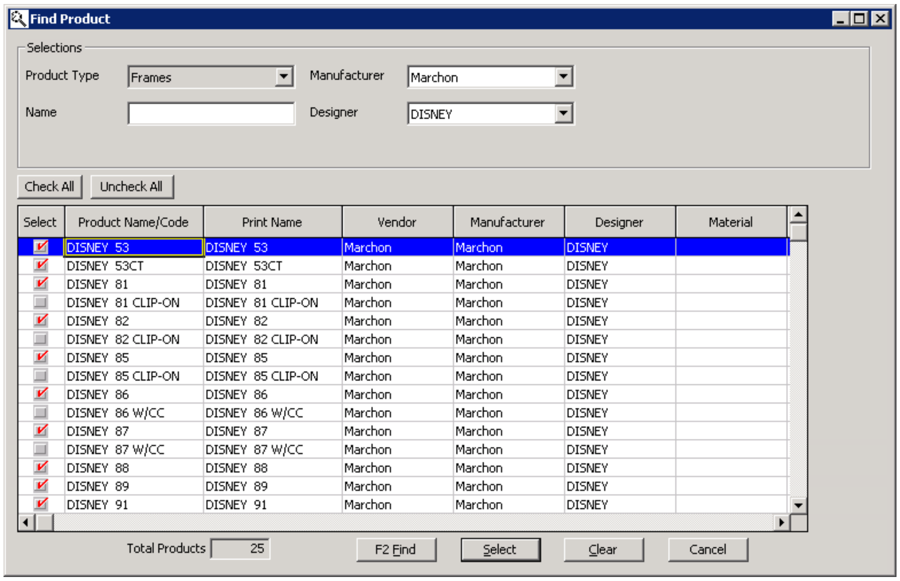
5. Click **Find Product** to find and add products to the group.

   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.



Product Type: Frames
Manufacturer: Marchon
Name:
Designer: DISNEY

Select	Product Name/Code	Print Name	Vendor	Manufacturer	Designer	Material
☑	DISNEY 53	DISNEY 53	Marchon	Marchon	DISNEY	
☑	DISNEY 53CT	DISNEY 53CT	Marchon	Marchon	DISNEY	
☑	DISNEY 81	DISNEY 81	Marchon	Marchon	DISNEY	
☐	DISNEY 81 CLIP-ON	DISNEY 81 CLIP-ON	Marchon	Marchon	DISNEY	
☑	DISNEY 82	DISNEY 82	Marchon	Marchon	DISNEY	
☐	DISNEY 82 CLIP-ON	DISNEY 82 CLIP-ON	Marchon	Marchon	DISNEY	
☑	DISNEY 85	DISNEY 85	Marchon	Marchon	DISNEY	
☐	DISNEY 85 CLIP-ON	DISNEY 85 CLIP-ON	Marchon	Marchon	DISNEY	
☑	DISNEY 86	DISNEY 86	Marchon	Marchon	DISNEY	
☐	DISNEY 86 W/CC	DISNEY 86 W/CC	Marchon	Marchon	DISNEY	
☑	DISNEY 87	DISNEY 87	Marchon	Marchon	DISNEY	
☐	DISNEY 87 W/CC	DISNEY 87 W/CC	Marchon	Marchon	DISNEY	
☑	DISNEY 88	DISNEY 88	Marchon	Marchon	DISNEY	
☑	DISNEY 89	DISNEY 89	Marchon	Marchon	DISNEY	
☑	DISNEY 91	DISNEY 91	Marchon	Marchon	DISNEY	

Total Products: 25

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 167.
2. Select a product type from the **Product Type** drop-down menu.

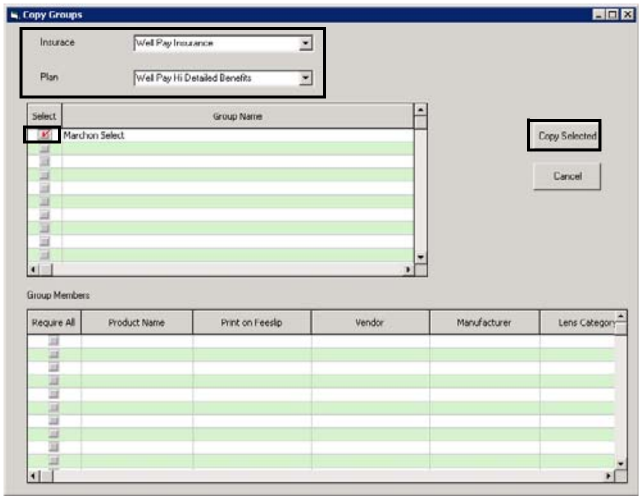
3. Click **Group Builder**.

   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**.



Insurace: Well Pay Insurance

Plan: Well Pay Hi Detailed Benefits

Select	Group Name
☑	Marchon Select

▶ 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 167.
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:

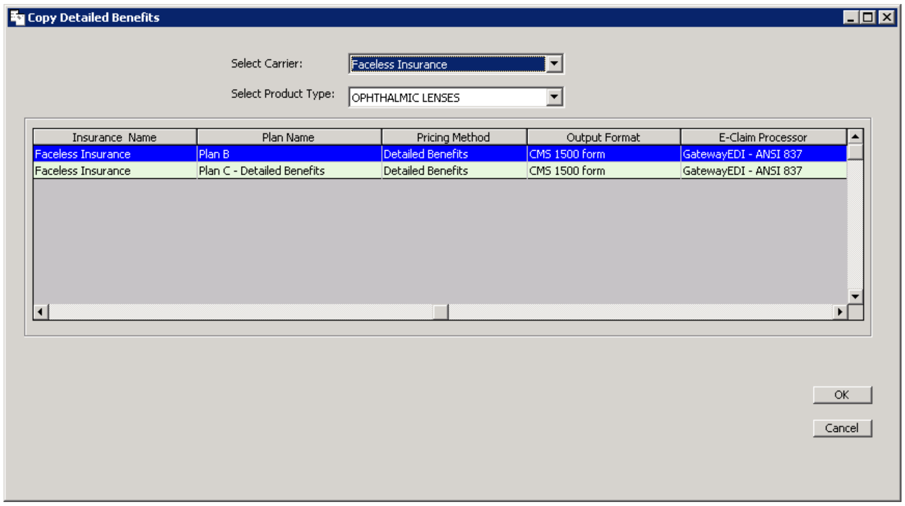
- Click **Yes** to erase all of the plan’s detailed benefits and replace them with those you are about to copy.
- Click **No** to keep the current detailed benefits and not copy detailed benefits from another plan.

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.

5. Click **OK**.



Select Carrier: Faceless Insurance

Select Product Type: OPHTHALMIC LENSES

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

6. Modify the detailed benefits as needed. For information on modifying maximum allotment information, go to To set up accessory detailed benefits on page 168, To set up contact lens detailed benefits on page 169, To set up frame detailed benefits on page 171, To set up lens treatment detailed benefits on page 173, To set up ophthalmic lens detailed benefits on page 174, To set up other detailed benefits on page 177, To set up plano sunglass detailed benefits on page 179, To set up ready reader detailed benefits on page 181, or To set up service detailed benefits on page 182.

▶ To set up a schedule of 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 167.
2. Click the **Schedule of Benefits** tab.
3. Select a product type from the **Product Type** drop-down menu.
4. 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 184. • 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.

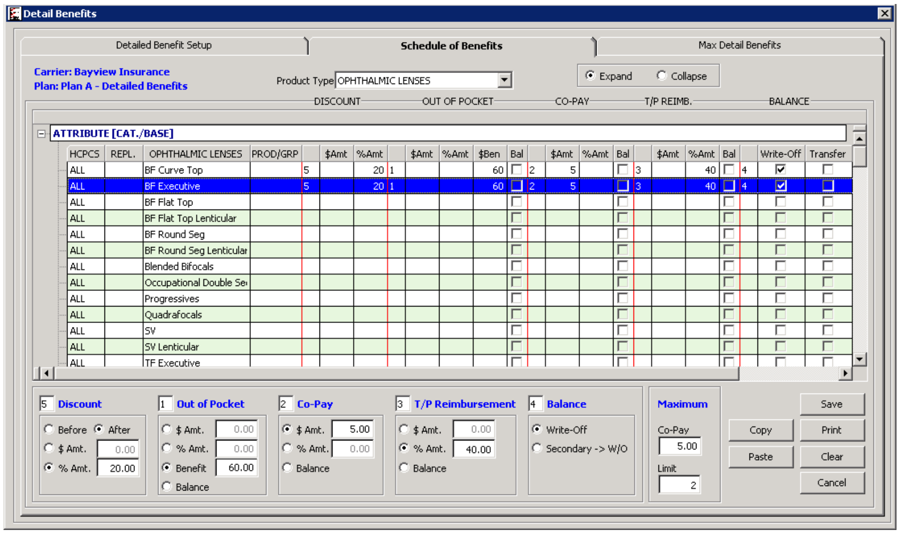
NOTES	
	- The dollar and percentage amounts are amounts that are specified by the insurance plan. - The Balance radio button indicates that the insurance plan pays any amount above the patient's copay and discount. - If you select the Balance radio button, the T/P Reimbursement category must be last 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.



Carrier: Bayview Insurance
Plan: Plan A - Detailed Benefits

Product Type: OPHTHALMIC LENSES

● Expand ○ Collapse

ATTRIBUTE [CAT./BASE]

				DISCOUNT			OUT OF POCKET					CO-PAY				T/P REIMB.				BALANCE		
HCPCS	REPL.	OPHTHALMIC LENSES	PROD/GRP		$Amt	%Amt		$Amt	%Amt	$Ben	Bal		$Amt	%Amt	Bal		$Amt	%Amt	Bal		Write-Off	Transfer
ALL		BF Curve Top		5		20	1			60	☐	2	5		☐	3		40	☐	4	☑	☐
ALL		BF Executive		5		20	1			60	☐	2	5		☐	3		40	☐	4	☑	☐
ALL		BF Flat Top									☐				☐				☐		☐	☐
ALL		BF Flat Top Lenticular									☐				☐				☐		☐	☐
ALL		BF Round Seg									☐				☐				☐		☐	☐
ALL		BF Round Seg Lenticular									☐				☐				☐		☐	☐
ALL		Blended Bifocals									☐				☐				☐		☐	☐
ALL		Occupational Double Se									☐				☐				☐		☐	☐
ALL		Progressives									☐				☐				☐		☐	☐
ALL		Quadrafocals									☐				☐				☐		☐	☐
ALL		SV									☐				☐				☐		☐	☐
ALL		SV Lenticular									☐				☐				☐		☐	☐
ALL		TF Executive									☐				☐				☐		☐	☐

5 Discount
○ Before ● After
○ $ Amt. 0.00
● % Amt. 20.00

1 Out of Pocket
○ $ Amt. 0.00
○ % Amt. 0.00
● Benefit 60.00
○ Balance

2 Co-Pay
● $ Amt. 5.00
○ % Amt. 0.00
○ Balance

3 T/P Reimbursement
○ $ Amt. 0.00
● % Amt. 40.00
○ Balance

4 Balance
● Write-Off
○ Secondary -> W/O

Maximum
Co-Pay 5.00
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 167.
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.

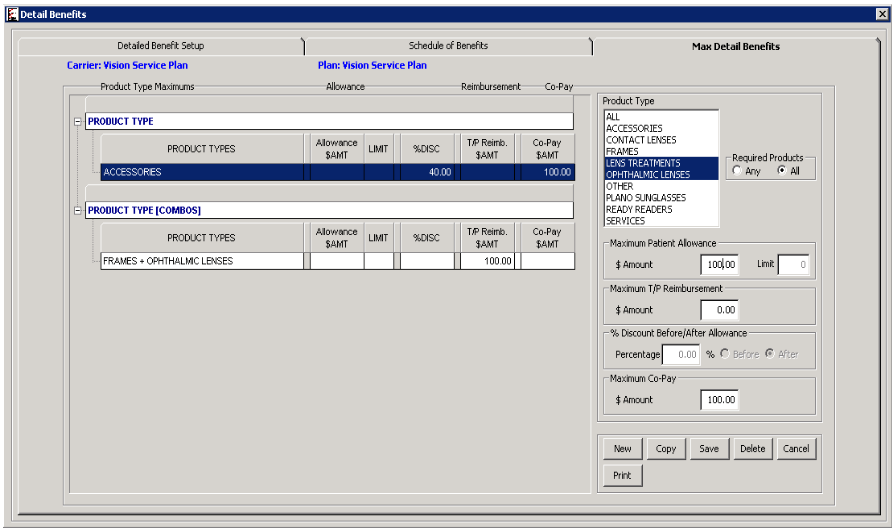
4. Select a product type from the **Product Type** list.

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 chose 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.



Carrier: Vision Service Plan

Plan: Vision Service Plan

PRODUCT TYPE

PRODUCT TYPES	Allowance $AMT	LIMIT	%DISC	T/P Reimb. $AMT	Co-Pay $AMT
ACCESSORIES			40.00		100.00

PRODUCT TYPE [COMBOS]

PRODUCT TYPES	Allowance $AMT	LIMIT	%DISC	T/P Reimb. $AMT	Co-Pay $AMT
FRAMES + OPHTHALMIC LENSES				100.00	

Product Type
ALL
ACCESSORIES
CONTACT LENSES
FRAMES
LENS TREATMENTS
OPHTHALMIC LENSES
OTHER
PLANO SUNGLASSES
READY READERS
SERVICES

Required Products ○ Any ● All

Maximum Patient Allowance
$ Amount 100.00 Limit 0

Maximum T/P Reimbursement
$ Amount 0.00

% Discount Before/After Allowance
Percentage 0.00 % ○ Before ● After

Maximum Co-Pay
$ Amount 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 166. If your practice requires a less complex insurance plan setup, go to Setting Up Plan Percentages on page 195.

This section explains how to set up maximum allotments, including how

- To open the Maximum Allotments window, 192
- To add & modify maximum allotments, 192
- To copy maximum allotments, 194

▶ 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 157.
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 157.
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 192.
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 194.
3. Select a product type from the **Product Type** list.

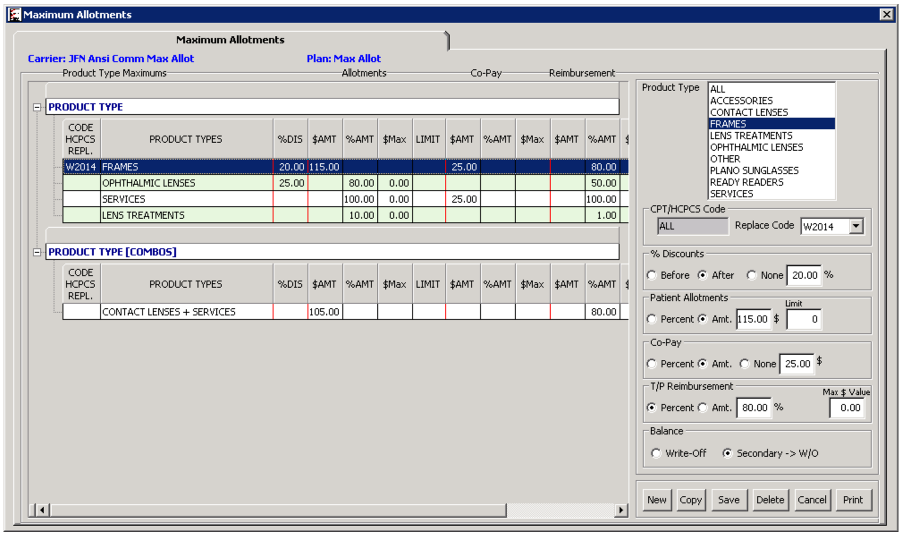
   NOTE Select more than one product type from the list to create a combination. For example, many insurance plans have a different pricing structure for frames and ophthalmic lenses when purchased together than when purchased separately.
4. Select a code from the **Replace Code** drop-down menu if the 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.



Maximum Allotments
Maximum Allotments
Product Type Maximums
Allotments
Co-Pay
Reimbursement
Product Type
ALL
ACCESSORIES
CONTACT LENSES
FRAMES
LENS TREATMENTS
OPHTHALMIC LENSES
OTHER
PLANO SUNGLASSES
READY READERS
SERVICES
New
Copy
Save
Delete
Cancel
Print

Carrier: JFN Ansi Comm Max Allot

Plan: Max Allot

PRODUCT TYPE

CODE HCPCS REPL.	PRODUCT TYPES	%DIS	$AMT	%AMT	$Max	LIMIT	$AMT	%AMT	$Max	$AMT	%AMT
W2014	FRAMES	20.00	115.00				25.00				80.00
	OPHTHALMIC LENSES	25.00		80.00	0.00						50.00
	SERVICES			100.00	0.00		25.00				100.00
	LENS TREATMENTS			10.00	0.00						1.00

PRODUCT TYPE [COMBOS]

CODE HCPCS REPL.	PRODUCT TYPES	%DIS	$AMT	%AMT	$Max	LIMIT	$AMT	%AMT	$Max	$AMT	%AMT
	CONTACT LENSES + SERVICES		105.00								80.00

CPT/HCPCS Code: ALL Replace Code: W2014

% Discounts: ○ Before ● After ○ None 20.00 %

Patient Allotments: ○ Percent ● Amt. 115.00 $ Limit 0

Co-Pay: ○ Percent ● Amt. ○ None 25.00 $

T/P Reimbursement: ● Percent ○ Amt. 80.00 % Max $ Value 0.00

Balance: ○ Write-Off ● Secondary -> W/O

▶ 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 192.
2. Click **Copy**.

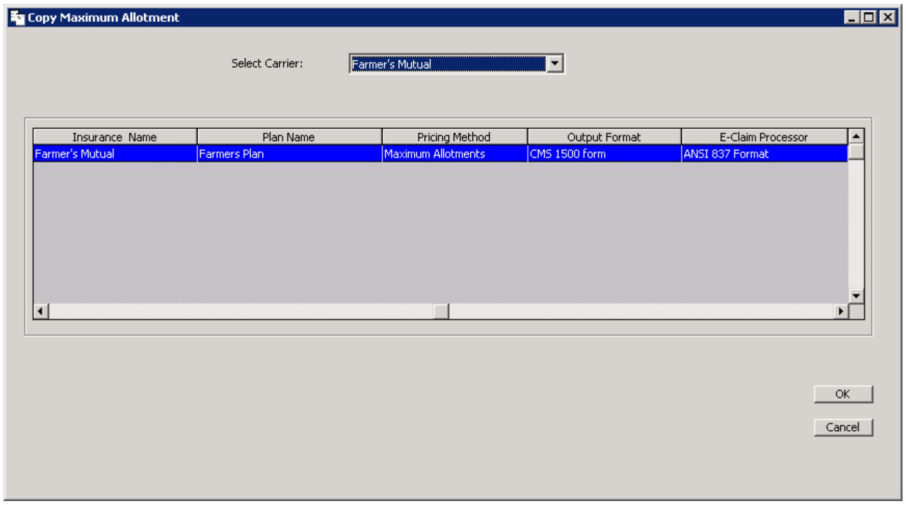
   The Copy Maximum Allotment window opens.

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.

5. Click **OK**.



Select Carrier: Farmer's Mutual

Insurance Name	Plan Name	Pricing Method	Output Format	E-Claim Processor
Farmer's Mutual	Farmers Plan	Maximum Allotments	CMS 1500 form	ANSI 837 Format

6. Modify the maximum allotments as needed. For information on modifying maximum allotment information, go to To add & modify maximum allotments on page 192.

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

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 157.
2. Select an insurance plan from the **Select Plan** drop-down menu.

   OR

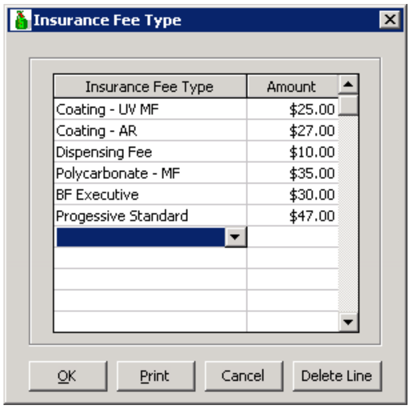
   Click **New** to add a plan. For information on adding plans, go to To add & modify insurance plans on page 157.
3. Select **Percentage** from the **Pricing Method** drop-down menu.
4. Type the percentage of cost that the plan covers in the **Coverage %** text box.

NOTES	
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.

5. Select either the **Percent** or **Amount** radio button, depending how the plan has structured the patient's copay.
6. Type the actual percent or amount of the patient's copay in the **Co-Pay** field.
7. Click **Fee Schedule** as needed.

   The Insurance Fee Type window opens.
8. 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
Progessive 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.

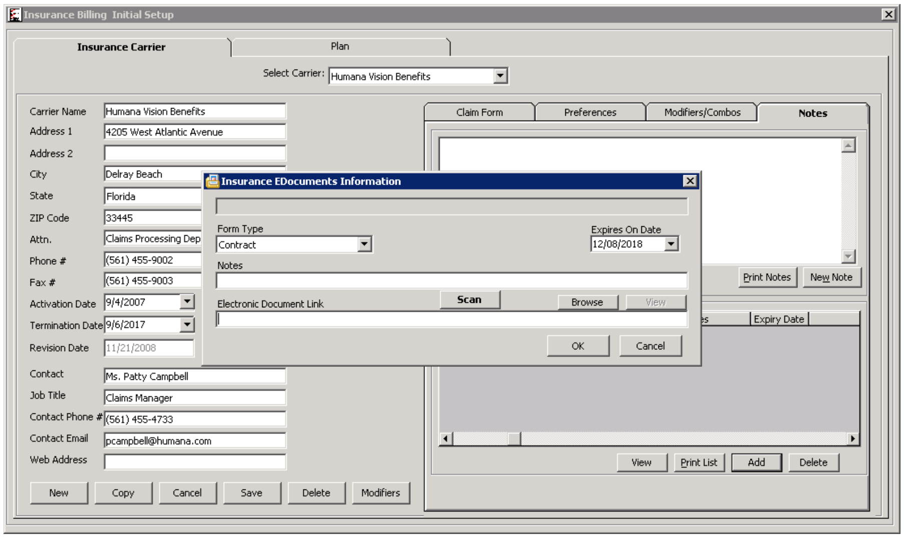
6. Click **Browse** to navigate to and select an electronic document to link to the insurance carrier or plan and go to step 8.

   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 article #000012869 in the Eyefinity Support Community, 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.


Insurance Billing Initial Setup
Insurance Carrier
Plan
Claim Form
Preferences
Modifiers/Combos
Notes
Print Notes
New Note
Expiry Date
View
Print List
Add
Delete
New
Copy
Cancel
Save
Delete
Modifiers
Insurance EDocuments Information
Scan
Browse
View
OK
Cancel

Select Carrier: Humana Vision Benefits

Carrier Name: Humana Vision Benefits
Address 1: 4205 West Atlantic Avenue
Address 2:
City: Delray Beach
State: Florida
ZIP Code: 33445
Attn.: Claims Processing Dep
Phone #: (561) 455-9002
Fax #: (561) 455-9003
Activation Date: 9/4/2007
Termination Date: 9/6/2017
Revision Date: 11/21/2008
Contact: Ms. Patty Campbell
Job Title: Claims Manager
Contact Phone #: (561) 455-4733
Contact Email: pcampbell@humana.com
Web Address:

Form Type: Contract
Expires On Date: 12/08/2018
Notes:
Electronic Document Link:

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.

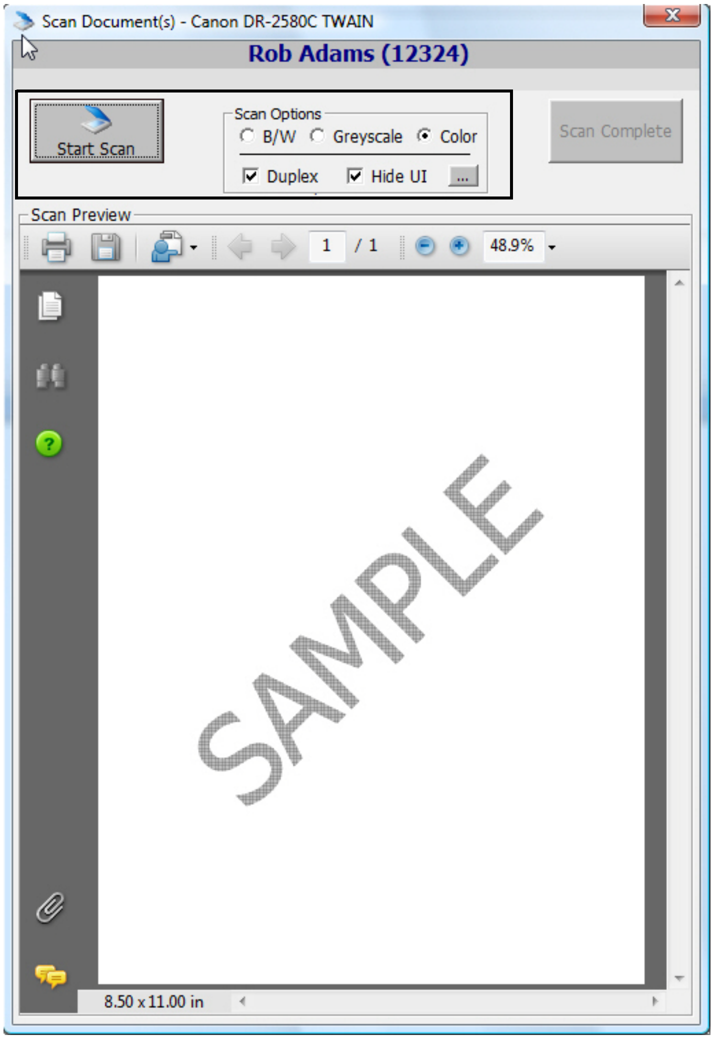
      Duplex if you want to scan two sides of a document (and if it is supported by the scanner).

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.


Scan Document(s) - Canon DR-2580C TWAIN

Rob Adams (12324)

Scan Options: ○ B/W ○ Greyscale ● Color

☑ Duplex ☑ Hide UI

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, 201
- Recording Patient Information, 205
- Attaching Electronic Documents to Patient Records, 231
- Attaching a Photo to Patient Records, 236
- Printing Patient Labels, 237
- Viewing All Patient Information, 239
- Viewing Patient Appointments, 241
- Viewing Patient Exams, 241
- Viewing & Recording Patient Referrals to Other Providers, 242
- Deleting Patient Records, 243
- Closing Patient Open Charges, 244
- Printing Patient Welcome Forms, 245

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

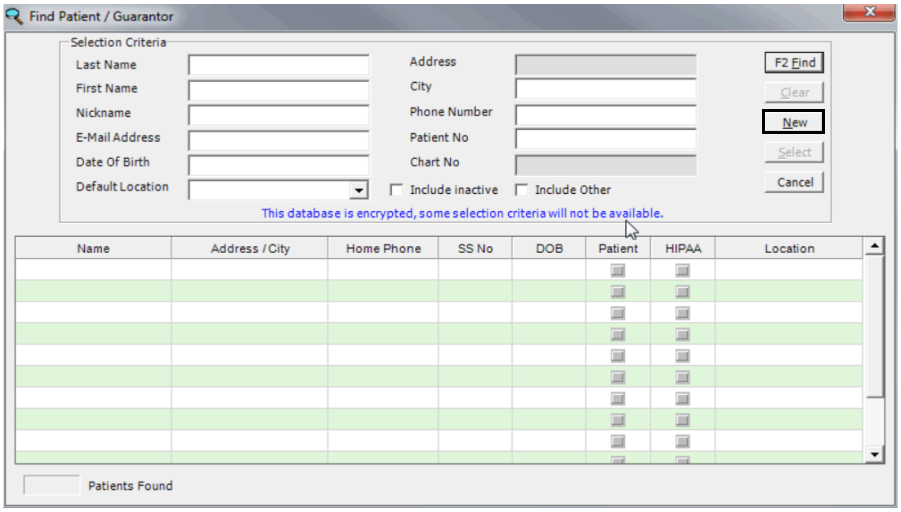
This section tells you how to create and open patient records in OfficeMate and includes the following topics:

- Creating Patient Records, 201
- Opening Patient Records, 202

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.

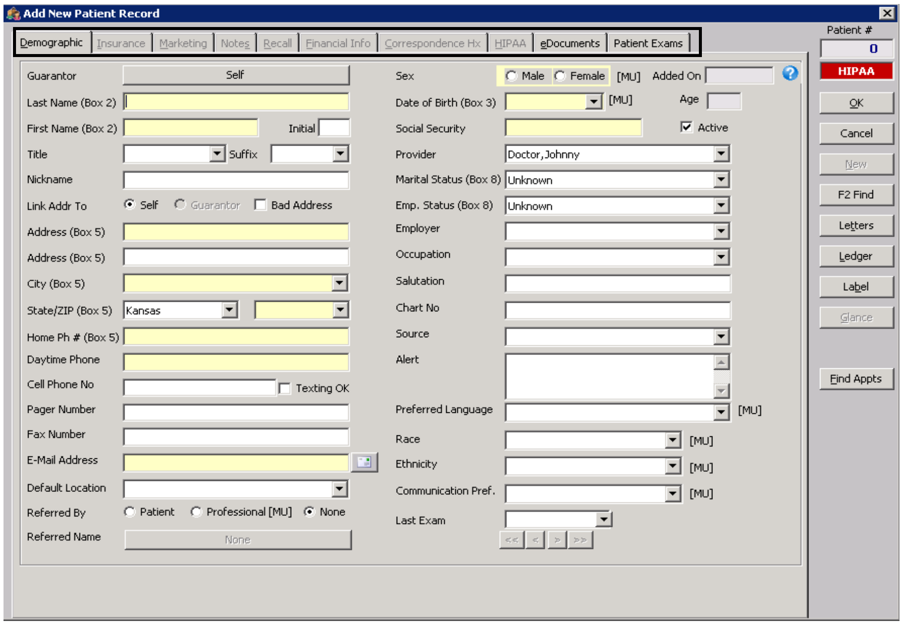
2. Click **New**.


Find Patient / Guarantor
Selection Criteria
Last Name
First Name
Nickname
E-Mail Address
Date Of Birth
Default Location
Address
City
Phone Number
Patient No
Chart No
☐ Include inactive
☐ Include Other
F2 Find
Clear
New
Select
Cancel
Name
Address / City
Home Phone
SS No
DOB
Patient
HIPAA
Location
Patients Found

This database is encrypted, some selection criteria will not be available.

The Add New Patient Record window opens.

3. Follow the instructions in Recording Patient Information on page 205 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 231 to record information in the eDocuments tab.


Add New Patient Record
Demographic
Insurance
Marketing
Notes
Recall
Financial Info
Correspondence Hx
HIPAA
eDocuments
Patient Exams
Patient #
0
HIPAA
OK
Cancel
New
F2 Find
Letters
Ledger
Label
Glance
Find Appts
Last Name (Box 2)
First Name (Box 2)
Initial
Title
Suffix
Nickname
Guarantor
Bad Address
Address (Box 5)
Address (Box 5)
City (Box 5)
Home Ph # (Box 5)
Daytime Phone
Cell Phone No
☐ Texting OK
Pager Number
Fax Number
E-Mail Address
Default Location
Patient
Professional [MU]
Referred Name
○ Male ○ Female [MU]
Added On
Date of Birth (Box 3) [MU]
Age
Social Security
Employer
Occupation
Salutation
Chart No
Source
Alert
Preferred Language [MU]
Race [MU]
Ethnicity [MU]
Communication Pref. [MU]
Last Exam

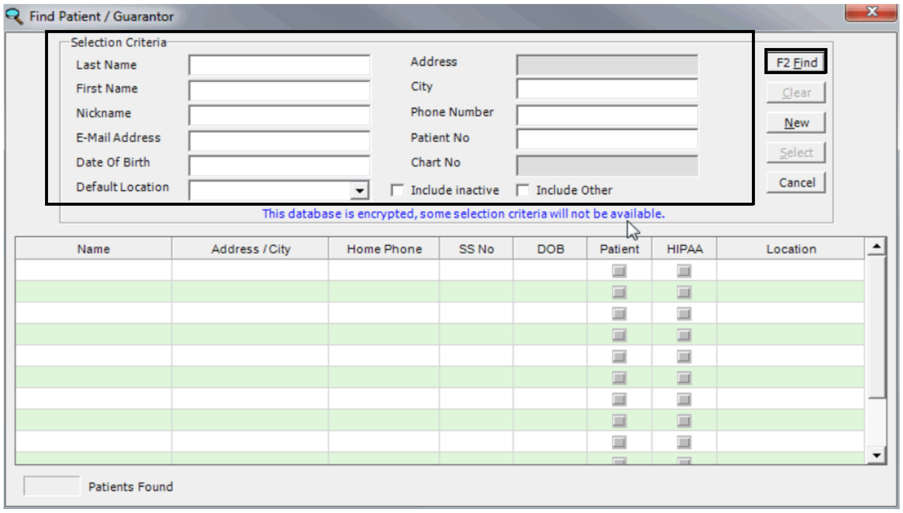
Guarantor: Self
Sex
Link Addr To: ● Self
State/ZIP (Box 5): Kansas
Referred By: ● None
☑ Active
Provider: Doctor,Johnny
Marital Status (Box 8): Unknown
Emp. Status (Box 8): Unknown

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 addresses, phone numbers, and chart numbers will be greyed out and not visible when you are searching for patients.


Find Patient / Guarantor
Selection Criteria
Last Name
First Name
Nickname
E-Mail Address
Date Of Birth
Default Location
Address
City
Phone Number
Patient No
Chart No
☐ Include inactive
☐ Include Other
F2 Find
Clear
New
Select
Cancel
Name
Address / City
Home Phone
SS No
DOB
Patient
HIPAA
Location
Patients Found

This database is encrypted, some selection criteria will not be available.

6. Click on the patient and then click **Select** or double-click on the patient.

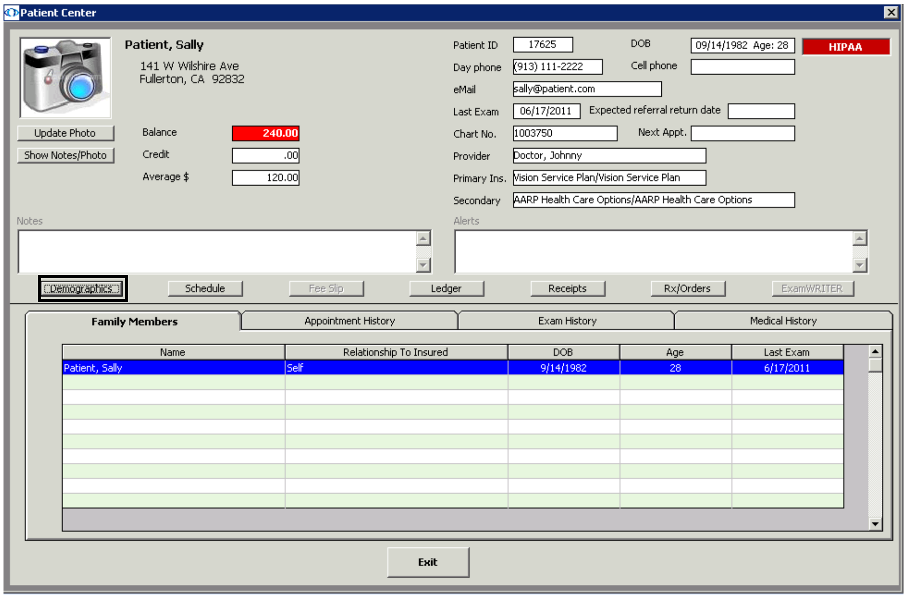
   The Patient Center window opens and displays important patient information, including the patient's ID, date of birth, phone numbers, email address, last exam date, expected referral return date, chart number, next appointment date, default provider, insurance carriers, patient and insurance balances, 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 236.
- 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**.



Patient, Sally
141 W Wilshire Ave
Fullerton, CA 92832

Balance 240.00
Credit .00
Average $ 120.00

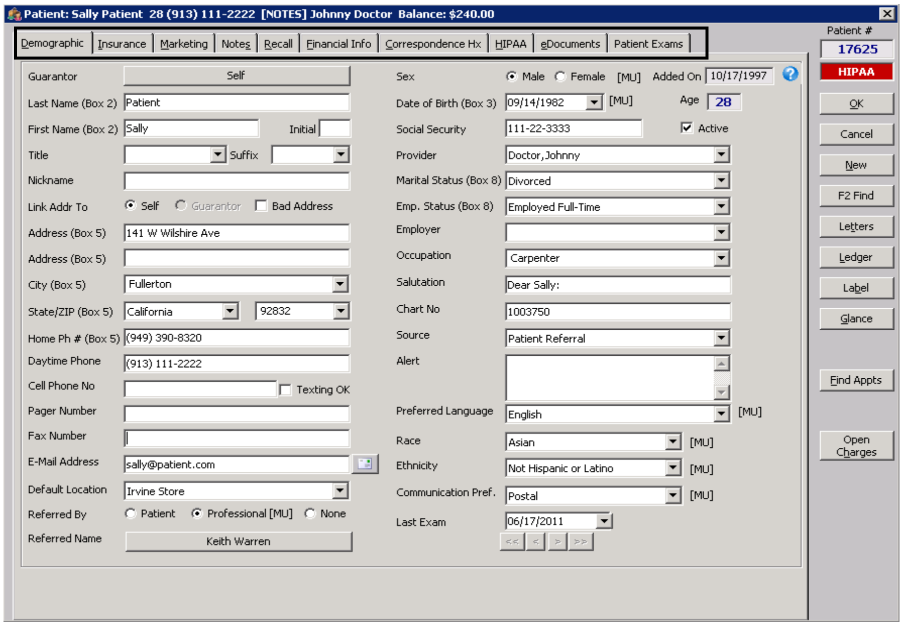
Patient ID 17625
DOB 09/14/1982 Age: 28
Day phone (913) 111-2222
Cell phone
eMail sally@patient.com
Last Exam 06/17/2011
Expected referral return date
Chart No. 1003750
Next Appt.
Provider Doctor, Johnny
Primary Ins. Vision Service Plan/Vision Service Plan
Secondary AARP Health Care Options/AARP Health Care Options

Name	Relationship To Insured	DOB	Age	Last Exam
Patient, Sally	Self	9/14/1982	28	6/17/2011

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 205 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 231 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.



Patient: Sally Patient 28 (913) 111-2222 [NOTES] Johnny Doctor Balance: $240.00

Patient #	17625
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

Recording Patient Information

This section tells you how to record patient information, including how

- To record demographic information, 206
- To record insurance information, 213
- To record additional insurance claim information, 217
- To record insurance eligibility and authorizations, 218
- To record marketing information, 220
- To record patient notes, 222
- To record and review recall information, 222
- To record financial information, 223
- To view and print correspondence history, 225
- To record HIPAA Information, 225
- To select letters to send to a patient, 231

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.

▶ To record demographic information

For information on recording demographic information, watch the "Demographics" video.

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.

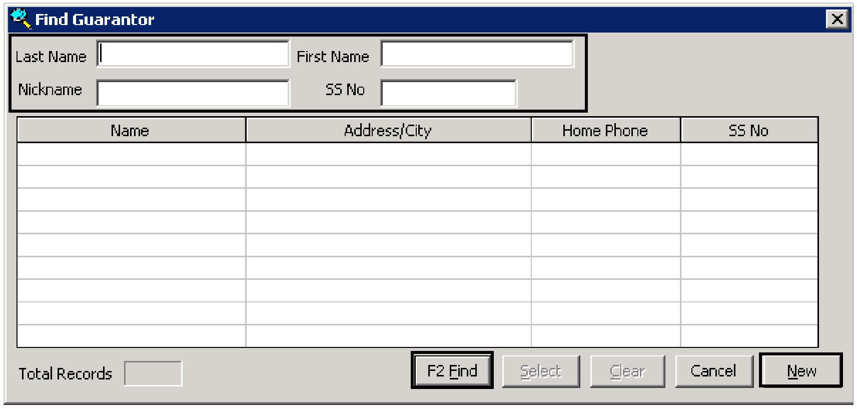
1. Click the **Demographic** tab on the Patient Demographic window or the **Demographics** button on the Patient Center window.

   NOTE Click the arrows in the bottom right corner of the window to move to the next, last, previous, or first patient's record.

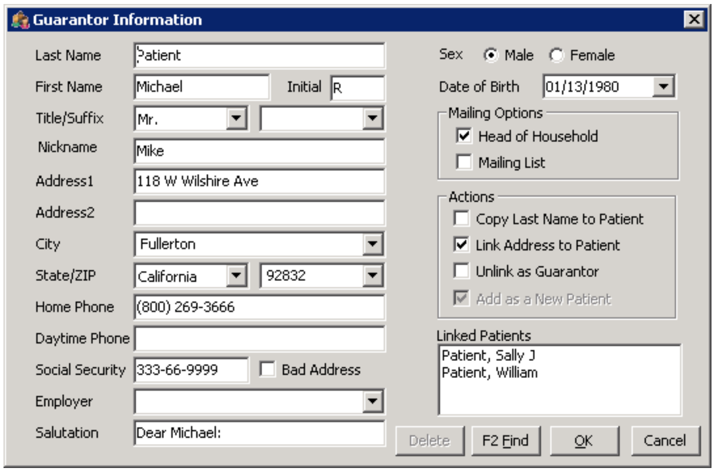
2. To change the patient's guarantor, click the button next to Guarantor and follow the instructions below:

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 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.



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.


Guarantor Information
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 206 and To record insurance information on page 213.
- 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 themself 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.

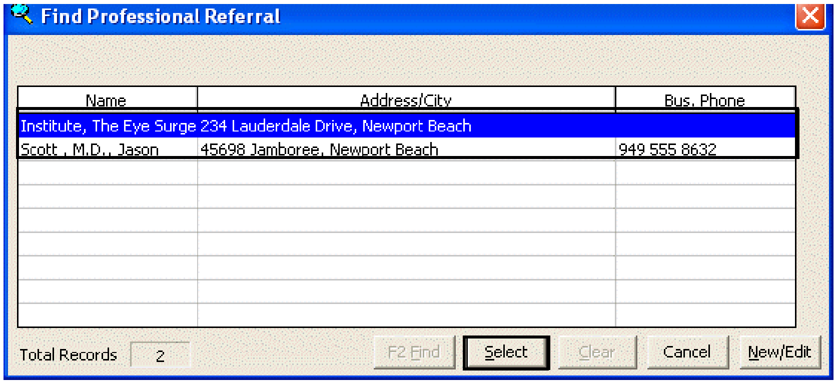
NOTE If you select the name of a referring professional, the information from the Referred Name field will *not* automatically populate in box 17 on the CMS 1500 form; however, the information from the Referred Name field will be displayed in the Referrals report and other communications. For more information 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 217. For more information about creating the Referrals report, go to Referrals on page 706.

a. Select the Referred By **Professional [MU]** radio button.

b. Click the button next to Referred Name to open the Find Professional Referral window.

c. 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.

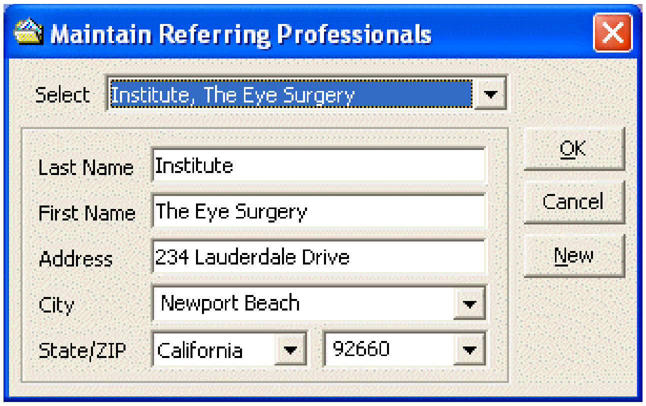
NOTE If applicable, click **F2 Find** to search for a professional referral.



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

d. Click **New/Edit** to open the Maintain Referring Professionals window and add or edit a referring professional.



Select: Institute, The Eye Surgery

Last Name: Institute

First Name: The Eye Surgery

Address: 234 Lauderdale Drive

City: Newport Beach

State/ZIP: California 92660

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.

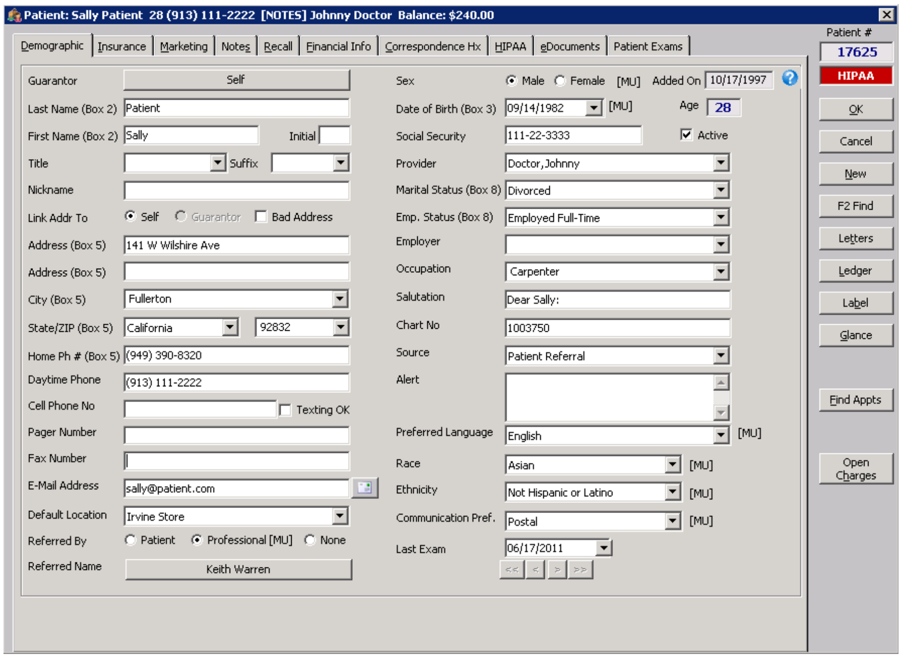
NOTE To add languages to the Preferred Language drop-down menu, open the Customization window and click the **Preferred Languages** tab. For more information, go to To select preferred languages on page 44.

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.



Patient: Sally Patient 28 (913) 111-2222 [NOTES] Johnny Doctor Balance: $240.00

Patient # 17625

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

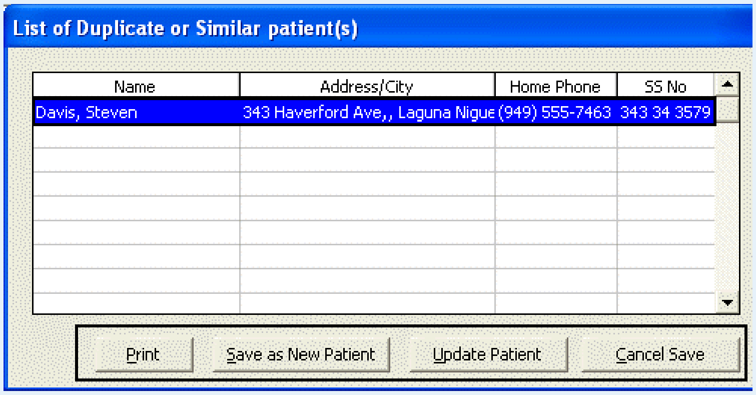
Sex: ● Male ○ Female [MU] Added On 10/17/1997
Date of Birth (Box 3): 09/14/1982 [MU] Age 28
Social Security: 111-22-3333 ☑ Active
Provider: Doctor,Johnny
Marital Status (Box 8): Divorced
Emp. Status (Box 8): Employed Full-Time
Employer:
Occupation: Carpenter
Salutation: Dear Sally:
Chart No: 1003750
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

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

▶ To record insurance information

For information on recording insurance information, watch the "Insurance" 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.

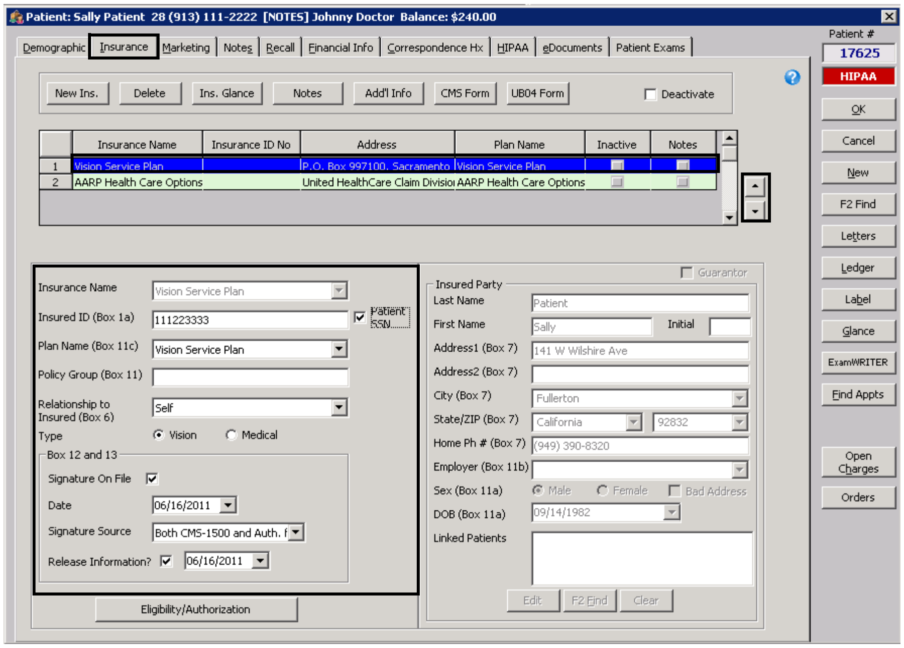
1. Open the Patient Demographic window. For more information about opening the Patient Demographic window, go to Opening Patient Records on page 202.
2. Ensure that you have recorded the patient's name, address, home phone number, sex, date of birth, social security number, marital status, and employment 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.


Demographic
Insurance
Marketing
Notes
Recall
Financial Info
Correspondence Hx
HIPAA
eDocuments
Patient Exams
Patient #
17625
HIPAA
New Ins.
Delete
Ins. Glance
Notes
Add'l Info
CMS Form
UB04 Form
OK
Cancel
New
F2 Find
Letters
Ledger
Label
Glance
ExamWRITER
Find Appts
Open Charges
Orders
Eligibility/Authorization
Edit
F2 Find
Clear

Patient: Sally Patient 28 (913) 111-2222 [NOTES] Johnny Doctor Balance: $240.00

☐ Deactivate

	Insurance Name	Insurance ID No	Address	Plan Name	Inactive	Notes
1	Vision Service Plan		P.O. Box 997100, Sacramento	Vision Service Plan	☐	☐
2	AARP Health Care Options		United HealthCare Claim Divisioi	AARP Health Care Options	☐	☐

Insurance Name: Vision Service Plan
Insured ID (Box 1a): 111223333 ☑ Patient SSN
Plan Name (Box 11c): Vision Service Plan
Policy Group (Box 11):
Relationship to Insured (Box 6): Self
Type: ● Vision ○ Medical
Box 12 and 13
Signature On File ☑
Date: 06/16/2011
Signature Source: Both CMS-1500 and Auth. f
Release Information? ☑ 06/16/2011

☐ Guarantor
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:

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.

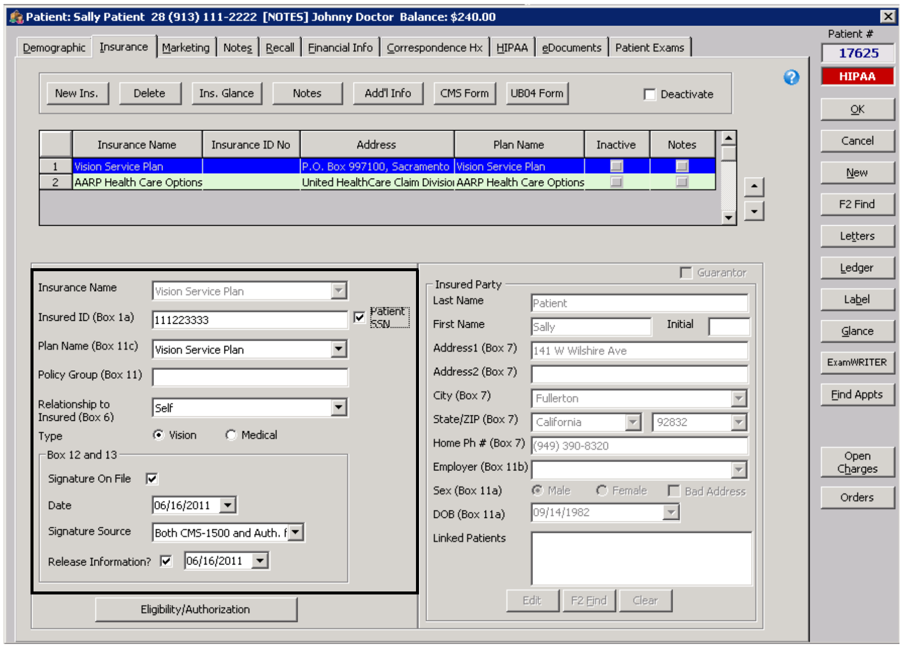
NOTE	Do not delete or modify an insurance carrier if you have already billed it for any patient charges.

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 460.

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.


Demographic
Insurance
Marketing
Notes
Recall
Financial Info
Correspondence Hx
HIPAA
eDocuments
Patient Exams
New Ins.
Delete
Ins. Glance
Notes
Add'l Info
CMS Form
UB04 Form
☐ Deactivate
Patient #
17625
HIPAA
OK
Cancel
New
F2 Find
Letters
Ledger
Label
Glance
ExamWRITER
Find Appts
Open Charges
Orders
☐ Guarantor
Edit
F2 Find
Clear
Eligibility/Authorization

Patient: Sally Patient 28 (913) 111-2222 [NOTES] Johnny Doctor Balance: $240.00

	Insurance Name	Insurance ID No	Address	Plan Name	Inactive	Notes
1	Vision Service Plan		P.O. Box 997100, Sacramento	Vision Service Plan	☐	☐
2	AARP Health Care Options		United HealthCare Claim Divisio	AARP Health Care Options	☐	☐

Insurance Name: Vision Service Plan
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Plan Name (Box 11c): Vision Service Plan
Policy Group (Box 11):
Relationship to Insured (Box 6): Self
Type: ● Vision ○ Medical
Box 12 and 13
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:

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 164.

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

For information on recording detailed insurance information, watch the "Insurance" video.

1. Open the Patient Demographic window. For more information about opening the Patient Demographic window, go to Opening Patient Records on page 202.
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 o to To record insurance information on page 213.
5. Click **Add'l Info** to add additional insurance information.

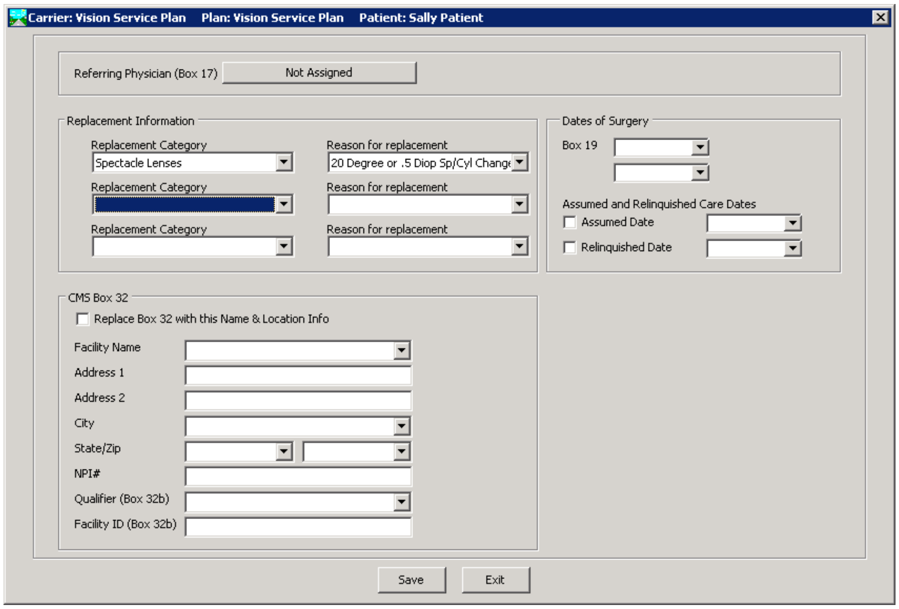
   The Additional Claim Information window opens.
6. Select a referring physician by clicking **Not Assigned** as needed.

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 206.
- 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 148.

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.



Carrier: Vision Service Plan Plan: Vision Service Plan Patient: Sally Patient

Referring Physician (Box 17): Not Assigned

Replacement Category: Spectacle Lenses

Reason for replacement: 20 Degree or .5 Diop Sp/Cyl Change

Replacement Information
Replacement Category
Reason for replacement
Replacement Category
Reason for replacement
Dates of Surgery
Box 19
Assumed and Relinquished Care Dates
☐ Assumed Date
☐ Relinquished Date
CMS Box 32
☐ Replace Box 32 with this Name & Location Info
Facility Name
Address 1
Address 2
City
State/Zip
NPI#
Qualifier (Box 32b)
Facility ID (Box 32b)
Save
Exit

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 533.

1. Open the Patient Demographic window. For more information about opening the Patient Demographic window, go to Opening Patient Records on page 202.
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 o to To record insurance information on page 213.
5. Click **Eligibility/Authorization** to record or view eligibility and authorization information.

   The **Eligibility/Authorization** window opens.

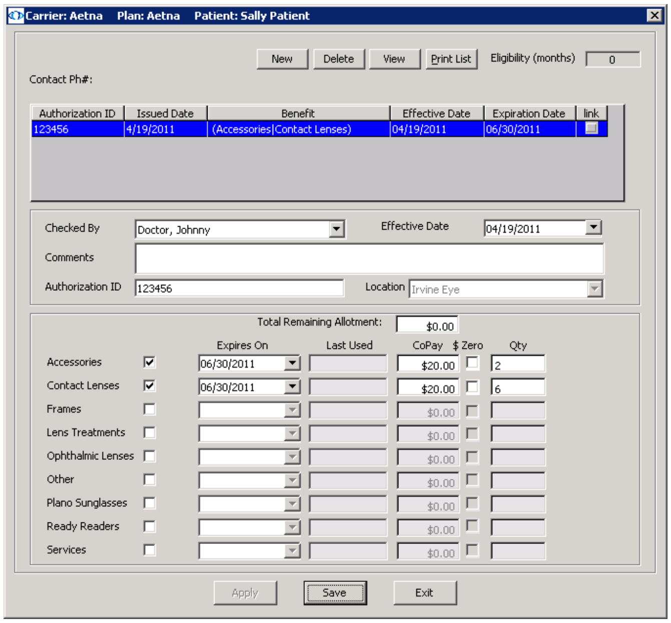
6. Click **New** to add a new authorization, eligibility, and copayment information.

   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.

7. Make selections from the **Checked By** and **Effective Date** drop-down menus if the information did not automatically populate.
8. Type comments in the **Comments** field as needed.
9. Type the authorization code received from the insurance plan in the Authorization **ID** field.
10. Type the total amount authorized in the **Total Remaining Allotment** field.
11. Select the check box for each of the product types authorized.
12. Select the date on which the authorization expires from the **Expires On** drop-down menus as needed.
13. Type the amount the patient is required to pay in the **CoPay** fields as needed.
14. If the patient is limited in the number of units of a product, type the number in the **Qty** fields as needed.



Carrier: Aetna Plan: Aetna Patient: Sally Patient

Eligibility (months) 0

Contact Ph#:

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	☑	06/30/2011		$20.00	☐	2
Contact Lenses	☑	06/30/2011		$20.00	☐	6
Frames	☐			$0.00	☐	
Lens Treatments	☐			$0.00	☐	
Ophthalmic Lenses	☐			$0.00	☐	
Other	☐			$0.00	☐	
Plano Sunglasses	☐			$0.00	☐	
Ready Readers	☐			$0.00	☐	
Services	☐			$0.00	☐	

15. Click **Save** to save your changes.
16. Click **Exit** to close the **Eligibility/Authorization** window.

▶ To record marketing information

For information on recording marketing information, watch the "Marketing & Notes" video.

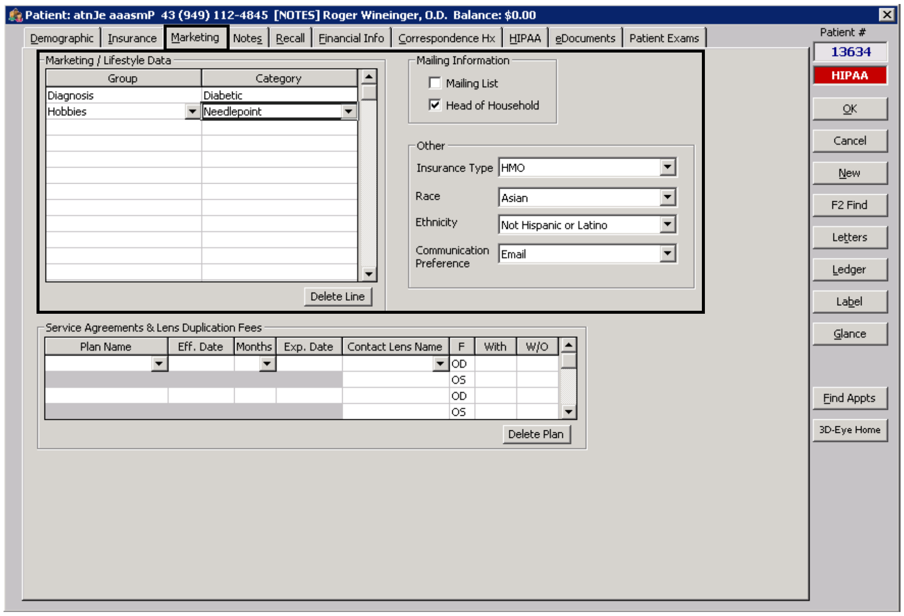
OfficeMate allows you to record patient marketing information and send optometric practice marketing materials to patients who have similar characteristics. Follow the instructions below to record marketing information for your patients.

> **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.



Patient: atnJe aaasmP 43 (949) 112-4845 [NOTES] Roger Wineinger, O.D. Balance: $0.00

Patient # 13634

Marketing / Lifestyle Data

Group	Category
Diagnosis	Diabetic
Hobbies	Needlepoint

Mailing Information

☐ Mailing List
☑ Head of Household

Other

Insurance Type: HMO
Race: Asian
Ethnicity: Not Hispanic or Latino
Communication Preference: Email

Service Agreements & Lens Duplication Fees

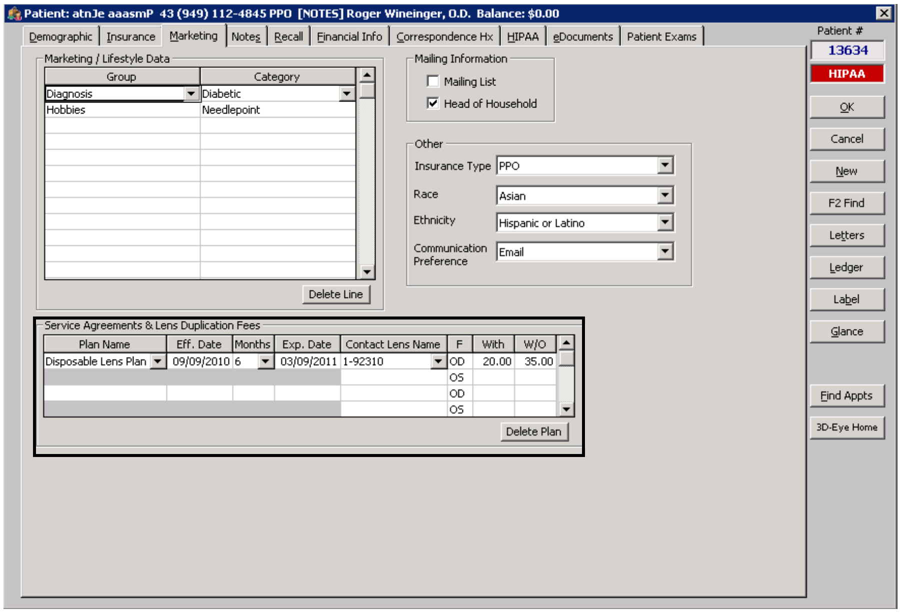
Plan Name	Eff. Date	Months	Exp. Date	Contact Lens Name	F	With	W/O
					OD		
					OS		
					OD		
					OS		

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.

   a. Select a service agreement from the **Plan Name** drop-down menu.
   b. 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.
   c. Type or select the number of months for each renewal year in the **Months** column.
   d. 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.
   e. Select a contact lens to duplicate in the **Contact Lens Name** drop-down menu.
   f. 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**.


Demographic
Insurance
Marketing
Notes
Recall
Financial Info
Correspondence Hx
HIPAA
eDocuments
Patient Exams
HIPAA
OK
Cancel
New
F2 Find
Letters
Ledger
Label
Glance
Find Appts
3D-Eye Home
Delete Line
Delete Plan

Patient: atnJe aaasmP 43 (949) 112-4845 PPO [NOTES] Roger Wineinger, O.D. Balance: $0.00

Patient # 13634

Marketing / Lifestyle Data

Group	Category
Diagnosis	Diabetic
Hobbies	Needlepoint

Mailing Information
☐ Mailing List
☑ Head of Household

Other
Insurance Type: PPO
Race: Asian
Ethnicity: Hispanic or Latino
Communication Preference: Email

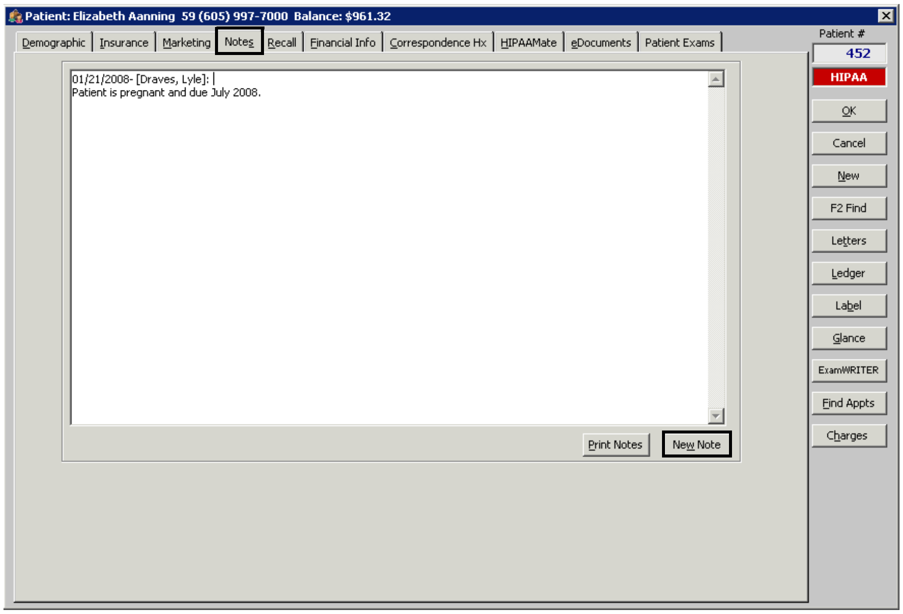
Service Agreements & Lens Duplication Fees

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		

▶ To record patient notes

For information on recording notes, watch the "Marketing & Notes" video.

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.


Patient: Elizabeth Aanning 59 (605) 997-7000 Balance: $961.32

01/21/2008- [Draves, Lyle]:
Patient is pregnant and due July 2008.

Patient # 452
Demographic
Insurance
Marketing
Notes
Recall
Financial Info
Correspondence Hx
HIPAAMate
eDocuments
Patient Exams
HIPAA
OK
Cancel
New
F2 Find
Letters
Ledger
Label
Glance
ExamWRITER
Find Appts
Charges
Print Notes
New Note

NOTE To print notes, click **Print Notes**.

▶ To record and review recall information

For information on recording recall information, watch the "Recall Setup" video.

You can assign up to three recall schedules to a patient in the Patient Demographic window.

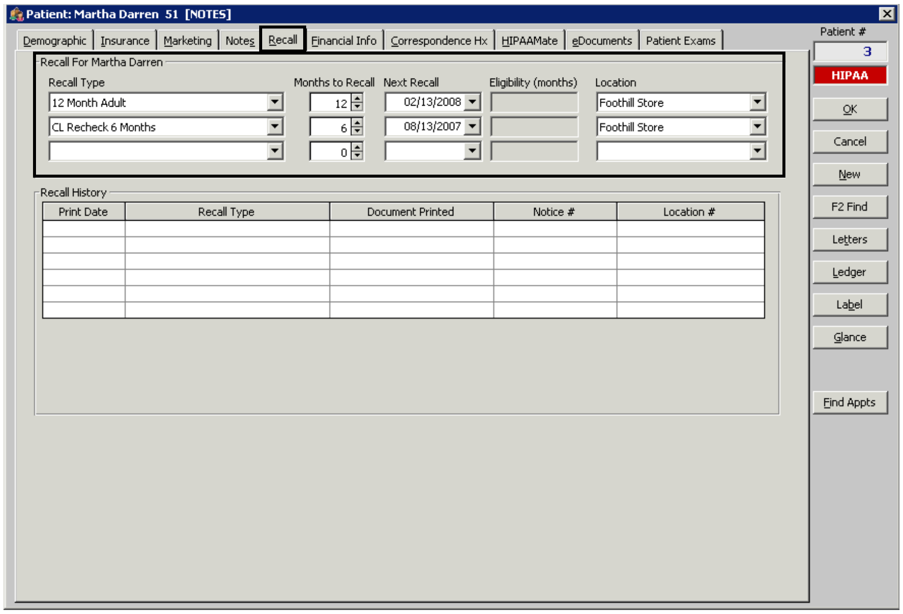
1. Click the **Recall** tab in the Patient Demographic window.

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.

4. Select the location to which you are recalling the patient from the **Location** drop-down menu.



Patient: Martha Darren 51 [NOTES]

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 #

Patient # 3

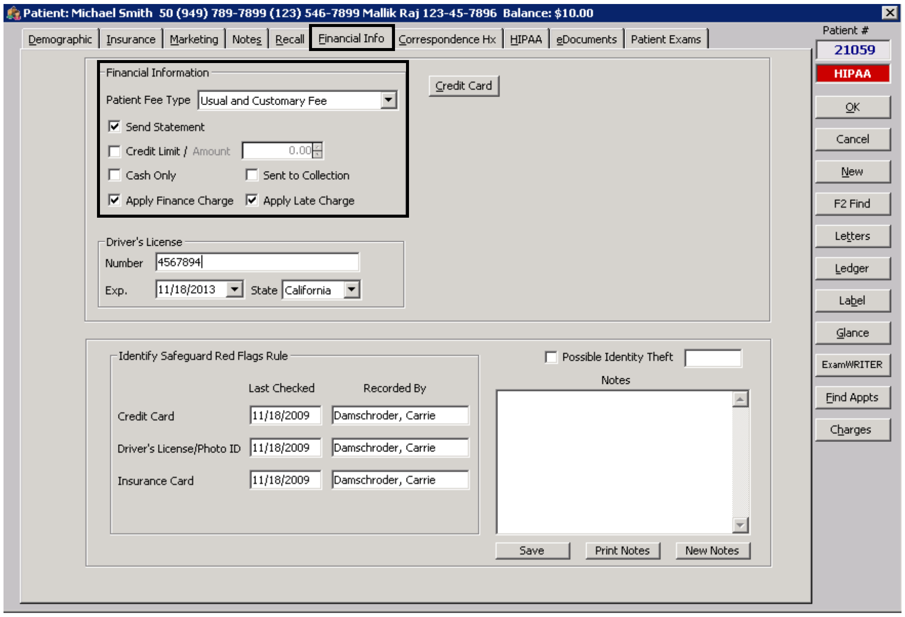
▶ To record financial information

For information on recording financial information, watch the “Financial Information” video.

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 231. 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 352.

1. Click the **Financial** tab in the Patient Demographic window.
2. Select the patient’s fee classification from the **Patient Fee Type** drop-down menu.
3. Select the **Send Statement** check box if you want to send financial statements to the patient.
4. 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.
5. 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.


Demographic
Insurance
Marketing
Notes
Recall
Financial Info
Correspondence Hx
HIPAA
eDocuments
Patient Exams
HIPAA
Credit Card
OK
Cancel
New
F2 Find
Letters
Ledger
Label
Glance
ExamWRITER
Find Appts
Charges
Save
Print Notes
New Notes

Patient: Michael Smith 50 (949) 789-7899 (123) 546-7899 Mallik Raj 123-45-7896 Balance: $10.00

Patient # 21059

Financial Information
Patient Fee Type: Usual and Customary Fee
☑ Send Statement
☐ Credit Limit / Amount 0.00
☐ Cash Only
☐ Sent to Collection
☑ Apply Finance Charge
☑ Apply Late Charge

Driver's License
Number: 4567894
Exp.: 11/18/2013
State: California

Identify Safeguard Red Flags Rule

	Last Checked	Recorded By
Credit Card	11/18/2009	Damschroder, Carrie
Driver's License/Photo ID	11/18/2009	Damschroder, Carrie
Insurance Card	11/18/2009	Damschroder, Carrie

☐ Possible Identity Theft

Notes

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.

For information on recording patient identity and security information, watch the "Red Flags Rule" video.

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.

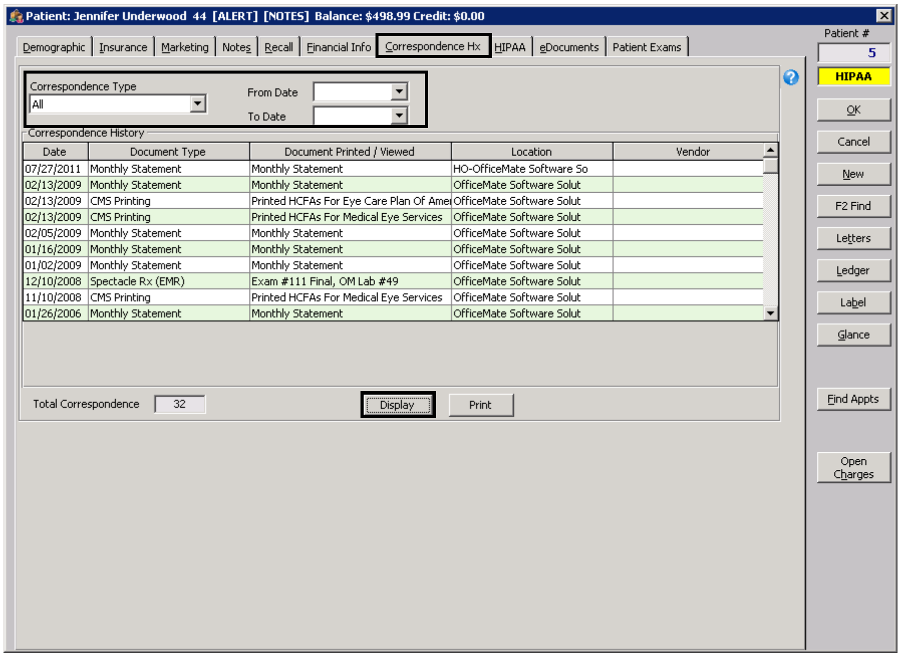
    A red "RFR" box appears in the Patient Center, Fee Slip, Receipts & Adjustments, and Patient Demographic (Financial Info tab) window to quickly indicate to you the identity theft status of the patient's security and identity information.

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.

NOTE	Click Print Notes to print the notes about the patient's security and identity information.

▶ 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

Patient # 5

Correspondence Type: All

From Date:

To Date:

Correspondence History

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 Amei	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

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

For information on recording HIPAA information, watch the "HIPAA" video.

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.

4. To record patient privacy, consent, and authorization forms, follow the instructions below:

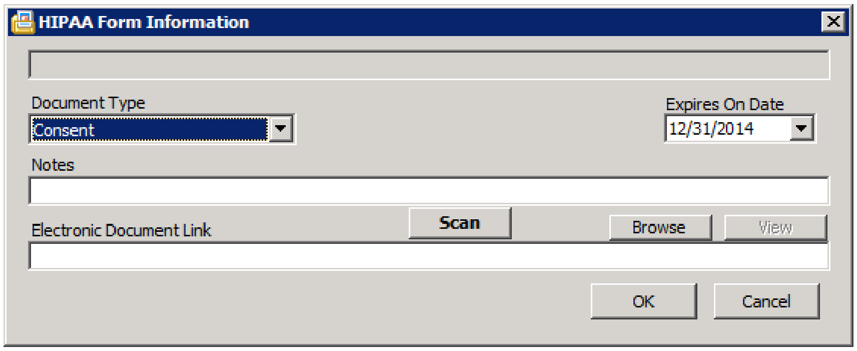
NOTES

- 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**.

a. Click **Add** in the Patient Privacy, Consent and Authorization Forms box to open the **HIPAA Form Information** window opens.

b. Select a form from the **Document Type** menu.

c. Type or select an expiration date in the **Expires on Date** text box.


Document Type: Consent
Expires On Date: 12/31/2014

d. If you want to add notes to the form, type them in the **Notes** text box.

e. 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 article #000012869 in the Eyefinity Support Community, 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.

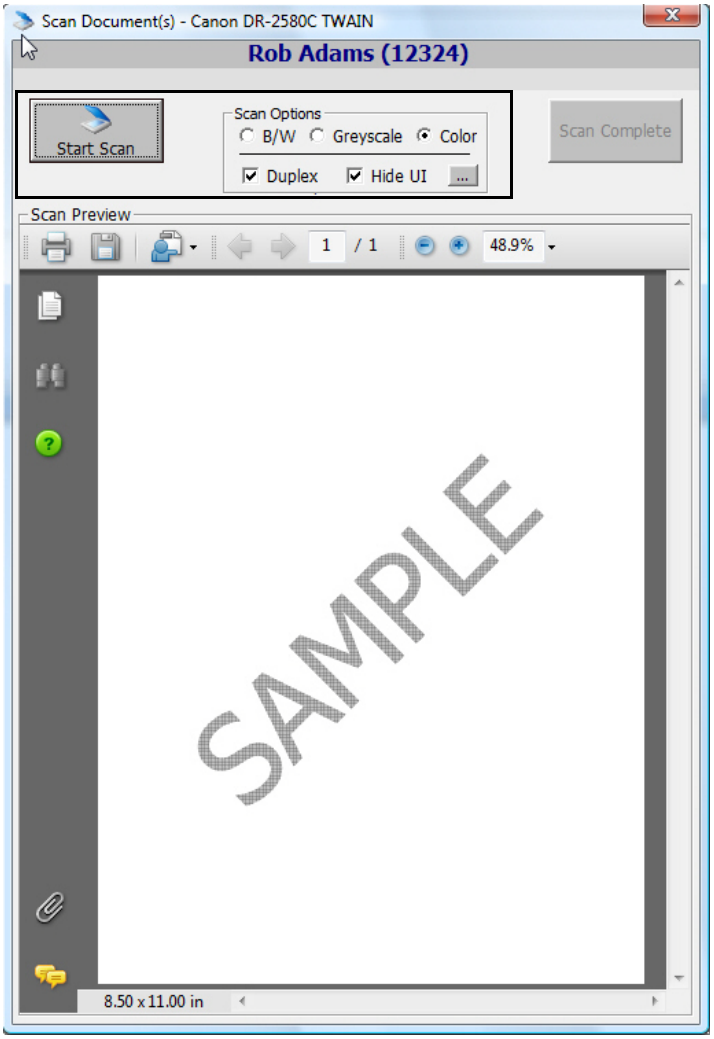
      Duplex if you want to scan two sides of a document (and if it is supported by the scanner).

      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.

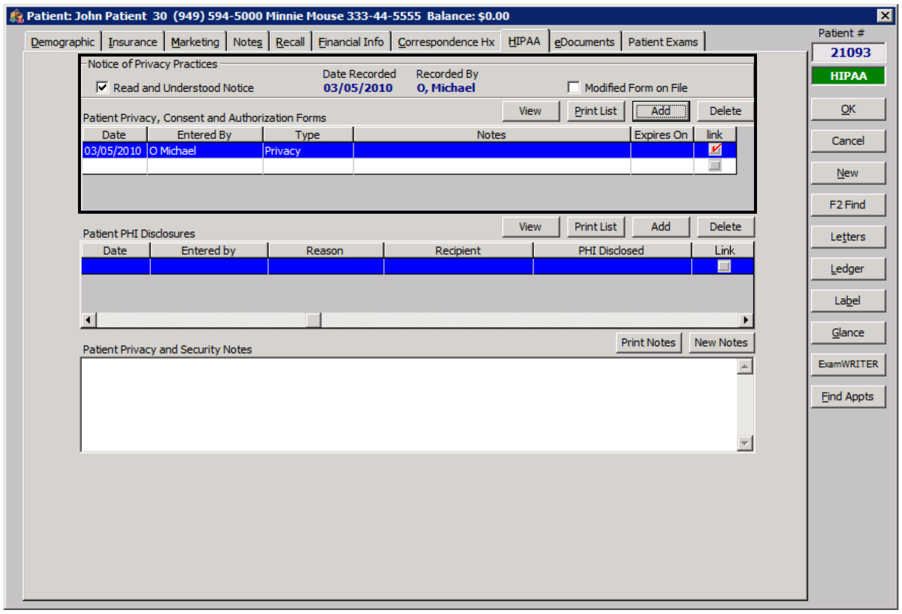

Scan Document(s) - Canon DR-2580C TWAIN
Rob Adams (12324)
Start Scan
Scan Options
○ B/W ○ Greyscale ● Color
☑ Duplex ☑ Hide UI ...
Scan Complete
Scan Preview
1 / 1
48.9%
SAMPLE
8.50 x 11.00 in

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.


Demographic
Insurance
Marketing
Notes
Recall
Financial Info
Correspondence Hx
HIPAA
eDocuments
Patient Exams
HIPAA
View
Print List
Add
Delete
OK
Cancel
New
F2 Find
Letters
Ledger
Label
Glance
ExamWRITER
Find Appts
Print Notes
New Notes

Patient: John Patient 30 (949) 594-5000 Minnie Mouse 333-44-5555 Balance: $0.00

Patient # 21093

Notice of Privacy Practices

☑ Read and Understood Notice

Date Recorded 03/05/2010

Recorded By O, Michael

☐ Modified Form on File

Patient Privacy, Consent and Authorization Forms

Date	Entered By	Type	Notes	Expires On	link
03/05/2010	O Michael	Privacy			☑
					☐

Patient PHI Disclosures

Date	Entered by	Reason	Recipient	PHI Disclosed	Link
					☐

Patient Privacy and Security Notes

6. To record patient PHI disclosures, follow the instructions below:

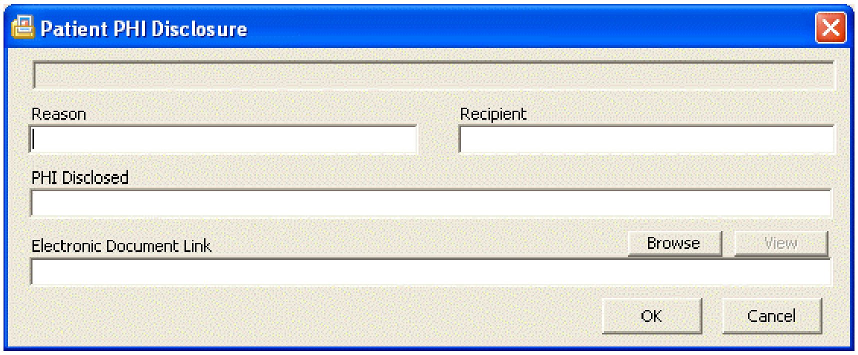
NOTES

- 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**.

a. Click **Add** in the Patient PHI Disclosures box to open the **Patient PHI Disclosure** window opens.

b. Type a reason for the disclosure in the **Reason** text box.

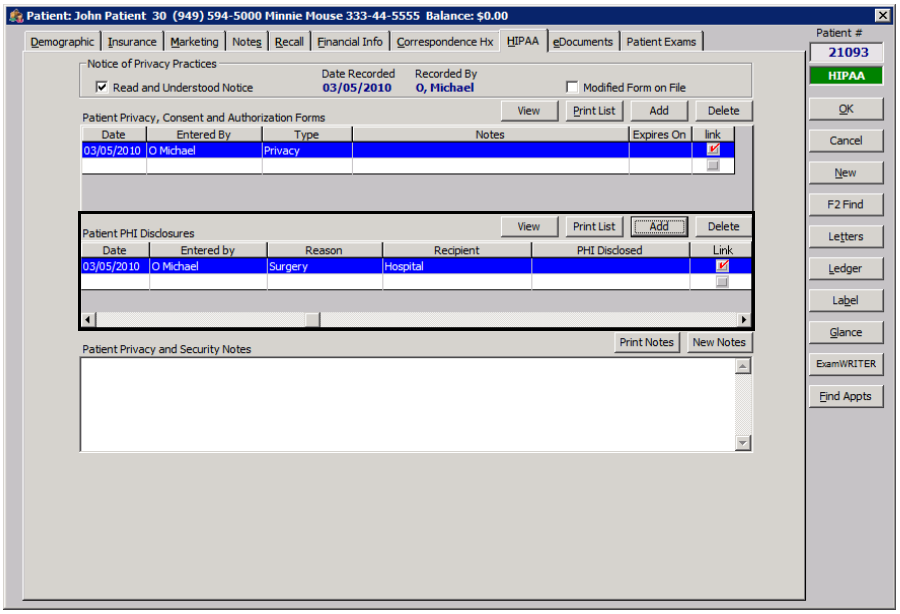
c. Type the name of the recipient in the **Recipient** text box.


Patient PHI Disclosure
Reason
Recipient
PHI Disclosed
Electronic Document Link
Browse
View
OK
Cancel

d. Type information on the disclosed PHI in the **PHI Disclosed** text box.

e. Click **Browse** to navigate to and select an electronic document to link to the patient's PHI disclosure.

f. Click **OK** to close the Patient PHI Disclosure window.


Demographic
Insurance
Marketing
Notes
Recall
Financial Info
Correspondence Hx
HIPAA
eDocuments
Patient Exams
View
Print List
Add
Delete
Print Notes
New Notes
OK
Cancel
New
F2 Find
Letters
Ledger
Label
Glance
ExamWRITER
Find Appts

Patient: John Patient 30 (949) 594-5000 Minnie Mouse 333-44-5555 Balance: $0.00

Patient # 21093

HIPAA

Notice of Privacy Practices

☑ Read and Understood Notice

Date Recorded 03/05/2010

Recorded By O, Michael

☐ Modified Form on File

Patient Privacy, Consent and Authorization Forms

Date	Entered By	Type	Notes	Expires On	link
03/05/2010	O Michael	Privacy			☑
					☐

Patient PHI Disclosures

Date	Entered by	Reason	Recipient	PHI Disclosed	Link
03/05/2010	O Michael	Surgery	Hospital		☑
					☐

Patient Privacy and Security Notes

7. 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

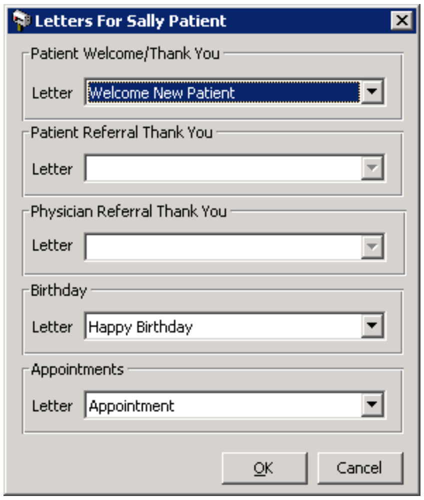
Follow the instructions below to select welcome, thank you, birthday, and appointment letters to send to a patient.

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.

1. Click **Letters** on the Patient Demographic window.

   The **Letters** window opens.

2. Select letters from the Patient Welcome/Thank You, Referral Thank You, Birthday, and Appointments Letter drop-down menus.



Letters For Sally Patient

Patient Welcome/Thank You
Letter: Welcome New Patient

Patient Referral Thank You
Letter:

Physician Referral Thank You
Letter:

Birthday
Letter: Happy Birthday

Appointments
Letter: Appointment

3. 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\eDocuments or OMATE32\DATA\eDocuments folder.

For information on using the eDocuments tab, watch the "eDocuments" 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**.

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 or modify or delete existing items from 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.

For information on recording patient identity and security information, watch the "Red Flags Rule" video.

   NOTES
   - To activate the Safeguard - Red Flags Rule feature, go to To set up financial preferences on page 63.
   - If you have received a notification that the patient's identity may have been stolen, go to To record financial information on page 223 to record the notification.

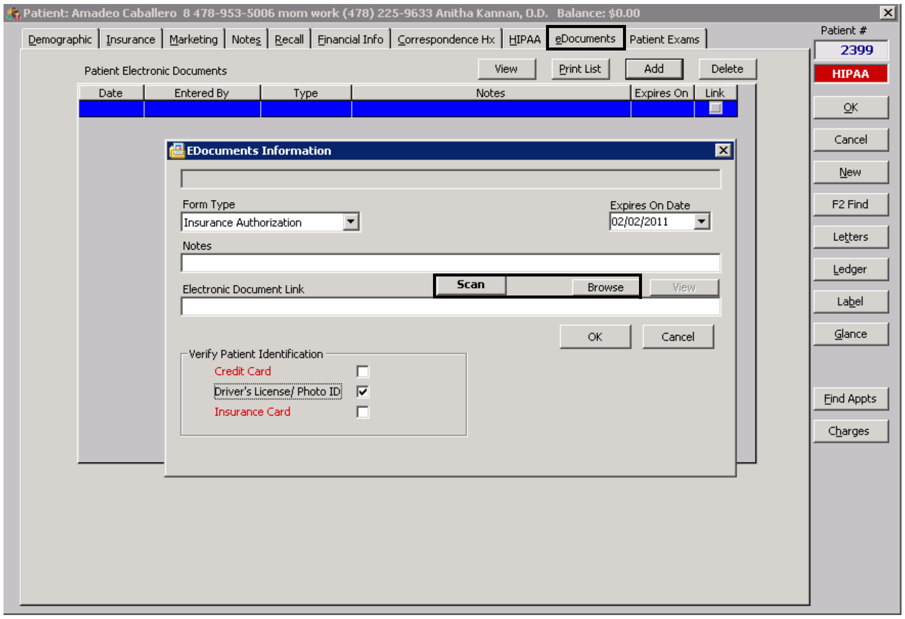
7. Click **Browse** to navigate to and select an electronic document to link to the patient's record and skip to step 9.

   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 article #000012869 in the Eyefinity Support Community, 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.



Patient: Amadeo Caballero 8 478-953-5006 mom work (478) 225-9633 Anitha Kannan, O.D. Balance: $0.00

Patient # 2399

EDocuments Information

Form Type: Insurance Authorization

Expires On Date: 02/02/2011

Verify Patient Identification
Credit Card ☐
Driver's License/ Photo ID ☑
Insurance Card ☐

Demographic
Insurance
Marketing
Notes
Recall
Financial Info
Correspondence Hx
HIPAA
eDocuments
Patient Exams
HIPAA
Patient Electronic Documents
View
Print List
Add
Delete
Date
Entered By
Type
Notes
Expires On
Link
OK
Cancel
New
F2 Find
Letters
Ledger
Label
Glance
Find Appts
Charges
Notes
Electronic Document Link
Scan
Browse
View
OK
Cancel

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.

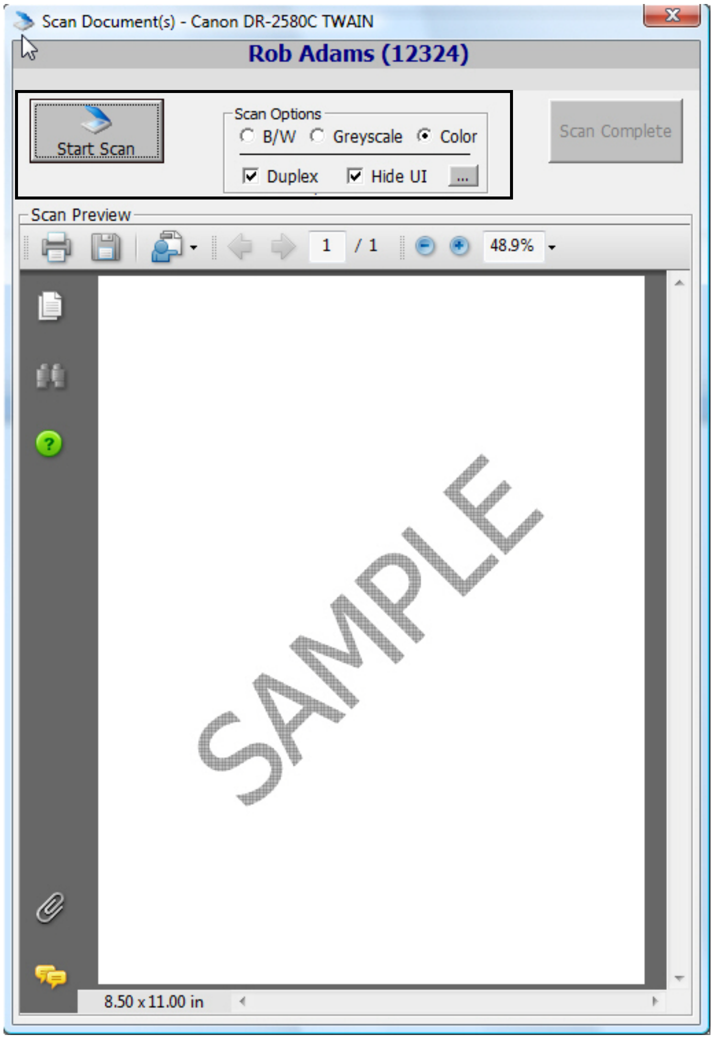
Duplex if you want to scan two sides of a document (and if it is supported by the scanner).

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.



Scan Options
○ B/W ○ Greyscale ● Color
☑ Duplex ☑ Hide UI ...

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.

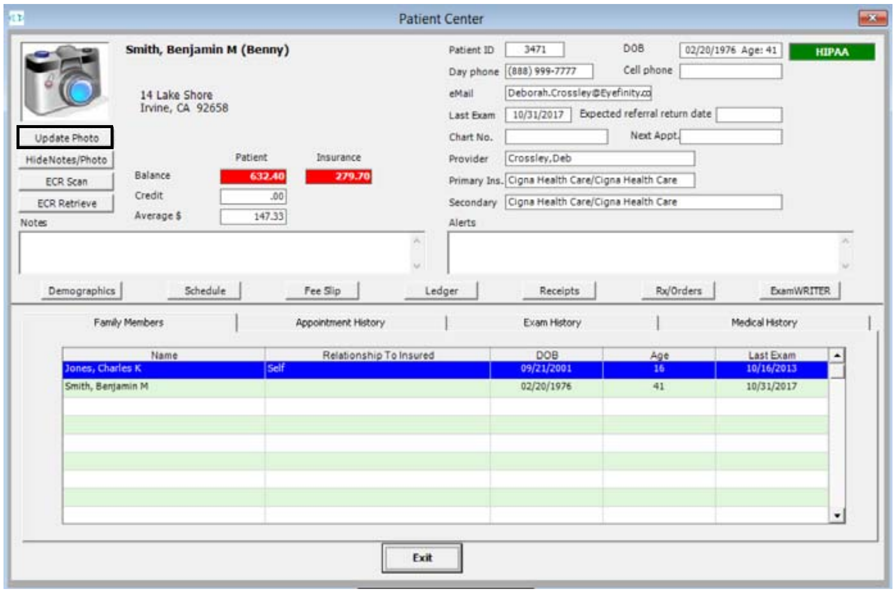
OfficeMate automatically names the document using the current date and saves it as a PDF file in the OfficeMate\DATA\eDocuments folder (if you are a new user or were an OfficeMate Enterprise user who upgraded to OfficeMate 9.0 or above) or OMATE32\DATA\eDocuments folder (if you were an OfficeMate user 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 202.


Patient Center
Update Photo
HideNotes/Photo
ECR Scan
ECR Retrieve
Notes
Alerts
HIPAA
Demographics
Schedule
Fee Slip
Ledger
Receipts
Rx/Orders
ExamWRITER
Family Members
Appointment History
Exam History
Medical History
Exit

Smith, Benjamin M (Benny)
14 Lake Shore
Irvine, CA 92658

Patient ID: 3471
DOB: 02/20/1976 Age: 41
Day phone: (888) 999-7777
Cell phone:
eMail: Deborah.Crossley@Eyefinity.co
Last Exam: 10/31/2017
Expected referral return date:
Chart No.:
Next Appt.:
Provider: Crossley,Deb
Primary Ins.: Cigna Health Care/Cigna Health Care
Secondary: Cigna Health Care/Cigna Health Care

	Patient	Insurance
Balance	632.40	279.70
Credit	.00	
Average $	147.33	

Name	Relationship To Insured	DOB	Age	Last Exam
Jones, Charles K	Self	09/21/2001	16	10/16/2013
Smith, Benjamin M		02/20/1976	41	10/31/2017

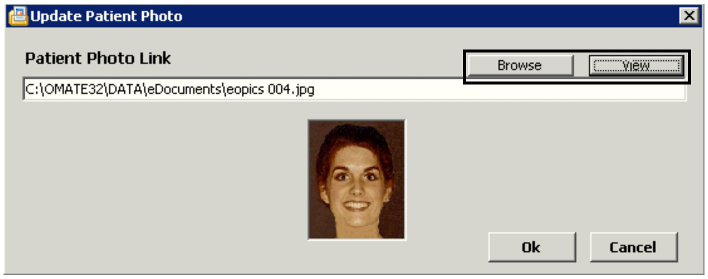
2. Click **Update Photo**.

   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 120×60 pixels so that it displays well in OfficeMate.

4. Click **View** to view the patient's photo in the Update Patient Photo window.


Update Patient Photo
Browse
View
Ok
Cancel

Patient Photo Link: C:\OMATE32\DATA\eDocuments\eopics 004.jpg

5. 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

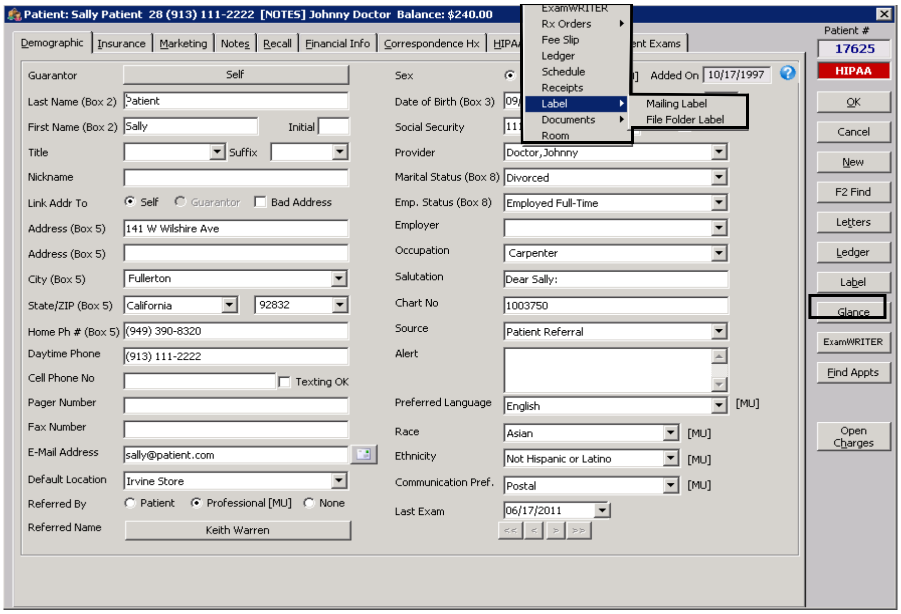
Follow the instructions below to print individual mailing labels and file folder labels for patients in OfficeMate.

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 71. - Print labels using Avery 5261 compatible white mailing labels or Dymo LabelWriter 400/450 address labels. You can purchase the Avery 5261 from Avery at www.avery.com. You can purchase the Dymo LabelWriter 400/450 labels from Dymo at www.dymo.com.

1. 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 an 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.


Patient: Sally Patient 28 (913) 111-2222 [NOTES] Johnny Doctor Balance: $240.00

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: ●
Date of Birth (Box 3): 09/
Social Security: 11
Added On: 10/17/1997
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

Patient #: 17625

Demographic
Insurance
Marketing
Notes
Recall
Financial Info
Correspondence Hx
HIPA
ent Exams
ExamWRITER
Rx Orders
Fee Slip
Ledger
Schedule
Receipts
Label
Documents
Room
Mailing Label
File Folder Label
HIPAA
OK
Cancel
New
F2 Find
Letters
Ledger
Label
Glance
ExamWRITER
Find Appts
Open Charges
<<
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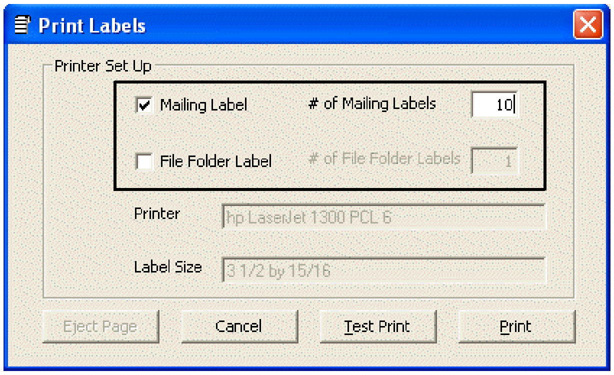
>>

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.



☑ Mailing Label
# of Mailing Labels 10
☐ File Folder Label
# of File Folder Labels 1
Printer hp LaserJet 1300 PCL 6
Label Size 3 1/2 by 15/16

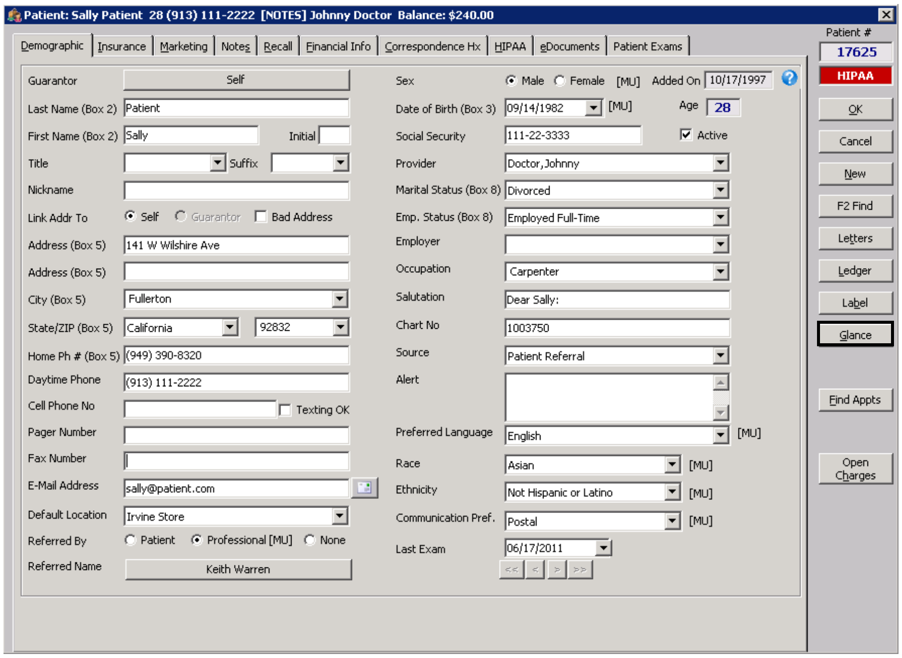
4. Click one of the following buttons:
   - **Test Print** to print a sample label.
   - **Print** to print all of the labels that you selected.

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

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
Patient #: 17625

Demographic
Insurance
Marketing
Notes
Recall
Financial Info
Correspondence Hx
HIPAA
eDocuments
Patient Exams
HIPAA
OK
Cancel
New
F2 Find
Letters
Ledger
Label
Glance
Find Appts
Open Charges
<<
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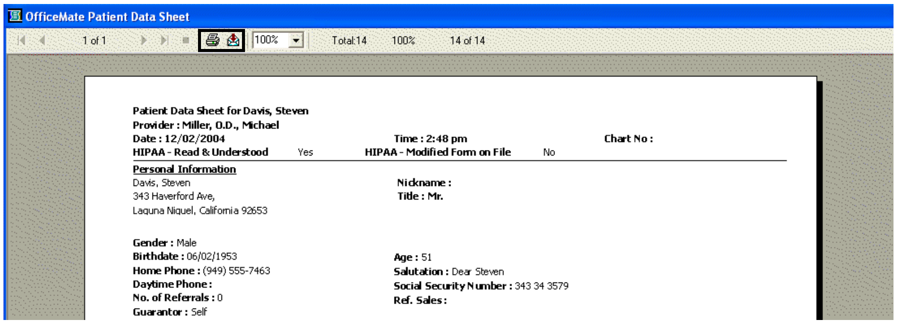
>>

The OfficeMate Patient Data Sheet opens and displays print and export buttons.


OfficeMate Patient Data Sheet

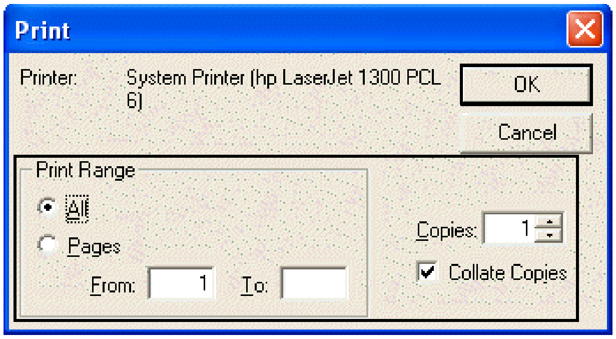
Patient Data Sheet for Davis, Steven
Provider : Miller, O.D., Michael
Date : 12/02/2004 **Time : 2:48 pm** **Chart No :**
HIPAA - Read & Understood Yes **HIPAA - Modified Form on File** No

Personal Information
Davis, Steven
343 Haverford Ave,
Laguna Niguel, California 92653
Nickname :
Title : Mr.

Gender : Male
Birthdate : 06/02/1953
Home Phone : (949) 555-7463
Daytime Phone :
No. of Referrals : 0
Guarantor : Self
Age : 51
Salutation : Dear Steven
Social Security Number : 343 34 3579
Ref. Sales :

1 of 1
100%
Total:14
100%
14 of 14

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**.



Printer: System Printer (hp LaserJet 1300 PCL 6)

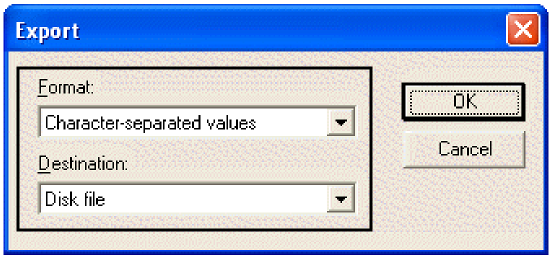
● All

From: 1

Copies: 1

☑ Collate Copies

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**.



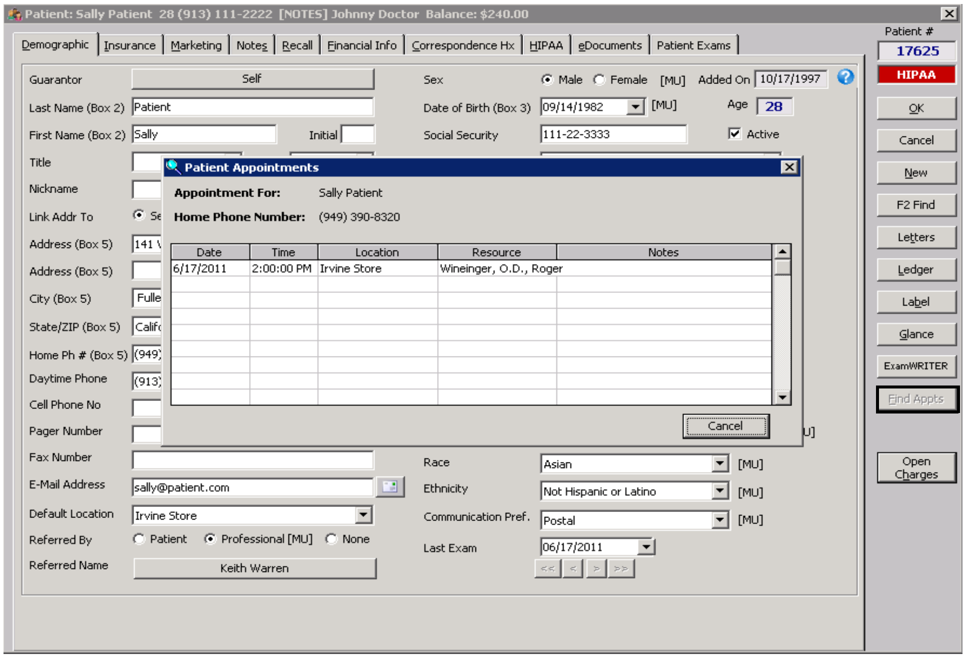
Format: Character-separated values

Destination: Disk file

   d. Specify the values requested or choose an export file to export the data sheet.

Viewing Patient Appointments

To view a list of a patient’s appointments, click **Find Appts**. The Patient Appointments window opens.


Demographic
Insurance
Marketing
Notes
Recall
Financial Info
Correspondence Hx
HIPAA
eDocuments
Patient Exams
HIPAA
OK
Cancel
New
F2 Find
Letters
Ledger
Label
Glance
ExamWRITER
Find Appts
Open Charges
Cancel
<< < > >>

Patient: Sally Patient 28 (913) 111-2222 [NOTES] Johnny Doctor Balance: $240.00

Patient # 17625

Guarantor: Self
Last Name (Box 2): Patient
First Name (Box 2): Sally
Initial:
Title:
Nickname:
Link Addr To: ● Se
Address (Box 5): 141 \
Address (Box 5):
City (Box 5): Fulle
State/ZIP (Box 5): Califo
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: ○ 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
Race: Asian [MU]
Ethnicity: Not Hispanic or Latino [MU]
Communication Pref.: Postal [MU]
Last Exam: 06/17/2011

Patient Appointments

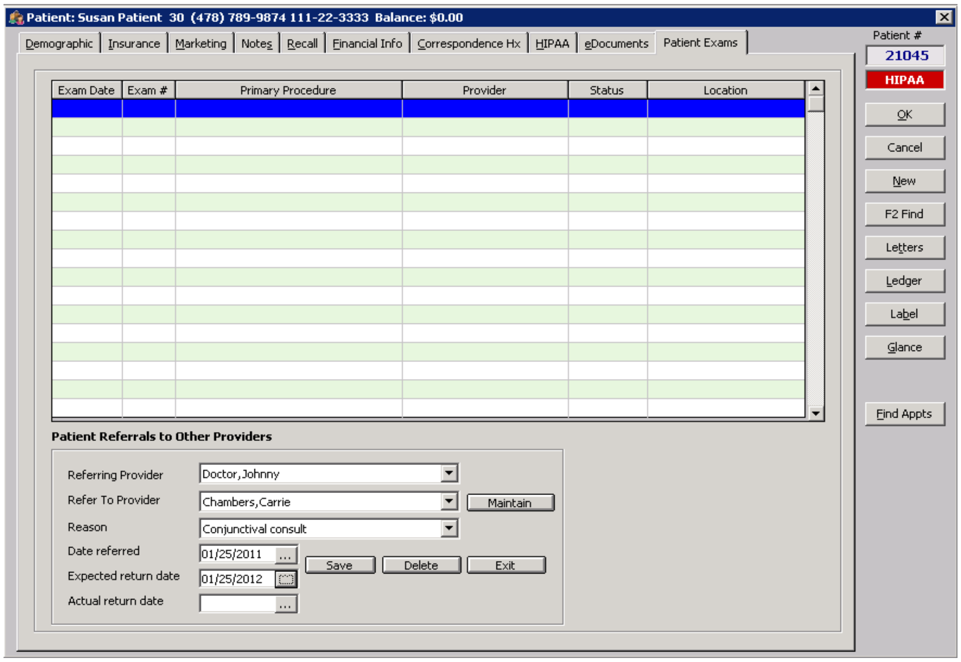
Appointment For: Sally Patient
Home Phone Number: (949) 390-8320

Date	Time	Location	Resource	Notes
6/17/2011	2:00:00 PM	Irvine Store	Wineinger, O.D., Roger	

Viewing Patient Exams

For information on viewing patient exams, watch the “Referrals & Patient Exams” video.

To view a patient’s exams in ExamWRITER, click the **Patient Exams** tab.


Demographic
Insurance
Marketing
Notes
Recall
Financial Info
Correspondence Hx
HIPAA
eDocuments
Patient Exams
HIPAA
OK
Cancel
New
F2 Find
Letters
Ledger
Label
Glance
Find Appts
Maintain
Save
Delete
Exit

Patient: Susan Patient 30 (478) 789-9874 111-22-3333 Balance: $0.00

Patient # 21045

Exam Date	Exam #	Primary Procedure	Provider	Status	Location

Patient Referrals to Other Providers

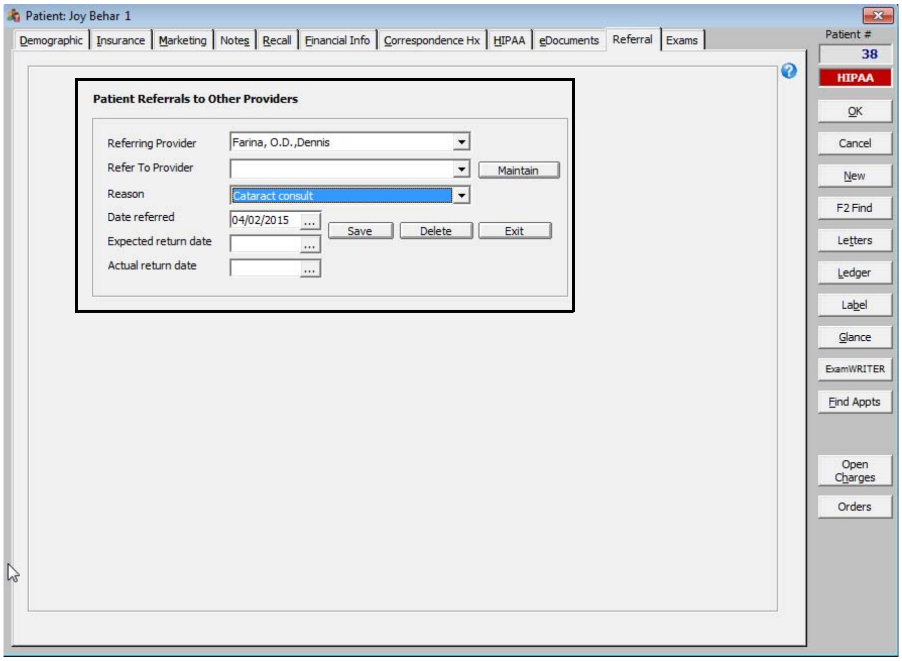
Referring Provider: Doctor,Johnny
Refer To Provider: Chambers,Carrie
Reason: Conjunctival consult
Date referred: 01/25/2011
Expected return date: 01/25/2012
Actual return date:

Viewing & Recording Patient Referrals to Other Providers

For information on viewing and recording referrals watch the "Referrals & Patient Exams" video.

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**andgo 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.


Demographic
Insurance
Marketing
Notes
Recall
Financial Info
Correspondence Hx
HIPAA
eDocuments
Referral
Exams
HIPAA
OK
Cancel
New
F2 Find
Letters
Ledger
Label
Glance
ExamWRITER
Find Appts
Open Charges
Orders
Maintain
Save
Delete
Exit

Patient: Joy Behar 1

Patient # 38

Patient Referrals to Other Providers

Referring Provider: Farina, O.D.,Dennis
Refer To Provider:
Reason: Cataract consult
Date referred: 04/02/2015
Expected return date:
Actual return date:

Deleting Patient Records

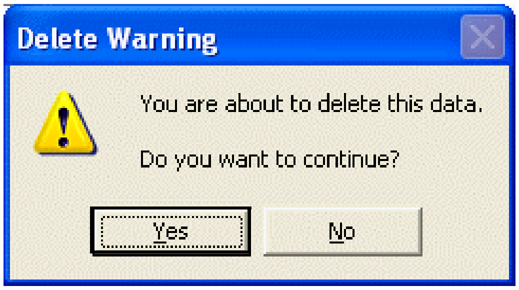
Follow the instructions below to delete a patient record from OfficeMate.

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 202.
2. Click **Tasks** on the OfficeMate Administration main window toolbar.
3. Select **Delete Patient**.

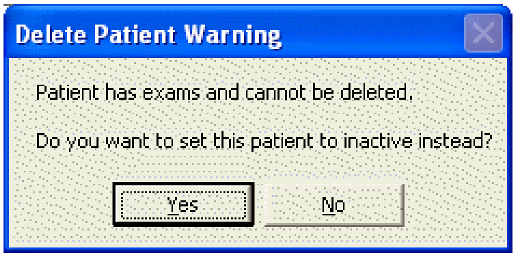
   The Delete Warning window opens.
4. Click **Yes** to delete the patient record from OfficeMate.



You are about to delete this data.

Do you want to continue?

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.



Patient has exams and cannot be deleted.

Do you want to set this patient to inactive instead?

Closing Patient Open Charges

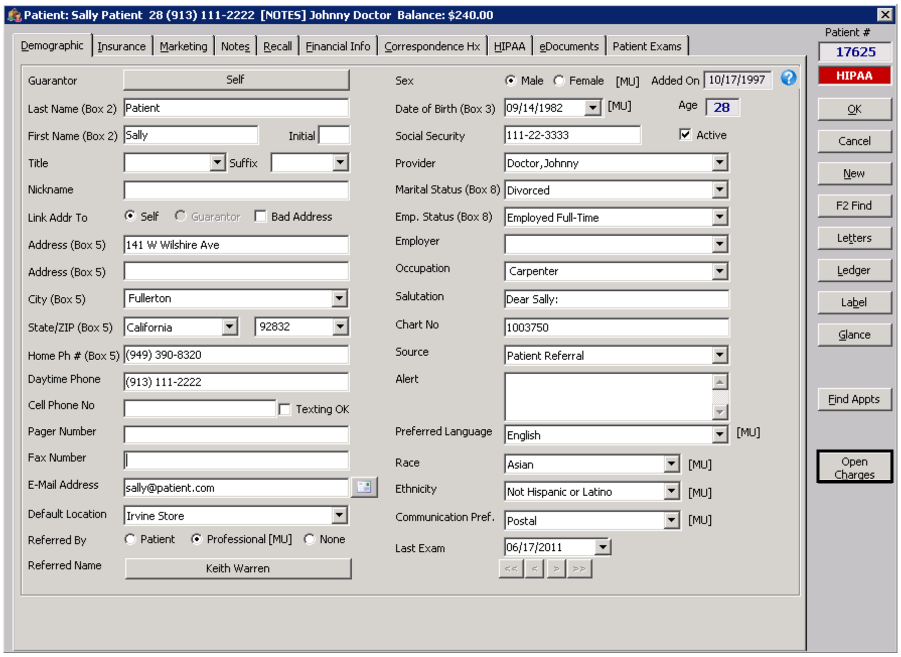
Follow the instructions below close open patient charges.

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 63.
- 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 97.

1. Open a patient record. For more information on opening a patient record, see Opening Patient Records on page 202.
2. Click **Open Charges**.



Patient: Sally Patient 28 (913) 111-2222 [NOTES] Johnny Doctor Balance: $240.00

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

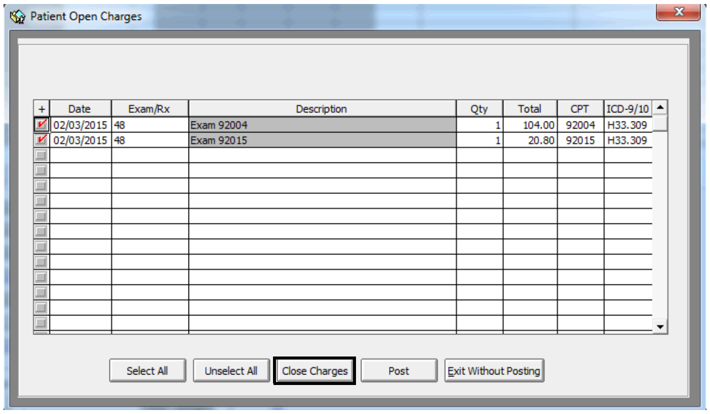
Sex: ● Male ○ Female [MU]
Added On: 10/17/1997
Date of Birth (Box 3): 09/14/1982 [MU]
Age: 28
Social Security: 111-22-3333
☑ Active
Provider: Doctor, Johnny
Marital Status (Box 8): Divorced
Emp. Status (Box 8): Employed Full-Time
Employer:
Occupation: Carpenter
Salutation: Dear Sally:
Chart No: 1003750
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

Patient #: 17625

The Patient Open Charges window opens.

3. 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.



+	Date	Exam/Rx	Description	Qty	Total	CPT	ICD-9/10
✓	02/03/2015	48	Exam 92004	1	104.00	92004	H33.309
✓	02/03/2015	48	Exam 92015	1	20.80	92015	H33.309

Printing Patient Welcome Forms

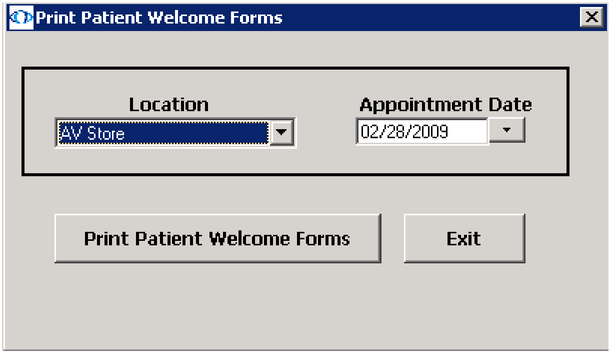
The patient welcome form displays basic patient demographic and insurance information. A patient welcome form is printed for each patient with a confirmed appointment on a given day. Follow the instructions below to print patient welcome forms.

NOTE	OfficeMate prints patient welcome forms only for appointments that have been confirmed.

1. Click **Tasks** on the OfficeMate Administration main window toolbar and select **Print Patient Welcome Forms**.

   The Print Patient Welcome Forms window opens.

2. Select your location from the **Location** drop-down menu if it is not selected already.
3. Type or select a date in the **Appointment Date** field.



Location: AV Store
Appointment Date: 02/28/2009

4. 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

In this chapter:

For information on maintaining products and services, watch the "Product Maintenance" video.

- Setting Up Product & Service Information, 247
- Loading Lens Products into OfficeMate, 254
- Opening the Products Window, 259
- Finding Products & Services, 259
- Recording Product Information, 261
- Recording Service Information, 278
- Updating Many Products & Services, 287

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, 247
- To set up product preferences, 250
- To set up barcode label options, 251
- To set up commission classes, 252

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	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. 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.

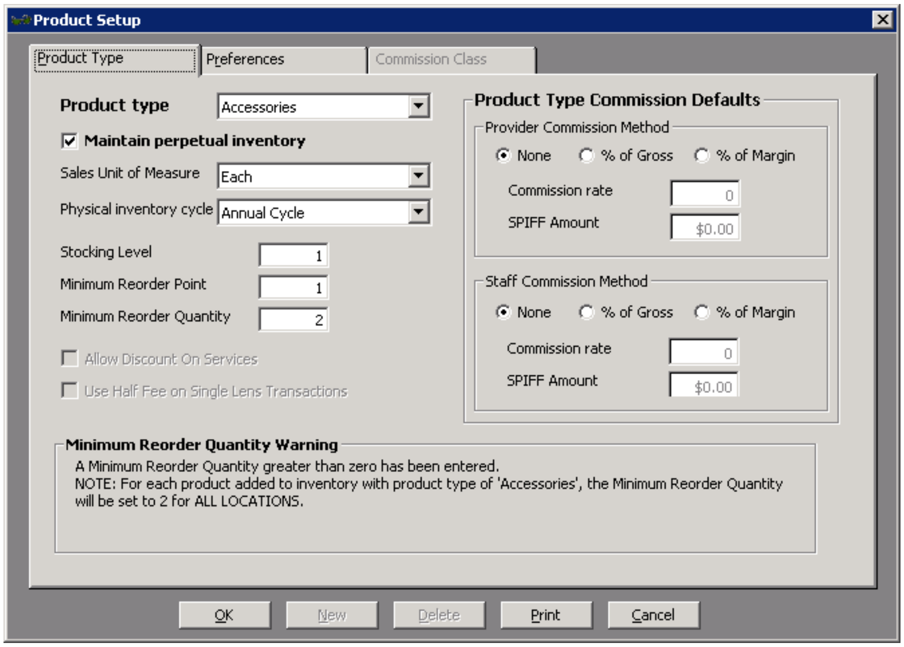
> **NOTE** If you have set up a commission for a specific provider, it will take precedence over a commission set up for a product type.

   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.



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.

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 calender 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.

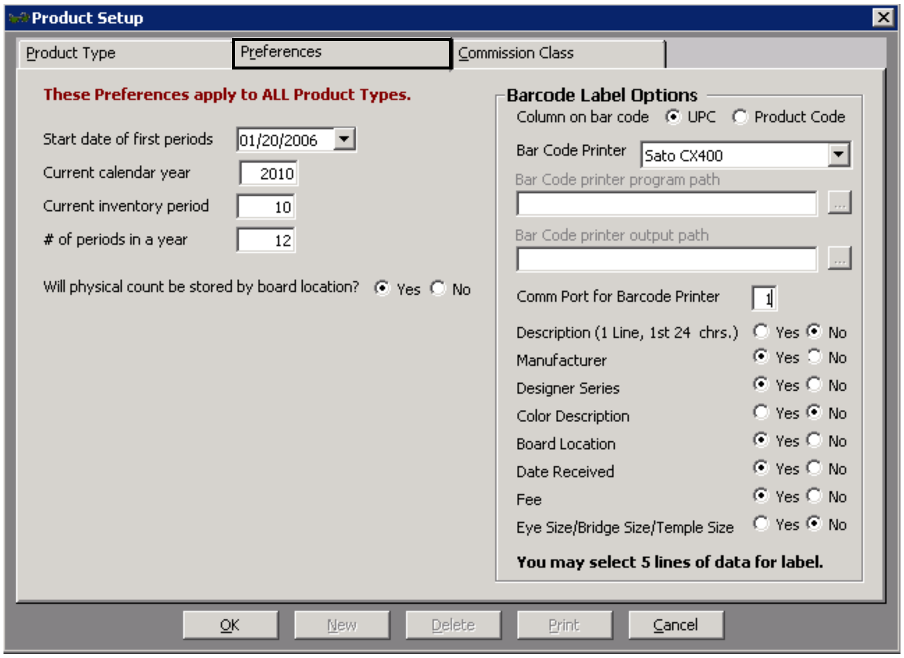
1. Click **Setup** on the OfficeMate main window and select **Product Setup**.

   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.



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.

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 266 and To add additional information to services on page 282 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 287.

1. Click **Setup** on the OfficeMate main window and select **Product Setup**.

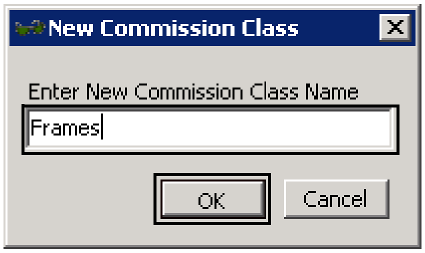
   The Product Setup window opens.

2. Click the **Commission Class** tab.
3. Select a commission class from the **Commission Class** drop-down menu.

   OR

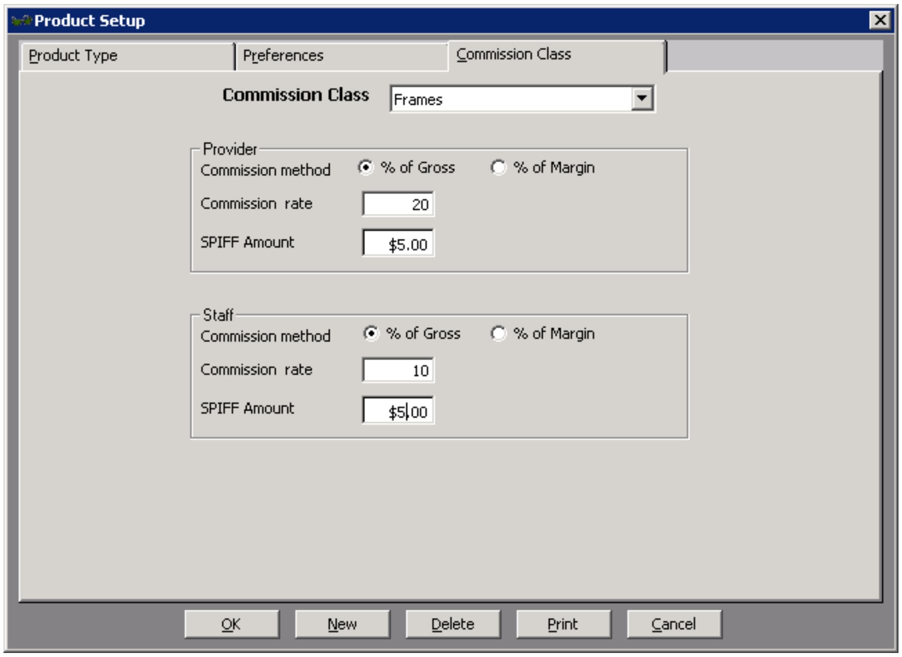
   Click **New** to set up a new commission class.

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.



Enter New Commission Class Name: Frames

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.



Commission Class: Frames

Provider
Commission method ● % of Gross ○ % of Margin
Commission rate: 20
SPIFF Amount: $5.00

Staff
Commission method ● % of Gross ○ % of Margin
Commission rate: 10
SPIFF Amount: $5.00

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

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, 254
- To load lens products into OfficeMate, 256
- To understand the ophthalmic lens descriptions, 258

For information on the using the Lens Product Loader, watch the "Ophthalmic Lenses" and "Lens Treatments" 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.
- 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 140 and To add & modify additional attributes on page 142.

▶ To download lens product lists

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.

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.

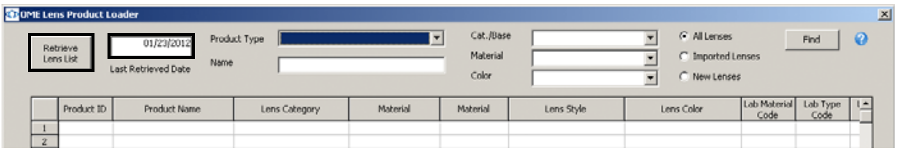
   OR

   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.

3. Click **Retrieve Lens List** to download updated products from VSP to OfficeMate.


OME Lens Product Loader
Retrieve Lens List
Product Type
Name
Cat./Base
Material
Color
Imported Lenses
New Lenses
Find
Product ID
Product Name
Lens Category
Material
Material
Lens Style
Lens Color
Lab Material Code
Lab Type Code

Last Retrieved Date: 01/23/2012

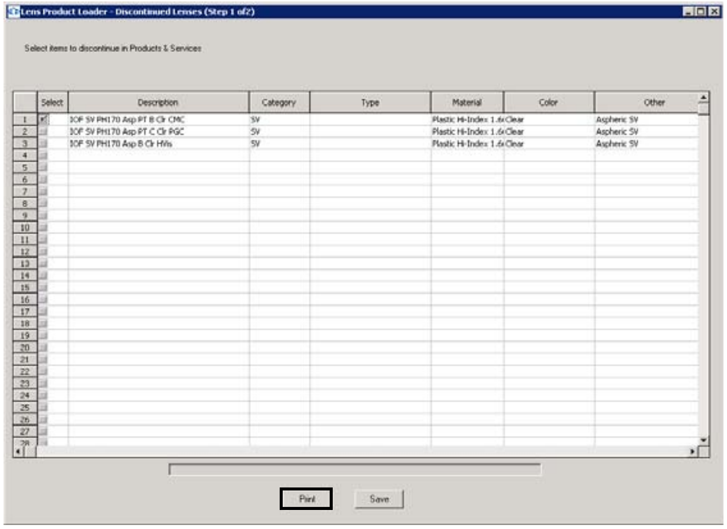
● All Lenses

The updated products download. This may take several minutes, especially if this is the first time that you are downloading products.OfficeMate compares the product lists against the products you may have loaded in the past and displays the modified, discontinued, and new lens products.

4. For each window that opens, perform the following steps:
   a. Review the list for lens products that your practice may sell.
   b. 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 258.

   c. 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**.
   d. Click **Exit**.


Lens Product Loader - Discontinued Lenses (Step 1 of2)
Print
Save

Select items to discontinue in Products & Services

	Select	Description	Category	Type	Material	Color	Other
1	☑	IOF SV PH170 Asp PT B Clr CMC	SV		Plastic Hi-Index 1.6	Clear	Aspheric SV
2	☐	IOF SV PH170 Asp PT C Clr PGC	SV		Plastic Hi-Index 1.6	Clear	Aspheric SV
3	☐	IOF SV PH170 Asp B Clr HVis	SV		Plastic Hi-Index 1.6	Clear	Aspheric SV

5. Continue by loading lens products into OfficeMate. For more information go to To load lens products into OfficeMate on page 256.

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 254.
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.

6. Select the check boxes in the **Select** column to select the products that you want to load into OfficeMate.

   OR

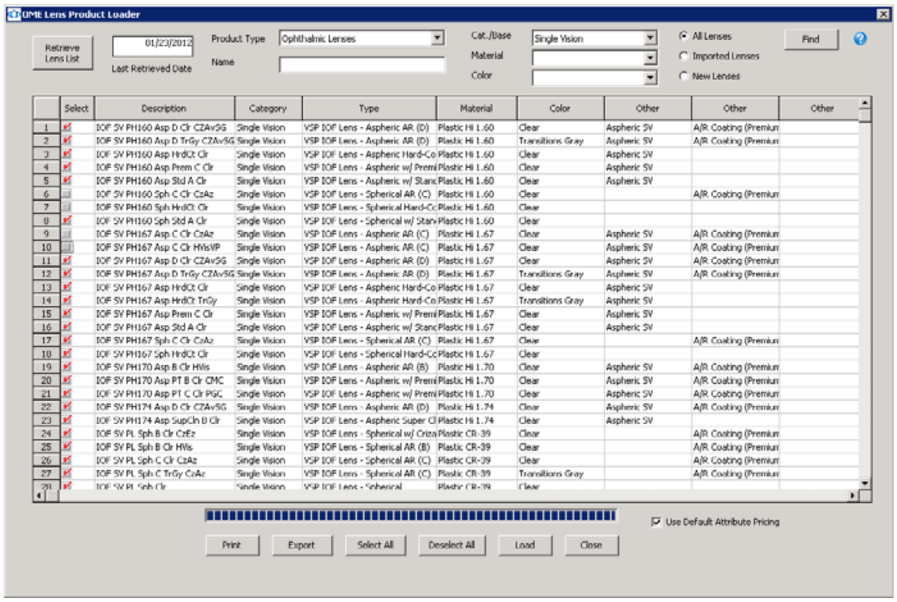
   Click **Select all** to select all of the products in the results list.

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 258.
- 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 140.



Last Retrieved Date: 01/23/2012

Product Type: Ophthalmic Lenses

Name:

Cat./Base: Single Vision

Material:

Color:

● All Lenses

○ Imported Lenses

○ New Lenses

	Select	Description	Category	Type	Material	Color	Other	Other	Other
1	☑	IOF SV PH160 Asp D Clr CZAvSG	Single Vision	VSP IOF Lens - Aspheric AR (D)	Plastic Hi 1.60	Clear	Aspheric SV	A/R Coating (Premium	
2	☑	IOF SV PH160 Asp D TrGy CZAvSG	Single Vision	VSP IOF Lens - Aspheric AR (D)	Plastic Hi 1.60	Transitions Gray	Aspheric SV	A/R Coating (Premium	
3	☑	IOF SV PH160 Asp HrdCt Clr	Single Vision	VSP IOF Lens - Aspheric Hard-Co	Plastic Hi 1.60	Clear	Aspheric SV		
4	☑	IOF SV PH160 Asp Prem C Clr	Single Vision	VSP IOF Lens - Aspheric w/ Premi	Plastic Hi 1.60	Clear	Aspheric SV		
5	☑	IOF SV PH160 Asp Std A Clr	Single Vision	VSP IOF Lens - Aspheric w/ Stanc	Plastic Hi 1.60	Clear	Aspheric SV		
6	☐	IOF SV PH160 Sph C Clr CzAz	Single Vision	VSP IOF Lens - Spherical AR (C)	Plastic Hi 1.60	Clear		A/R Coating (Premium	
7	☐	IOF SV PH160 Sph HrdCt Clr	Single Vision	VSP IOF Lens - Spherical Hard-Cc	Plastic Hi 1.60	Clear			
8	☑	IOF SV PH160 Sph Std A Clr	Single Vision	VSP IOF Lens - Spherical w/ Stan	Plastic Hi 1.60	Clear			
9	☐	IOF SV PH167 Asp C Clr CzAz	Single Vision	VSP IOF Lens - Aspheric AR (C)	Plastic Hi 1.67	Clear	Aspheric SV	A/R Coating (Premium	
10	☐	IOF SV PH167 Asp C Clr HVisVP	Single Vision	VSP IOF Lens - Aspheric AR (C)	Plastic Hi 1.67	Clear	Aspheric SV	A/R Coating (Premium	
11	☑	IOF SV PH167 Asp D Clr CZAvSG	Single Vision	VSP IOF Lens - Aspheric AR (D)	Plastic Hi 1.67	Clear	Aspheric SV	A/R Coating (Premium	
12	☑	IOF SV PH167 Asp D TrGy CZAvSG	Single Vision	VSP IOF Lens - Aspheric AR (D)	Plastic Hi 1.67	Transitions Gray	Aspheric SV	A/R Coating (Premium	
13	☑	IOF SV PH167 Asp HrdCt Clr	Single Vision	VSP IOF Lens - Aspheric Hard-Co	Plastic Hi 1.67	Clear	Aspheric SV		
14	☑	IOF SV PH167 Asp HrdCt TrGy	Single Vision	VSP IOF Lens - Aspheric Hard-Co	Plastic Hi 1.67	Transitions Gray	Aspheric SV		
15	☑	IOF SV PH167 Asp Prem C Clr	Single Vision	VSP IOF Lens - Aspheric w/ Premi	Plastic Hi 1.67	Clear	Aspheric SV		
16	☑	IOF SV PH167 Asp Std A Clr	Single Vision	VSP IOF Lens - Aspheric w/ Stanc	Plastic Hi 1.67	Clear	Aspheric SV		
17	☑	IOF SV PH167 Sph C Clr CzAz	Single Vision	VSP IOF Lens - Spherical AR (C)	Plastic Hi 1.67	Clear		A/R Coating (Premium	
18	☑	IOF SV PH167 Sph HrdCt Clr	Single Vision	VSP IOF Lens - Spherical Hard-Cc	Plastic Hi 1.67	Clear			
19	☑	IOF SV PH170 Asp B Clr HVis	Single Vision	VSP IOF Lens - Aspheric AR (B)	Plastic Hi 1.70	Clear	Aspheric SV	A/R Coating (Premium	
20	☑	IOF SV PH170 Asp PT B Clr CMC	Single Vision	VSP IOF Lens - Aspheric w/ Premi	Plastic Hi 1.70	Clear	Aspheric SV	A/R Coating (Premium	
21	☑	IOF SV PH170 Asp PT C Clr PGC	Single Vision	VSP IOF Lens - Aspheric w/ Premi	Plastic Hi 1.70	Clear	Aspheric SV	A/R Coating (Premium	
22	☑	IOF SV PH174 Asp D Clr CZAvSG	Single Vision	VSP IOF Lens - Aspheric AR (D)	Plastic Hi 1.74	Clear	Aspheric SV	A/R Coating (Premium	
23	☑	IOF SV PH174 Asp SupCln B Clr	Single Vision	VSP IOF Lens - Aspheric Super Cl	Plastic Hi 1.74	Clear	Aspheric SV		
24	☑	IOF SV PL Sph B Clr CzEz	Single Vision	VSP IOF Lens - Spherical w/ Criza	Plastic CR-39	Clear		A/R Coating (Premium	
25	☑	IOF SV PL Sph B Clr HVis	Single Vision	VSP IOF Lens - Spherical AR (B)	Plastic CR-39	Clear		A/R Coating (Premium	
26	☑	IOF SV PL Sph C Clr CzAz	Single Vision	VSP IOF Lens - Spherical AR (C)	Plastic CR-39	Clear		A/R Coating (Premium	
27	☑	IOF SV PL Sph C TrGy CzAz	Single Vision	VSP IOF Lens - Spherical AR (C)	Plastic CR-39	Transitions Gray		A/R Coating (Premium	
28	☑	IOF SV PL Sph Clr	Single Vision	VSP IOF Lens - Spherical	Plastic CR-39	Clear			

☑ Use Default Attribute Pricing

7. 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**.

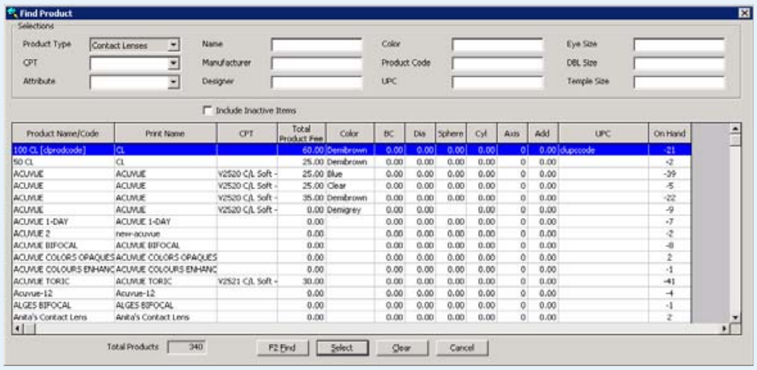
Finding Products & Services

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 259.

   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.



Product Type: Contact Lenses

Product Name/Code	Print Name	CPT	Total Product Fee	Color	BC	Dia	Sphere	Cyl	Axis	Add	UPC	On Hand
100 CL [dprodcode]	CL		60.00	Demibrown	0.00	0.00	0.00	0.00	0	0.00	dupcode	-21
50 CL	CL		25.00	Demibrown	0.00	0.00	0.00	0.00	0	0.00		-2
ACUVUE	ACUVUE	V2520 C/L Soft -	25.00	Blue	0.00	0.00	0.00	0.00	0	0.00		-39
ACUVUE	ACUVUE	V2520 C/L Soft -	25.00	Clear	0.00	0.00	0.00	0.00	0	0.00		-5
ACUVUE	ACUVUE	V2520 C/L Soft -	35.00	Demibrown	0.00	0.00	0.00	0.00	0	0.00		-22
ACUVUE	ACUVUE	V2520 C/L Soft -	0.00	Demigrey	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 TORIC	ACUVUE TORIC	V2521 C/L Soft -	30.00		0.00	0.00	0.00	0.00	0	0.00		-41
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**.

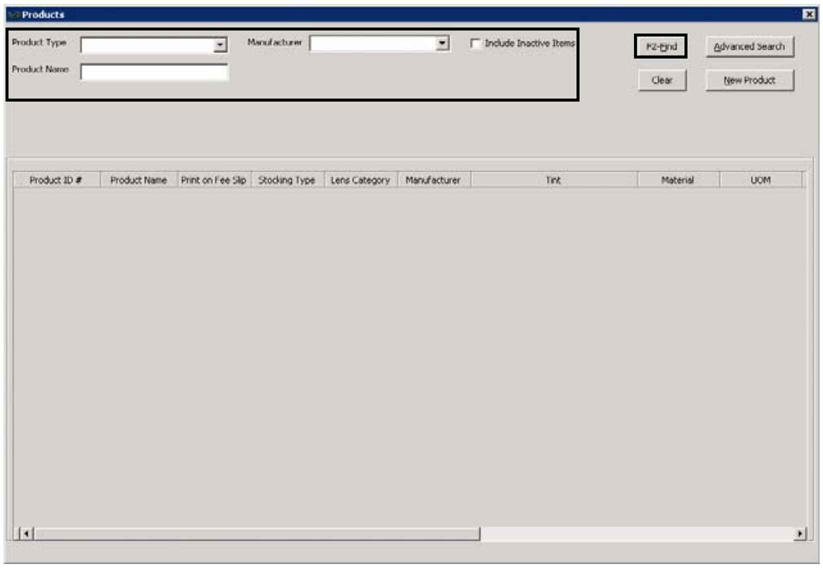
The **Products** window opens.

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 261 or Recording Service Information on page 278.

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 261 or Recording Service Information on page 278.

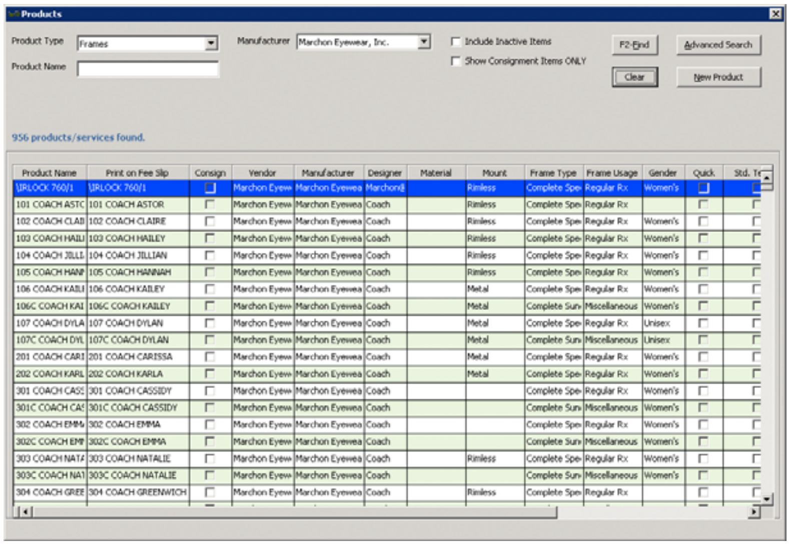
3. Select a product manufacturer from the **Manufacturer** drop-down menu or select a service **CPT** code radio button.
4. If you are searching for ophthalmic lenses, select search criteria from the **Color**, **Material**, or **Cat/Base** drop-down menus.
5. Type a product or service name in the **Product 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.


Products
Product Type
Manufacturer
☐ Include Inactive Items
Product Name
F2-Find
Advanced Search
Clear
New Product
Product ID #
Product Name
Print on Fee Slip
Stocking Type
Lens Category
Manufacturer
Tint
Material
UOM

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 261 or Recording Service Information on page 278.

NOTE	You can drag and drop column headings to rearrange column views.



Product Type: Frames
Product Name:
Manufacturer: Marchon Eyewear, Inc.
☐ Include Inactive Items
☐ Show Consignment Items ONLY

956 products/services found.

Product Name	Print on Fee Slip	Consign	Vendor	Manufacturer	Designer	Material	Mount	Frame Type	Frame Usage	Gender	Quick	Std. Te
\IRLOCK 760/1	\IRLOCK 760/1	☐	Marchon Eyew	Marchon Eyewea	Marchon8		Rimless	Complete Spe	Regular Rx	Women's	☐	☐
101 COACH ASTC	101 COACH ASTOR	☐	Marchon Eyew	Marchon Eyewea	Coach		Rimless	Complete Spe	Regular Rx		☐	☐
102 COACH CLAI	102 COACH CLAIRE	☐	Marchon Eyew	Marchon Eyewea	Coach		Rimless	Complete Spe	Regular Rx	Women's	☐	☐
103 COACH HAIL	103 COACH HAILEY	☐	Marchon Eyew	Marchon Eyewea	Coach		Rimless	Complete Spe	Regular Rx	Women's	☐	☐
104 COACH JILLI	104 COACH JILLIAN	☐	Marchon Eyew	Marchon Eyewea	Coach		Rimless	Complete Spe	Regular Rx	Women's	☐	☐
105 COACH HANI	105 COACH HANNAH	☐	Marchon Eyew	Marchon Eyewea	Coach		Rimless	Complete Spe	Regular Rx	Women's	☐	☐
106 COACH KAILI	106 COACH KAILEY	☐	Marchon Eyew	Marchon Eyewea	Coach		Metal	Complete Spe	Regular Rx	Women's	☐	☐
106C COACH KAI	106C COACH KAILEY	☐	Marchon Eyew	Marchon Eyewea	Coach		Metal	Complete Sun	Miscellaneous	Women's	☐	☐
107 COACH DYLA	107 COACH DYLAN	☐	Marchon Eyew	Marchon Eyewea	Coach		Metal	Complete Spe	Regular Rx	Unisex	☐	☐
107C COACH DYL	107C COACH DYLAN	☐	Marchon Eyew	Marchon Eyewea	Coach		Metal	Complete Sun	Miscellaneous	Unisex	☐	☐
201 COACH CARI	201 COACH CARISSA	☐	Marchon Eyew	Marchon Eyewea	Coach		Metal	Complete Spe	Regular Rx	Women's	☐	☐
202 COACH KARL	202 COACH KARLA	☐	Marchon Eyew	Marchon Eyewea	Coach		Metal	Complete Spe	Regular Rx	Women's	☐	☐
301 COACH CASS	301 COACH CASSIDY	☐	Marchon Eyew	Marchon Eyewea	Coach			Complete Spe	Regular Rx	Women's	☐	☐
301C COACH CAS	301C COACH CASSIDY	☐	Marchon Eyew	Marchon Eyewea	Coach			Complete Sun	Miscellaneous	Women's	☐	☐
302 COACH EMM	302 COACH EMMA	☐	Marchon Eyew	Marchon Eyewea	Coach			Complete Spe	Regular Rx	Women's	☐	☐
302C COACH EM	302C COACH EMMA	☐	Marchon Eyew	Marchon Eyewea	Coach			Complete Sun	Miscellaneous	Women's	☐	☐
303 COACH NAT	303 COACH NATALIE	☐	Marchon Eyew	Marchon Eyewea	Coach		Rimless	Complete Spe	Regular Rx	Women's	☐	☐
303C COACH NA	303C COACH NATALIE	☐	Marchon Eyew	Marchon Eyewea	Coach			Complete Sun	Miscellaneous	Women's	☐	☐
304 COACH GREE	304 COACH GREENWICH	☐	Marchon Eyew	Marchon Eyewea	Coach		Rimless	Complete Spe	Regular Rx		☐	☐

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, 262
- To add additional information to products, 266
- To itemize product details, 267
- To maintain product attributes, 270
- To maintain location inventory details, 272
- To maintain product cost information, 275
- To maintain ophthalmic lens additional attributes, 276
- To maintain ophthalmic lens VSP product mapping, 277

NOTES

- If you are using the FRAMES Data SPEX UPC CD-ROM or On Demand electronic download; FRAMES Data Quarterly CD-ROM; or Marchon Frames Diskette, CD-ROM, or electronic download, go to Using FrameMate on page 419 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 259.
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 259.

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.

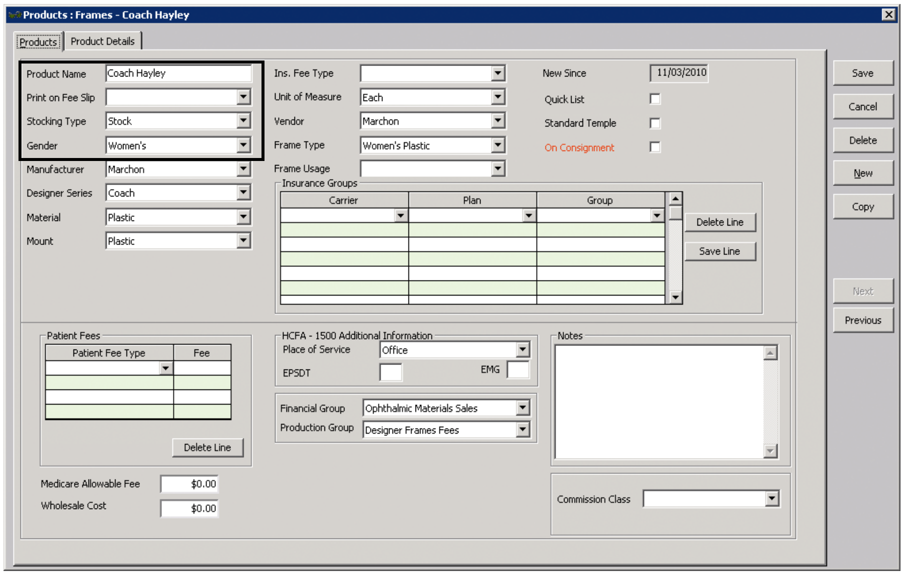
   OR

   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.



Products : Frames - Coach Hayley

Product Name: Coach Hayley
Print on Fee Slip:
Stocking Type: Stock
Gender: Women's
Manufacturer: Marchon
Designer Series: Coach
Material: Plastic
Mount: Plastic
Ins. Fee Type:
Unit of Measure: Each
Vendor: Marchon
Frame Type: Women's Plastic
Frame Usage:
New Since: 11/03/2010
Quick List ☐
Standard Temple ☐
On Consignment ☐
Place of Service: Office
EPSDT:
EMG:
Financial Group: Ophthalmic Materials Sales
Production Group: Designer Frames Fees
Medicare Allowable Fee: $0.00
Wholesale Cost: $0.00
Commission Class:

Products
Product Details
Insurance Groups
Carrier
Plan
Group
Delete Line
Save Line
Patient Fees
Patient Fee Type
Fee
Delete Line
HCFA - 1500 Additional Information
Notes
Save
Cancel
Delete
New
Copy
Next
Previous

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.

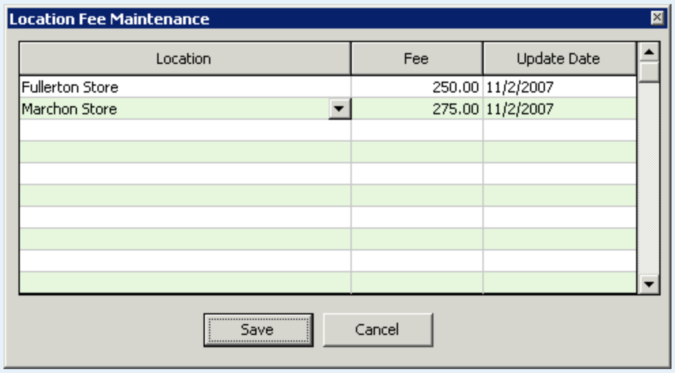
The Location Fee Maintenance window opens.

b. Select a location form 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.

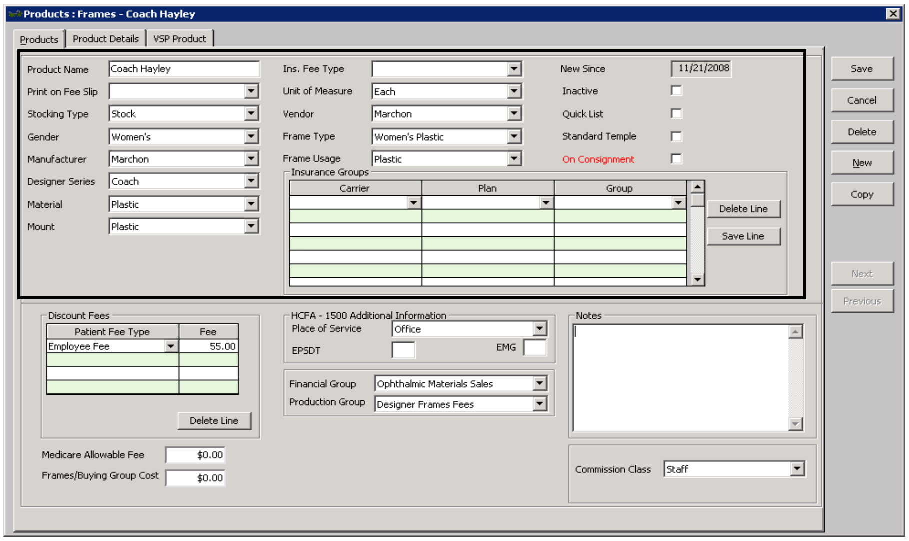


Location	Fee	Update Date
Fullerton Store	250.00	11/2/2007
Marchon Store	275.00	11/2/2007

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.



Product Name	Coach Hayley
Print on Fee Slip	
Stocking Type	Stock
Gender	Women's
Manufacturer	Marchon
Designer Series	Coach
Material	Plastic
Mount	Plastic
Ins. Fee Type	
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	☐

Carrier	Plan	Group

Patient Fee Type	Fee
Employee Fee	55.00

Place of Service	Office
EPSDT	
EMG	
Financial Group	Ophthalmic Materials Sales
Production Group	Designer Frames Fees
Medicare Allowable Fee	$0.00
Frames/Buying Group Cost	$0.00
Commission Class	Staff

33. If you want to add more information to the product, go to To add additional information to products on page 266, To itemize product details on page 267; 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

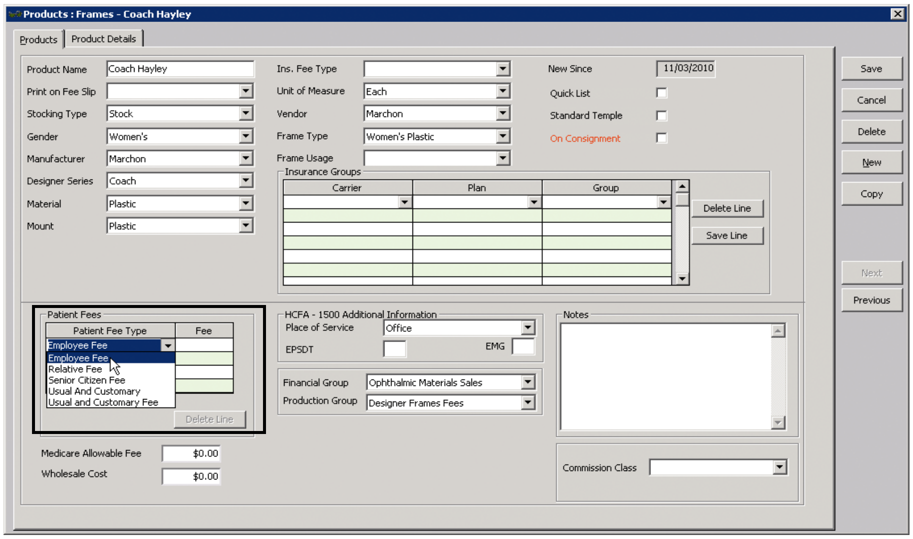
1. Open the Products window. For more information on opening the Products window, go to Opening the Products Window on page 259.
2. Select a product or service from the **Product Type** drop-down menu.

> **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 262.
   - 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 259.

> **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.



Products : Frames - Coach Hayley

Product Name: Coach Hayley
Print on Fee Slip:
Stocking Type: Stock
Gender: Women's
Manufacturer: Marchon
Designer Series: Coach
Material: Plastic
Mount: Plastic
Ins. Fee Type:
Unit of Measure: Each
Vendor: Marchon
Frame Type: Women's Plastic
Frame Usage:
New Since: 11/03/2010
Quick List ☐
Standard Temple ☐
On Consignment ☐
Patient Fee Type: Employee Fee
Place of Service: Office
EPSDT:
EMG:
Financial Group: Ophthalmic Materials Sales
Production Group: Designer Frames Fees
Medicare Allowable Fee: $0.00
Wholesale Cost: $0.00
Commission Class:

Products
Product Details
Insurance Groups
Carrier
Plan
Group
Delete Line
Save Line
Patient Fees
Fee
Employee Fee
Relative Fee
Senior Citizen Fee
Usual And Customary
Usual and Customary Fee
Delete Line
HCFA - 1500 Additional Information
Notes
Save
Cancel
Delete
New
Copy
Next
Previous

> **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 252.
14. If you want to itemize product details, go to To itemize product details on page 267; 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 437 to add product details.

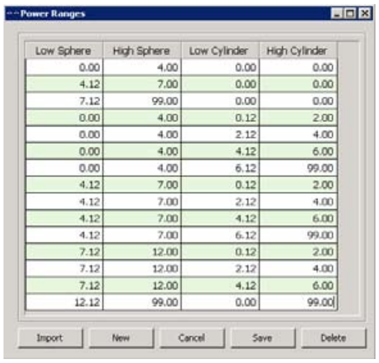
1. Open the Products window. For more information on opening the Products window, go to Opening the Products Window on page 259.
2. Select a product or service from the **Product Type** drop-down menu.

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 262.
   – 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 259.
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**.



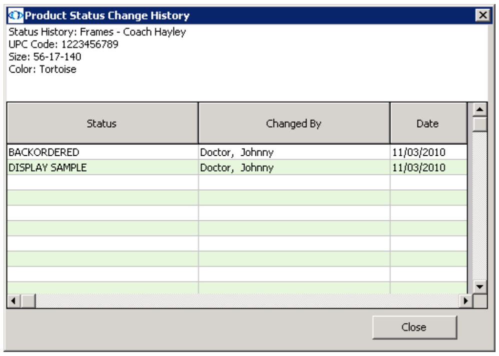
Low Sphere	High Sphere	Low Cylinder	High Cylinder
0.00	4.00	0.00	0.00
4.12	7.00	0.00	0.00
7.12	99.00	0.00	0.00
0.00	4.00	0.12	2.00
0.00	4.00	2.12	4.00
0.00	4.00	4.12	6.00
0.00	4.00	6.12	99.00
4.12	7.00	0.12	2.00
4.12	7.00	2.12	4.00
4.12	7.00	4.12	6.00
4.12	7.00	6.12	99.00
7.12	12.00	0.12	2.00
7.12	12.00	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.



Status History: Frames - Coach Hayley
UPC Code: 1223456789
Size: 56-17-140
Color: Tortoise

Status	Changed By	Date
BACKORDERED	Doctor, Johnny	11/03/2010
DISPLAY SAMPLE	Doctor, Johnny	11/03/2010

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 275.

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.

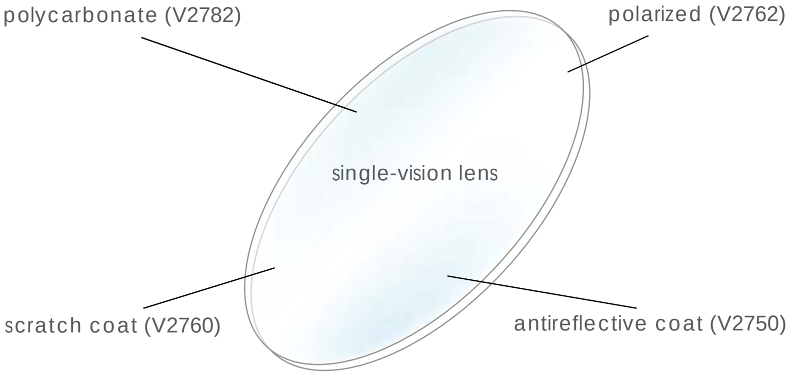


Figure 4-4: An example of the attributes that make up a lens. OfficeMate allows you assign multiple attributes to a product, which enables you to find products by attribute, assign a cost to each attribute, and add billable codes to each attribute.

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 259.
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 262.
   - 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 259.

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.

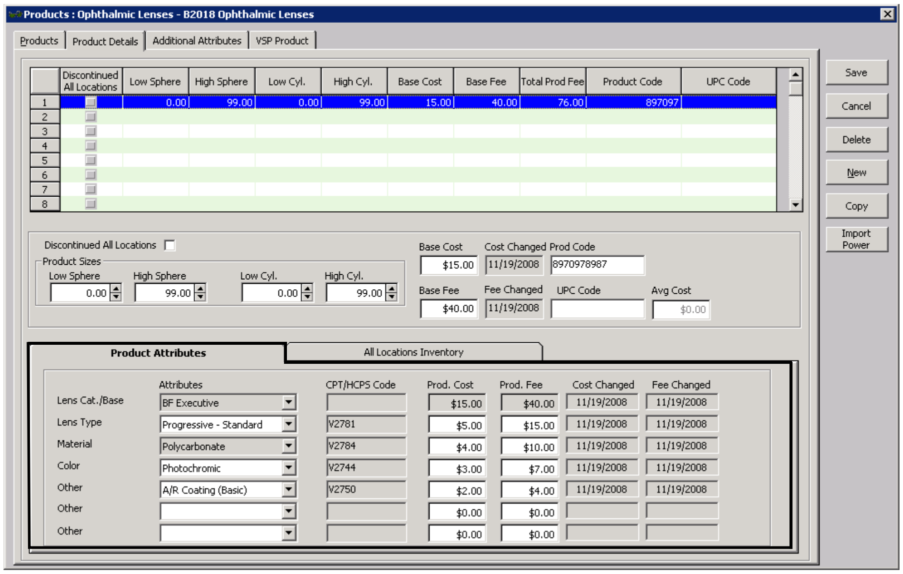
4. Click the **Product Details** tab.
5. Select a product from the list.
6. Select the product's attributes from the **Attributes** drop-down menus.

   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 140.

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 262.
- 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 140.

7. Repeat steps 5–6 to apply attributes to each of the products listed at the top of the window.



Products : Ophthalmic Lenses - B2018 Ophthalmic Lenses

	Discontinued All Locations	Low Sphere	High Sphere	Low Cyl.	High Cyl.	Base Cost	Base Fee	Total Prod Fee	Product Code	UPC Code
1	☐	0.00	99.00	0.00	99.00	15.00	40.00	76.00	897097	
2	☐									
3	☐									
4	☐									
5	☐									
6	☐									
7	☐									
8	☐									

Discontinued All Locations ☐

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 437 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 259.
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 262.
   - 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 259.

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 447.
- 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.

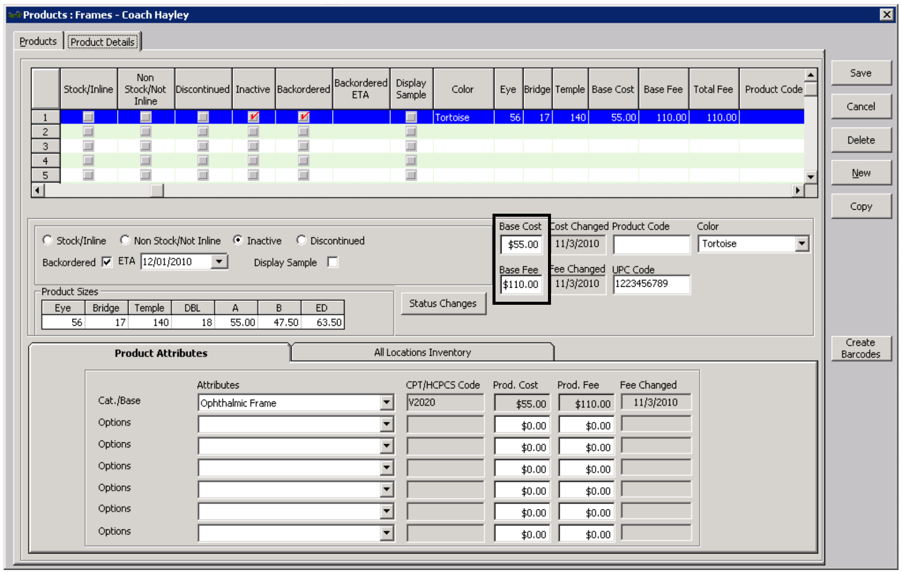
1. Open the Products window. For more information on opening the Products window, go to Opening the Products Window on page 259.
2. Select a product or service from the **Product Type** drop-down menu.

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 262.
   - 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 259.

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.



Products : Frames - Coach Hayley

	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	☐	☐	☐	☐	☐		☐								

○ Stock/Inline ○ Non Stock/Not Inline ● Inactive ○ Discontinued

Backordered ☑ ETA 12/01/2010 Display Sample ☐

Base Cost $55.00
Cost Changed 11/3/2010
Product Code
Color Tortoise
Base Fee $110.00
Fee Changed 11/3/2010
UPC Code 1223456789

Product Sizes

Eye	Bridge	Temple	DBL	A	B	ED
56	17	140	18	55.00	47.50	63.50

	Attributes	CPT/HCPCS Code	Prod. Cost	Prod. Fee	Fee Changed
Cat./Base	Ophthalmic Frame	V2020	$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

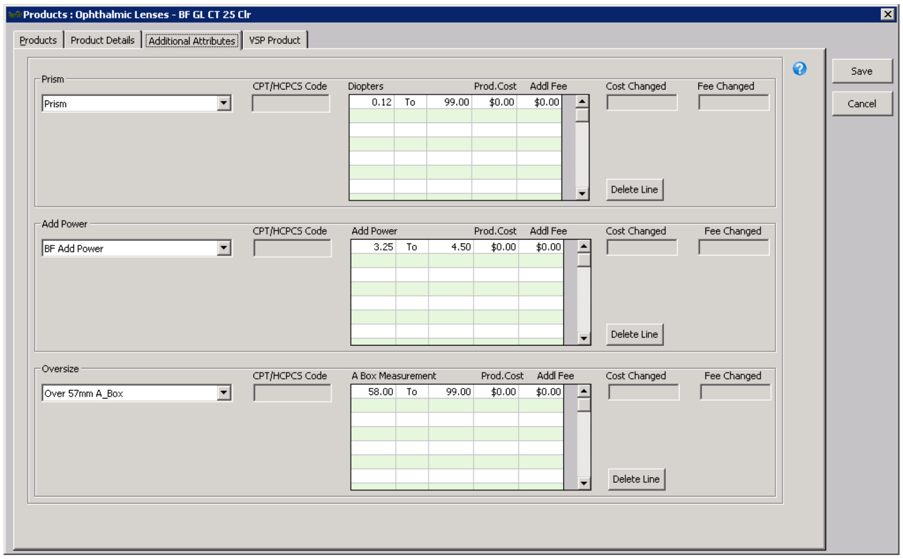
- Often, there are additional material or lab costs for high-power lenses, oversized lenses, and other prescription needs that need to be calculated into the patient's fee slip. By recording additional attribute information, you ensure that OfficeMate automatically includes those fees on fee slips and 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 mor information about maintaining additional attributes for all ophthalmic lenses, go to To add & modify additional attributes on page 142.

1. Open the Products window. For more information on opening the Products window, go to Opening the Products Window on page 259.
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 262.
   - 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 259.

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*.



Products : Ophthalmic Lenses - BF GL CT 25 Clr

Prism: Prism
CPT/HCPCS Code:

Diopters			Prod.Cost	Addl Fee
0.12	To	99.00	$0.00	$0.00

Cost Changed:
Fee Changed:

Add Power: BF Add Power
CPT/HCPCS Code:

Add Power			Prod.Cost	Addl Fee
3.25	To	4.50	$0.00	$0.00

Cost Changed:
Fee Changed:

Oversize: Over 57mm A_Box
CPT/HCPCS Code:

A Box Measurement			Prod.Cost	Addl Fee
58.00	To	99.00	$0.00	$0.00

Cost Changed:
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

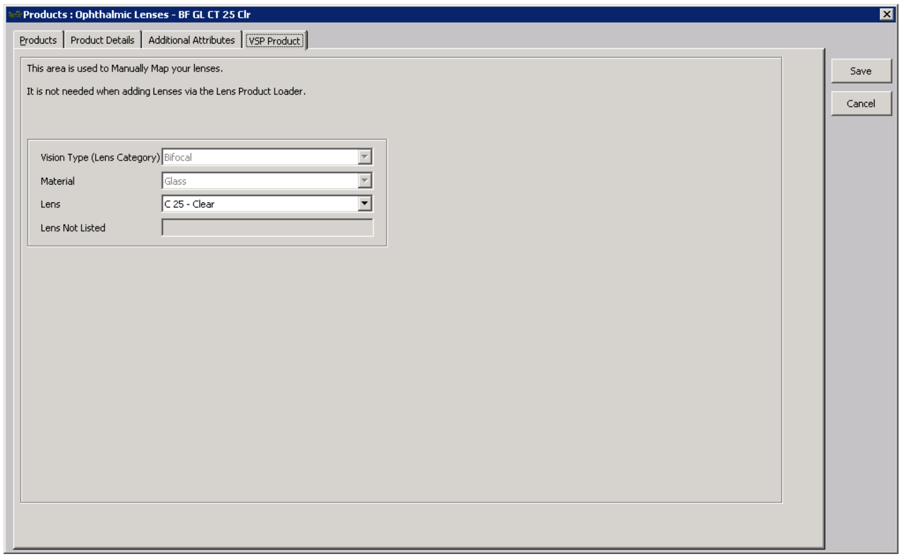
1. Open the Products window. For more information on opening the Products window, go to Opening the Products Window on page 259.
2. Select **Ophthalmic Lenses** from the **Product Type** drop-down menu.

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 262.
   - 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 259.

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.



Products : Ophthalmic Lenses - BF GL CT 25 Clr

This area is used to Manually Map your lenses.

It is not needed when adding Lenses via the Lens Product Loader.

Vision Type (Lens Category): Bifocal
Material: Glass
Lens: C 25 - Clear
Lens Not Listed:

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.

Recording Service Information

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, 279
- To add additional information to services, 282
- To itemize service details, 284
- To maintain service attributes, 285

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 259.
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 259.

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.

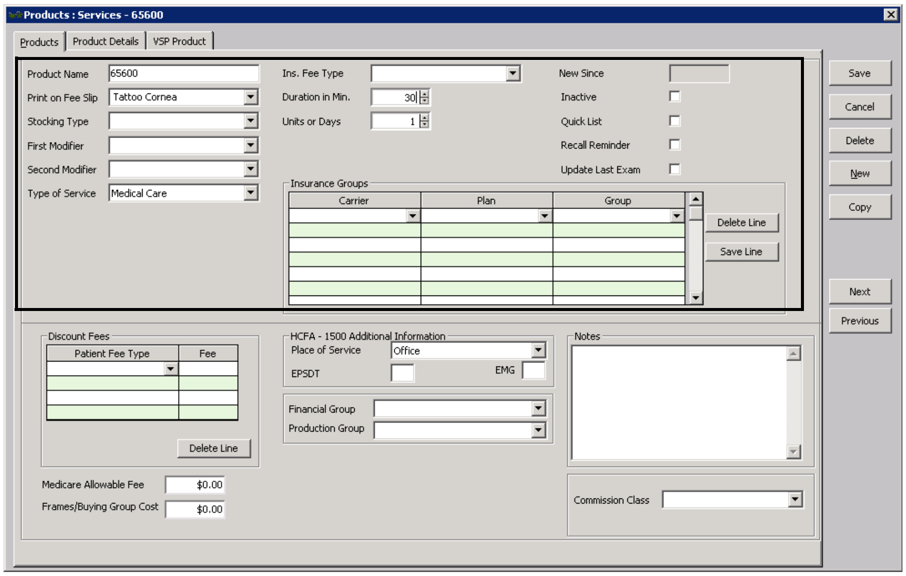
7. Select modifiers from the **First Modifier** and **Second Modifier** drop-down lists as needed.

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 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.
15. 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.

16. 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.


Products : Services - 65600
Product Name 65600
Print on Fee Slip Tattoo Cornea
Type of Service Medical Care
Duration in Min. 30
Units or Days 1
Place of Service Office
Medicare Allowable Fee $0.00
Frames/Buying Group Cost $0.00
Products
Product Details
VSP Product
Stocking Type
First Modifier
Second Modifier
Ins. Fee Type
New Since
Inactive
Quick List
Recall Reminder
Update Last Exam
Insurance Groups
Carrier
Plan
Group
Delete Line
Save Line
Save
Cancel
Delete
New
Copy
Next
Previous
Discount Fees
Patient Fee Type
Fee
Delete Line
HCFA - 1500 Additional Information
EPSDT
EMG
Financial Group
Production Group
Notes
Commission Class

> **NOTE** Only the insurance plans that are set up in the Detailed Benefits window will be available from the drop-own menus. For information on setting up the insurance detailed benefits, go to To open the Detail Benefits window on page 167.

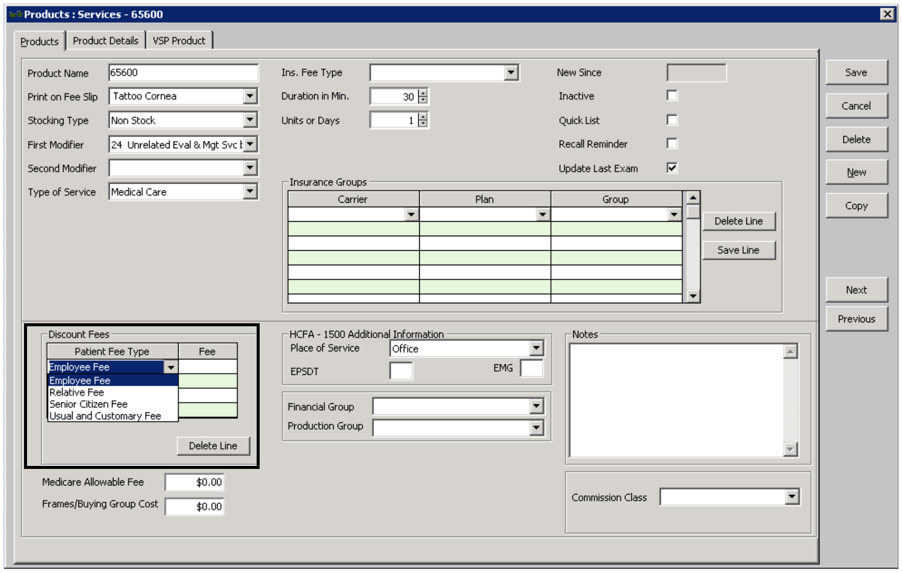
17. If you want to add more information to the service, go to To add additional information to services on page 282 and To itemize service details on page 284; otherwise, click **Save** and select one of the following options:
    – **Save** to save the information and keep the Products window open.
    – **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 259.
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 279.
   - 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 259.

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.



Products : Services - 65600

Product Name 65600
Print on Fee Slip Tattoo Cornea
Stocking Type Non Stock
First Modifier 24 Unrelated Eval & Mgt Svc t
Second Modifier
Type of Service Medical Care
Ins. Fee Type
Duration in Min. 30
Units or Days 1
New Since
Inactive ☐
Quick List ☐
Recall Reminder ☐
Update Last Exam ☑
Place of Service Office
Medicare Allowable Fee $0.00
Frames/Buying Group Cost $0.00

Products
Product Details
VSP Product
Save
Cancel
Delete
New
Copy
Next
Previous
Insurance Groups
Carrier
Plan
Group
Delete Line
Save Line
Discount Fees
Patient Fee Type
Fee
Employee Fee
Employee Fee
Relative Fee
Senior Citizen Fee
Usual and Customary Fee
Delete Line
HCFA - 1500 Additional Information
EPSDT
EMG
Financial Group
Production Group
Notes
Commission Class

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.

7. 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.

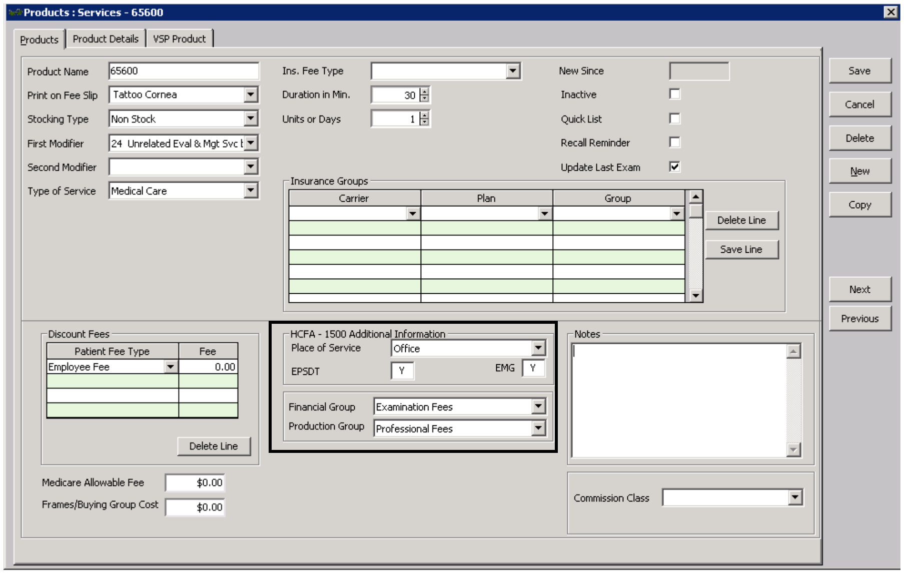
8. Type Y in the **EMG** text box if the service is related to an emergency or type N in the **EMG** text box if the service is not related to an emergency.

NOTE	The EMG is automatically entered on the CMS 1500 form in box 24C.

9. 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.

10. 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.



Product Name: 65600
Print on Fee Slip: Tattoo Cornea
Stocking Type: Non Stock
First Modifier: 24 Unrelated Eval & Mgt Svc I
Second Modifier:
Type of Service: Medical Care
Ins. Fee Type:
Duration in Min.: 30
Units or Days: 1
New Since:
Inactive ☐
Quick List ☐
Recall Reminder ☐
Update Last Exam ☑

Patient Fee Type	Fee
Employee Fee	0.00

Medicare Allowable Fee: $0.00
Frames/Buying Group Cost: $0.00

HCFA - 1500 Additional Information
Place of Service: Office
EPSDT: Y
EMG: Y
Financial Group: Examination Fees
Production Group: Professional Fees

Commission Class:

11. Type notes in the **Notes** box.

12. 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 252.

13. If you want to itemize service details, go to To itemize service details on page 284; 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 259.
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 279.
    - 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 259.

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.

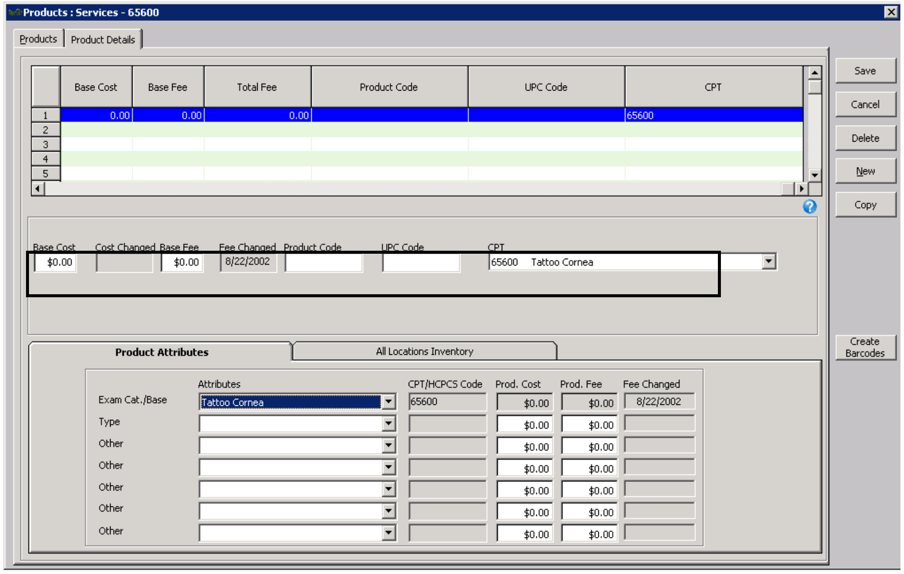
NOTE Select a line and click **Delete** to delete the line if it is *not* linked to a fee slip, Rx order, or purchase order.

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.



Products : Services - 65600

	Base Cost	Base Fee	Total Fee	Product Code	UPC Code	CPT
1	0.00	0.00	0.00			65600
2						
3						
4						
5						

Base Cost	Cost Changed	Base Fee	Fee Changed	Product Code	UPC Code	CPT
$0.00		$0.00	8/22/2002			65600 Tattoo Cornea

	Attributes	CPT/HCPCS Code	Prod. Cost	Prod. Fee	Fee Changed
Exam Cat./Base	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	
Other			$0.00	$0.00	

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.

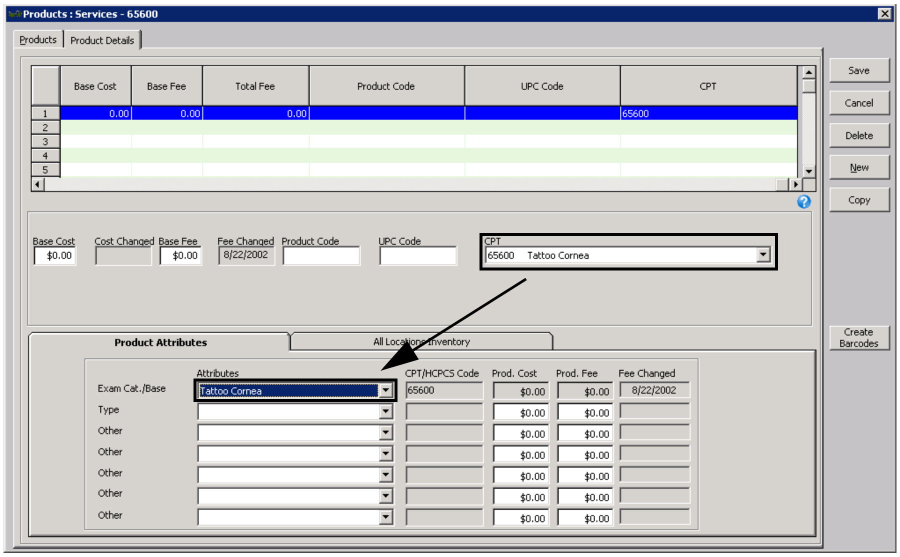
1. Open the Products window. For more information on opening the Products window, go to Opening the Products Window on page 259.
2. Select **Services** from the **Product Type** drop-down menu.

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 279.
   - 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 259.

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 140.



	Base Cost	Base Fee	Total Fee	Product Code	UPC Code	CPT
1	0.00	0.00	0.00			65600
2						
3						
4						
5						

Base Cost	Cost Changed	Base Fee	Fee Changed	Product Code	UPC Code	CPT
$0.00		$0.00	8/22/2002			65600 Tattoo Cornea

	Attributes	CPT/HCPCS Code	Prod. Cost	Prod. Fee	Fee Changed
Exam Cat./Base	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	
Other			$0.00	$0.00	

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

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, 287
- To update products & services, 290

For information on updating many products and services, watch the "Product Maintenance" video.

▶ 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 252.

r. Type Y or N in the **EPSDT** text box to refine by early diagnosis and treatment products and services, as needed.

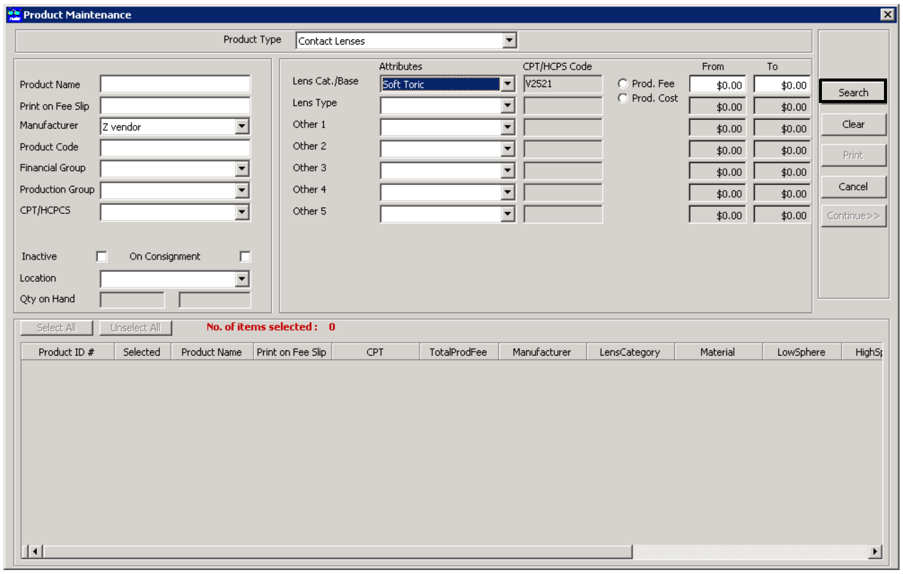
s. Type Y or N in the **EMG** text box to refine by emergency products and services, as needed.

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.

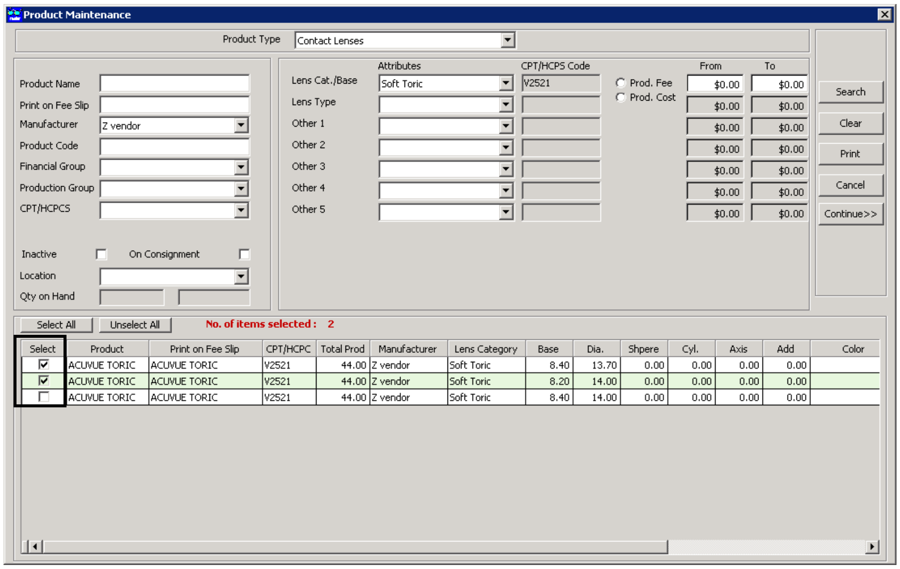

Product Maintenance
Product Name
Print on Fee Slip
Financial Group
Production Group
CPT/HCPCS
Product Code
Inactive ☐
On Consignment ☐
Location
Qty on Hand
Attributes
Lens Type
Other 1
Other 2
Other 3
Other 4
Other 5
○ Prod. Fee
○ Prod. Cost
From
To
$0.00
Search
Clear
Print
Cancel
Continue>>
Select All
Unselect All
Product ID #
Selected
Product Name
Print on Fee Slip
CPT
TotalProdFee
Manufacturer
LensCategory
Material
LowSphere
HighSp

Product Type: Contact Lenses
Manufacturer: Z vendor
Lens Cat./Base: Soft Toric
CPT/HCPS Code: V2521
No. of items selected : 0

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.


Product Maintenance
Product Name
Print on Fee Slip
Product Code
Financial Group
Production Group
CPT/HCPCS
Inactive
On Consignment
Location
Qty on Hand
Attributes
Lens Type
Other 1
Other 2
Other 3
Other 4
Other 5
○ Prod. Fee
○ Prod. Cost
From
To
Search
Clear
Print
Cancel
Continue>>
Select All
Unselect All

Product Type: Contact Lenses
Manufacturer: Z vendor
Lens Cat./Base: Soft Toric
CPT/HCPS Code: V2521

No. of items selected : 2

Select	Product	Print on Fee Slip	CPT/HCPC	Total Prod	Manufacturer	Lens Category	Base	Dia.	Shpere	Cyl.	Axis	Add	Color
☑	ACUVUE TORIC	ACUVUE TORIC	V2521	44.00	Z vendor	Soft Toric	8.40	13.70	0.00	0.00	0.00	0.00	
☑	ACUVUE TORIC	ACUVUE TORIC	V2521	44.00	Z vendor	Soft Toric	8.20	14.00	0.00	0.00	0.00	0.00	
☐	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 290.

▶ 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 287.

2. Enter the general product information that you want to update:

NOTES	- Enter only the information that needs to 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 140.

   a. Select the check box(es) that corresponds with the attribute cost(s) or fee(s) you want to update.

   b. 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.

   c. 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.

   d. Type the percent or amount of the cost or fee change.

   e. 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.

   f. 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.

   g. 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.

5. Review your changes for accuracy. It is very important that your changes are accurate before proceeding!

6. If you need to clear your changes, click **Clear**.

7. Click **Save and Continue** to save your changes.

   A dialog box appears confirming how many products were updated.
8. Click **OK**.

Recalling Patients

5

In this chapter:

- Creating New Recall Schedules, 295
- Modifying Recall Schedules, 296
- Deleting Recall Schedules, 297
- Assigning Recall Dates to Patients, 298
- Creating Recall Letters, 299
- Printing Recall Correspondences, 301

For more information on setting up recalls, watch the "Recall" video.

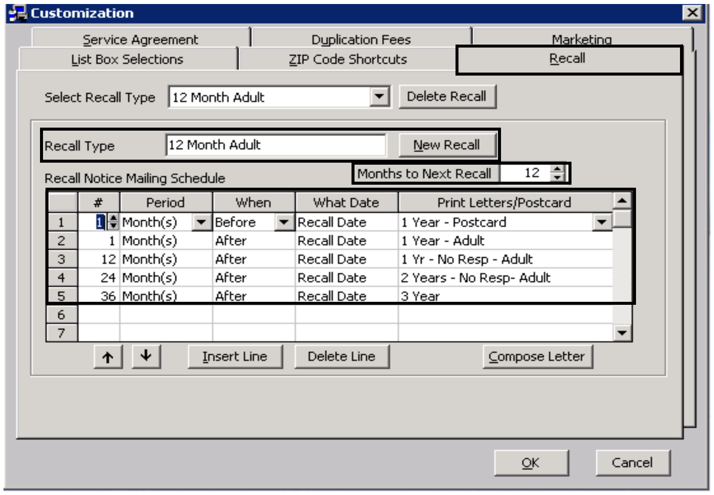
For more information on recalling patients, watch the "Recalls" video.

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.

9. Select the type of recall letter or postcard to print from the **Print Letters/Postcard** column drop-down menu.



Customization
Service Agreement
Duplication Fees
Marketing
List Box Selections
ZIP Code Shortcuts
Recall
Delete Recall
New Recall
Insert Line
Delete Line
Compose Letter
OK
Cancel

Select Recall Type: 12 Month Adult

Recall Type: 12 Month Adult

Recall Notice Mailing Schedule

Months to Next Recall: 12

	#	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					

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.

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**.

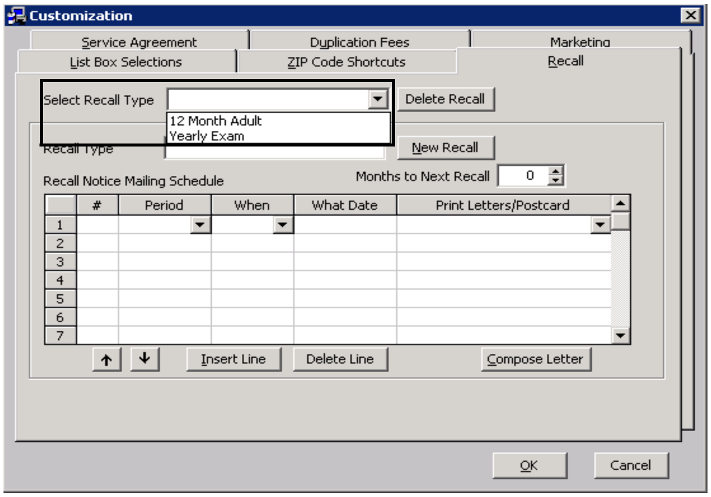
Modifying Recall Schedules

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.


Customization
Service Agreement
Duplication Fees
Marketing
List Box Selections
ZIP Code Shortcuts
Recall
Select Recall Type
12 Month Adult
Yearly Exam
Delete Recall
Recall Type
New Recall
Recall Notice Mailing Schedule
Months to Next Recall
0
#
Period
When
What Date
Print Letters/Postcard
1
2
3
4
5
6
7
Insert Line
Delete Line
Compose Letter
OK
Cancel

4. Modify the **Recall Type** and **Months to Next Recall**.
5. See Creating New Recall Schedules on page 295, 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

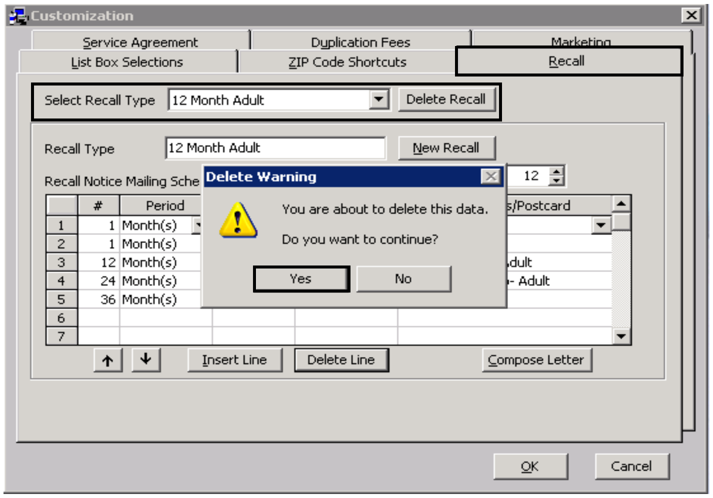
NOTE	You can only delete recall schedules that are *not* linked to patients.

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.

5. Click **Yes** to continue.



Customization
Service Agreement
Duplication Fees
Marketing
List Box Selections
ZIP Code Shortcuts
Recall
Delete Recall
New Recall
Recall Notice Mailing Sche
12
#
Period
/Postcard
1 Month(s)
1 Month(s)
12 Month(s)
24 Month(s)
36 Month(s)
dult
- Adult
Insert Line
Delete Line
Compose Letter
OK
Cancel
Delete Warning
Yes
No

Select Recall Type: 12 Month Adult

Recall Type: 12 Month Adult

You are about to delete this data.

Do you want to continue?

6. 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 295 to create a new recall schedule or Modifying Recall Schedules on page 296 to modify an existing recall schedule.

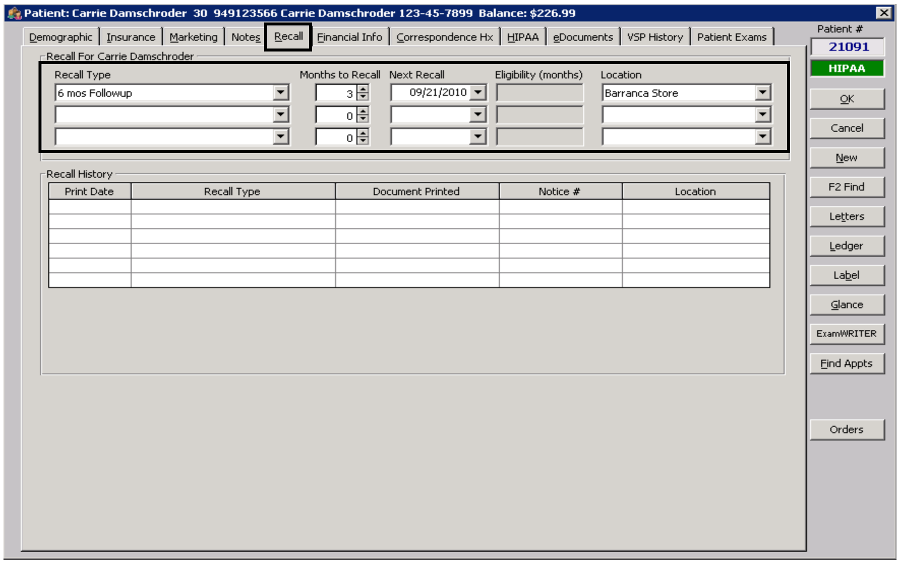
1. Open a patient record. For more information, see Creating & Opening Patient Records on page 201.
2. Click the **Recall** tab in the Patient Demographic window.

   > **NOTE** You can view the recall history for the patient in the **Recall History** box.

3. Select recall types from the **Recall Type** drop-down menus.

4. 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.



Patient: Carrie Damschroder 30 949123566 Carrie Damschroder 123-45-7899 Balance: $226.99

Patient # 21091

Recall For Carrie Damschroder

Recall Type	Months to Recall	Next Recall	Eligibility (months)	Location
6 mos Followup	3	09/21/2010		Barranca Store
	0			
	0			

Recall History

Print Date	Recall Type	Document Printed	Notice #	Location

Demographic
Insurance
Marketing
Notes
Recall
Financial Info
Correspondence Hx
HIPAA
eDocuments
VSP History
Patient Exams
HIPAA
OK
Cancel
New
F2 Find
Letters
Ledger
Label
Glance
ExamWRITER
Find Appts
Orders

Creating Recall Letters

This section tells you how to create recall letters to send to your patients including how

- To create a new recall letter, 299
- To modify a recall letter, 300

For more information on creating recall letters using the Maintain Documents window, go to Maintaining Documents on page 835.

▶ To create a new recall letter

1. Click **Tasks** on the main window toolbar and select **Maintain Documents**.

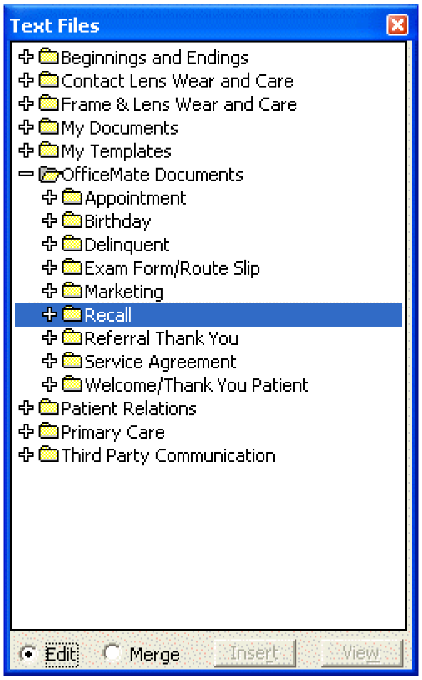
   OR

   Select a recall schedule and click **Compose** in the Customization window's Recall tab. For more information, see Creating New Recall Schedules on page 295.

   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.

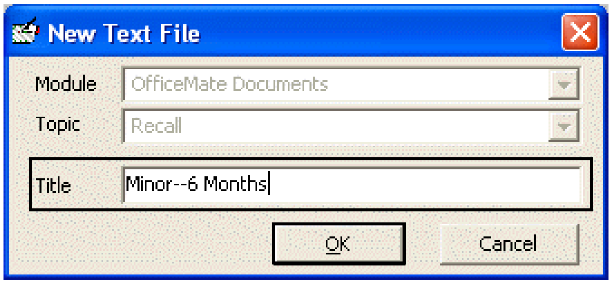

Text Files
Beginnings and Endings
Contact Lens Wear and Care
Frame & Lens Wear and Care
My Documents
My Templates
OfficeMate Documents
Appointment
Birthday
Delinquent
Exam Form/Route Slip
Marketing
Recall
Referral Thank You
Service Agreement
Welcome/Thank You Patient
Patient Relations
Primary Care
Third Party Communication
Edit
Merge
Insert
View

● Edit ○ Merge

5. Click **File** on the CARE from OfficeMate or Maintain Documents window toolbar 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**.


New Text File
OK
Cancel

Module: OfficeMate Documents
Topic: Recall
Title: Minor--6 Months

8. Type the letter in the word processing window.
9. Click **File** on the Maintain Documents window toolbar and select **Save**.

▶ To modify a recall letter

1. Click **Tasks** on the main window toolbar and select **Maintain Documents**.

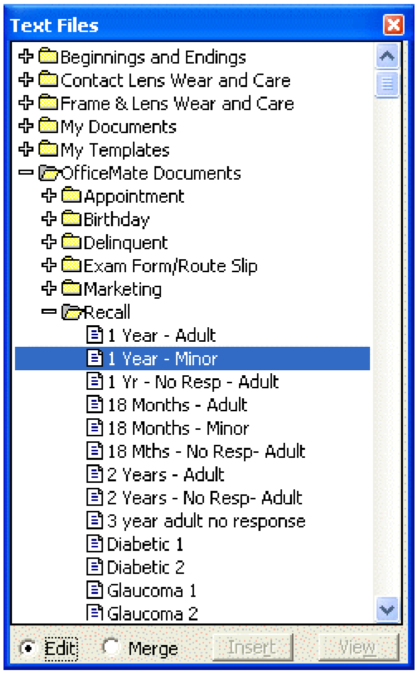
   OR

   Select a recall schedule and click **Compose** in the Customization window's Recall tab. For more information, see Creating New Recall Schedules on page 295.

   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.


Text Files
Beginnings and Endings
Contact Lens Wear and Care
Frame & Lens Wear and Care
My Documents
My Templates
OfficeMate Documents
Appointment
Birthday
Delinquent
Exam Form/Route Slip
Marketing
Recall
1 Year - Adult
1 Year - Minor
1 Yr - No Resp - Adult
18 Months - Adult
18 Months - Minor
18 Mths - No Resp- Adult
2 Years - Adult
2 Years - No Resp- Adult
3 year adult no response
Diabetic 1
Diabetic 2
Glaucoma 1
Glaucoma 2
● Edit
○ Merge
Insert
View

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, 302
- To print a list of patients that you want to recall, 305
- To print labels for patients that you want to recall, 308

▶ 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]**.

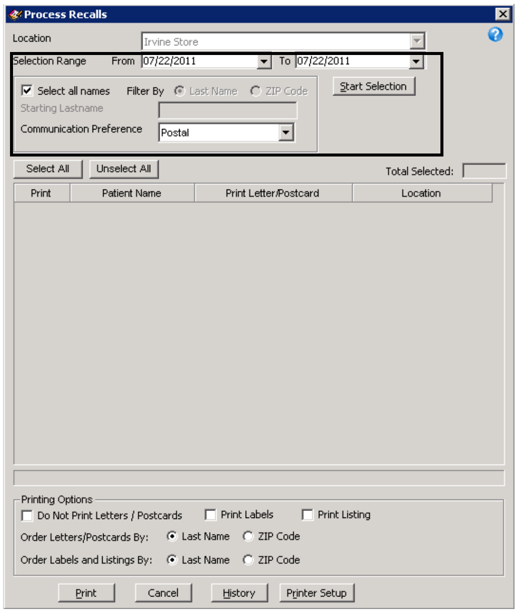
   The Process Recalls window opens.

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 206.

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.

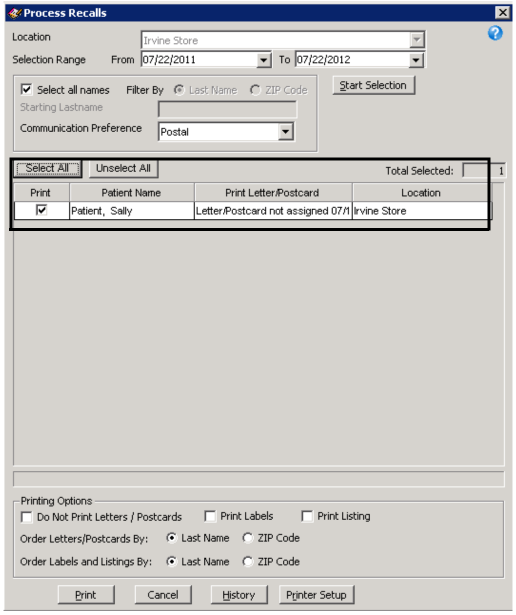

Location: Irvine Store
Selection Range From 07/22/2011 To 07/22/2011
☑ Select all names
Filter By ● Last Name ○ ZIP Code
Starting Lastname
Communication Preference: Postal
Total Selected:
Printing Options
☐ Do Not Print Letters / Postcards ☐ Print Labels ☐ Print Listing
Order Letters/Postcards By: ● Last Name ○ ZIP Code
Order Labels and Listings By: ● Last Name ○ ZIP Code

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. 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.


Process Recalls
Start Selection
Select All
Unselect All
Print
Cancel
History
Printer Setup

Location: Irvine Store
Selection Range From 07/22/2011 To 07/22/2012
☑ Select all names Filter By ● Last Name ○ ZIP Code
Starting Lastname
Communication Preference: Postal
Total Selected: 1

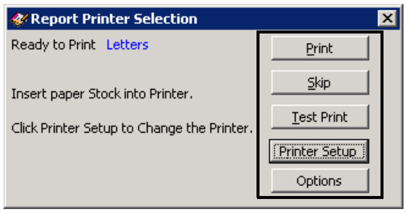
Print	Patient Name	Print Letter/Postcard	Location
☑	Patient, Sally	Letter/Postcard not assigned 07/1	Irvine Store

Printing Options
☐ Do Not Print Letters / Postcards ☐ Print Labels ☐ Print Listing
Order Letters/Postcards By: ● Last Name ○ ZIP Code
Order Labels and Listings By: ● Last Name ○ 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.

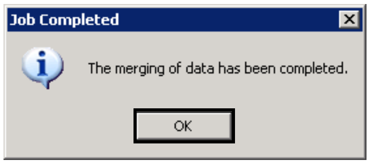

Report Printer Selection
Print
Skip
Test Print
Printer Setup
Options

Ready to Print Letters

Insert paper Stock into Printer.

Click Printer Setup to Change the Printer.

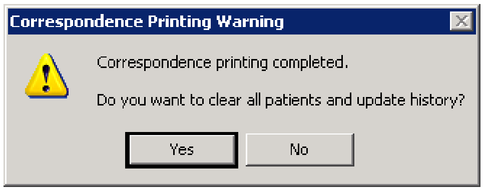
8. Click **OK** in the Job Completed window.


Job Completed
OK

The merging of data has been completed.

The Correspondence Printing Window opens.

9. 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.



Correspondence Printing Warning

Correspondence printing completed.

Do you want to clear all patients and update history?

▶ To print a list of patients that you want to recall

NOTE Print lists using 8½” × 11” paper stock.

1. Click **Tasks** on the main window toolbar, select **Correspondence [MU]**, and then select **Recall [MU]**.

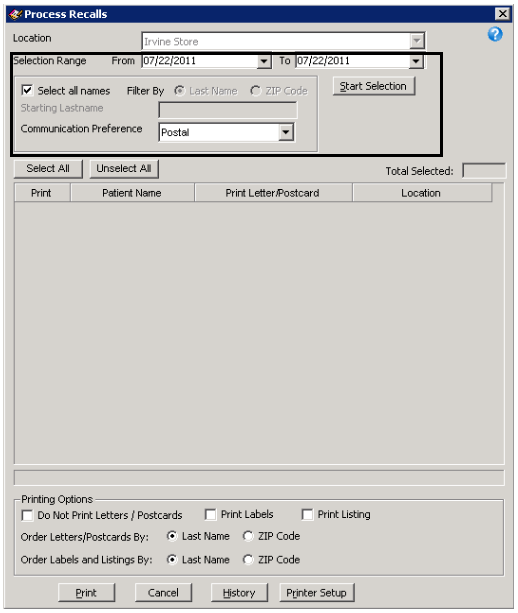
   The Process Recalls window opens.

   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 a recall list from the **Location** drop-down menu.
3. 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 206.

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 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.



Location: Irvine Store
Selection Range From 07/22/2011 To 07/22/2011
☑ Select all names Filter By ● Last Name ○ ZIP Code
Starting Lastname:
Communication Preference: Postal
Total Selected:
Printing Options
☐ Do Not Print Letters / Postcards ☐ Print Labels ☐ Print Listing
Order Letters/Postcards By: ● Last Name ○ ZIP Code
Order Labels and Listings By: ● Last Name ○ ZIP Code

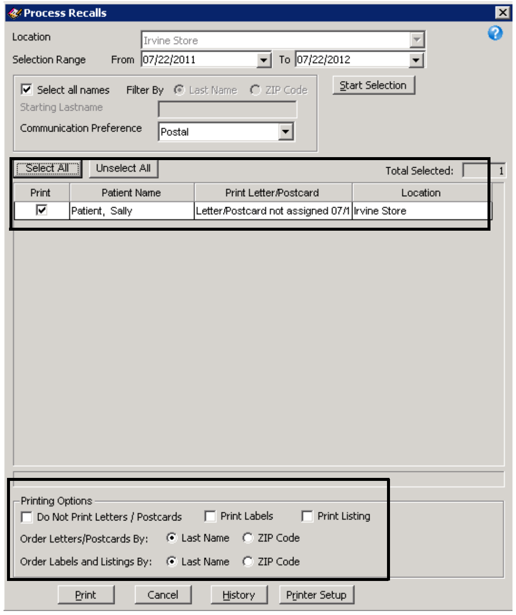
A list of patients meeting your selection criteria is displayed.

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. 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.


Process Recalls

Location: Irvine Store
Selection Range From 07/22/2011 To 07/22/2012
☑ Select all names Filter By ● Last Name ○ ZIP Code
Starting Lastname
Communication Preference: Postal

Start Selection
Select All
Unselect All

Total Selected: 1

Print	Patient Name	Print Letter/Postcard	Location
☑	Patient, Sally	Letter/Postcard not assigned 07/1	Irvine Store

Printing Options
☐ Do Not Print Letters / Postcards ☐ Print Labels ☐ Print Listing
Order Letters/Postcards By: ● Last Name ○ ZIP Code
Order Labels and Listings By: ● Last Name ○ ZIP Code

Print
Cancel
History
Printer Setup

8. Click **Print** to print the recall list.

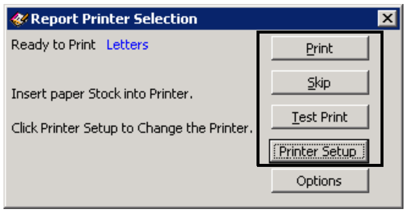
   The Report Printer Selection window opens. Click one of the following buttons:

   – **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.


Report Printer Selection
Print
Skip
Test Print
Printer Setup
Options

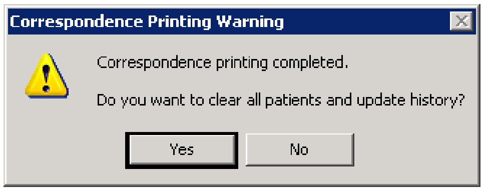
Ready to Print Letters

Insert paper Stock into Printer.

Click Printer Setup to Change the Printer.

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.


Correspondence Printing Warning
Yes
No

Correspondence printing completed.

Do you want to clear all patients and update 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]**.

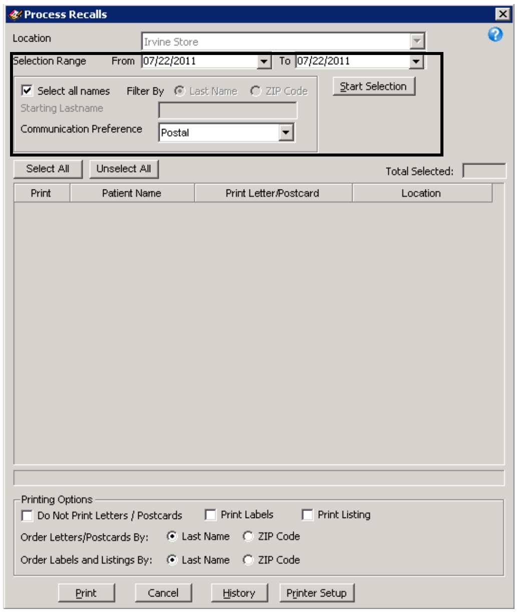
   The Process Recalls window opens.

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 206.

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 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.



Location: Irvine Store
Selection Range From 07/22/2011 To 07/22/2011
☑ Select all names
Filter By ● Last Name ○ ZIP Code
Starting Lastname:
Communication Preference: Postal
Total Selected:

Print	Patient Name	Print Letter/Postcard	Location

Printing Options
☐ Do Not Print Letters / Postcards ☐ Print Labels ☐ Print Listing
Order Letters/Postcards By: ● Last Name ○ ZIP Code
Order Labels and Listings By: ● Last Name ○ ZIP Code

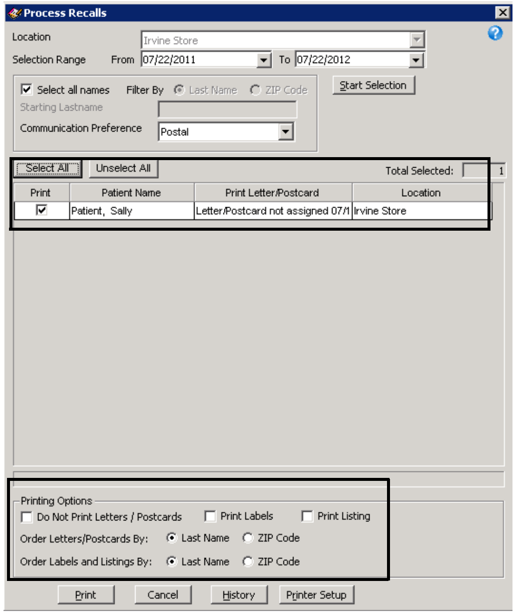
A list of patients meeting your selection criteria is displayed.

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. 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.



Process Recalls

Location: Irvine Store

Selection Range From 07/22/2011 To 07/22/2012

☑ Select all names Filter By ● Last Name ○ ZIP Code

Starting Lastname

Communication Preference: Postal

Total Selected: 1

Print	Patient Name	Print Letter/Postcard	Location
☑	Patient, Sally	Letter/Postcard not assigned 07/1	Irvine Store

Printing Options

☐ Do Not Print Letters / Postcards ☐ Print Labels ☐ Print Listing

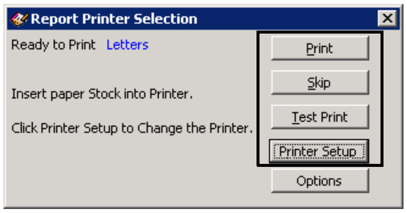
Order Letters/Postcards By: ● Last Name ○ ZIP Code

Order Labels and Listings By: ● Last Name ○ ZIP Code

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.



Report Printer Selection

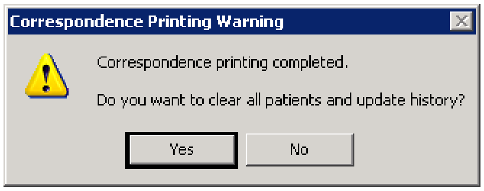
Ready to Print Letters

Insert paper Stock into Printer.

Click Printer Setup to Change the Printer.

   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.



Correspondence Printing Warning

Correspondence printing completed.

Do you want to clear all patients and update history?

Scheduling Appointments

6

In this chapter:

For information on scheduling appointments, watch the "Appointment Processes" video.

- Opening & Viewing the Appointment Scheduler, 311
- Setting Up the Appointment Scheduler, 315
- Searching for Appointments, 330
- Scheduling Appointments, 334
- Recording Patients Shows and No Shows, 342
- Rescheduling Appointments, 343
- Copying Appointments, 344
- Canceling Appointments, 345
- Deleting Appointments, 346
- Confirming Appointments, 347
- Printing Patient Welcome Forms, 349

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, 312
- To view resources in the Appointment Scheduler, 312
- To view locations in the Appointment Scheduler, 313
- To modify viewing options in the Appointment Scheduler, 314

For information on navigating the Appointment Scheduler, watch the "Scheduler Navigation" video.

NOTE	Click **Refresh** to refresh the Appointment Scheduler at any time with the most up-to-date appointment information.

▶ 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

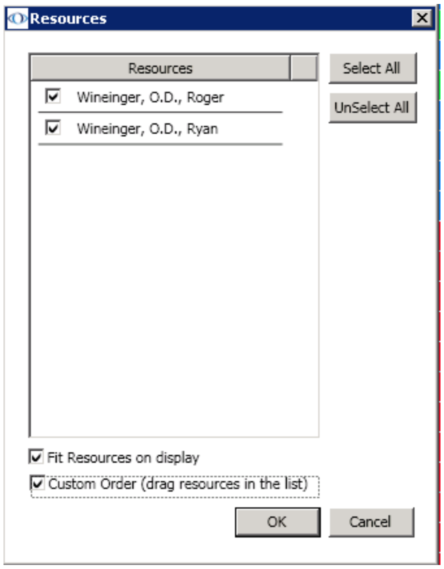
1. Open the Appointment Scheduler. For more information on opening the Appointment Scheduler, go to Opening & Viewing the Appointment Scheduler on page 311.
2. Click **View** and select **Resources**.

   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.

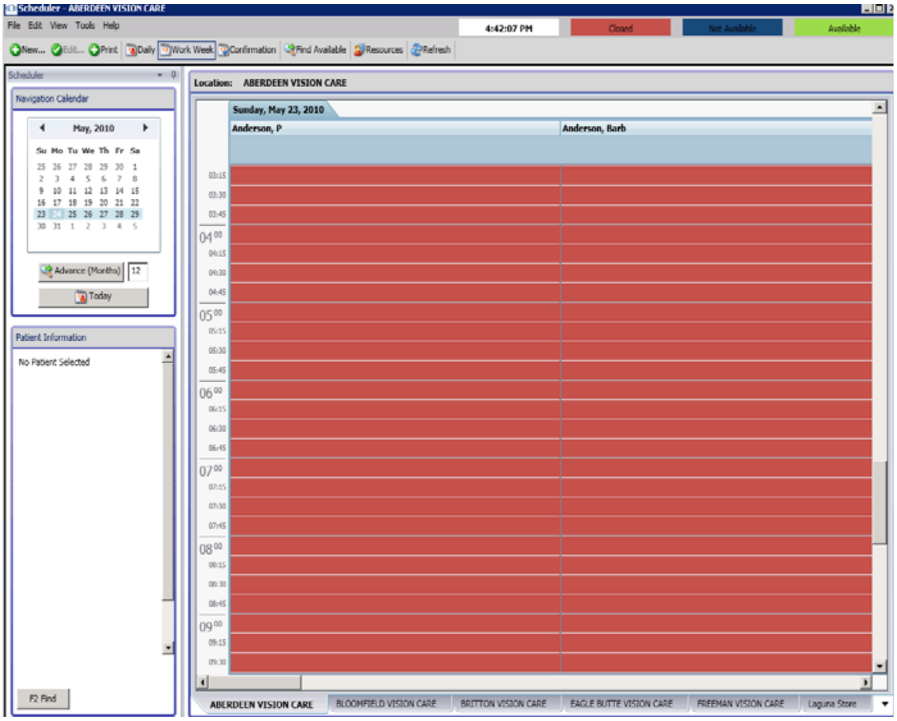
6. Click **OK**.


Resources
Resources
Select All
UnSelect All
OK
Cancel

☑ Wineinger, O.D., Roger
☑ Wineinger, O.D., Ryan

☑ Fit Resources on display
☑ Custom Order (drag resources in the list)

The Appointment Scheduler views will display the resources that you selected.


Scheduler - ABERDEEN VISION CARE
File Edit View Tools Help
4:42:07 PM
Closed
Not Available
Available
New...
Edit...
Print
Daily
Work Week
Confirmation
Find Available
Resources
Refresh
Scheduler
Navigation Calendar
May, 2010
Advance (Months)
12
Today
Patient Information
No Patient Selected
F2 Find
Location: ABERDEEN VISION CARE
Sunday, May 23, 2010
Anderson, P
Anderson, Barb
ABERDEEN VISION CARE
BLOOMFIELD VISION CARE
BRITTON VISION CARE
EAGLE BUTTE VISION CARE
FREEMAN VISION CARE
Laguna Store

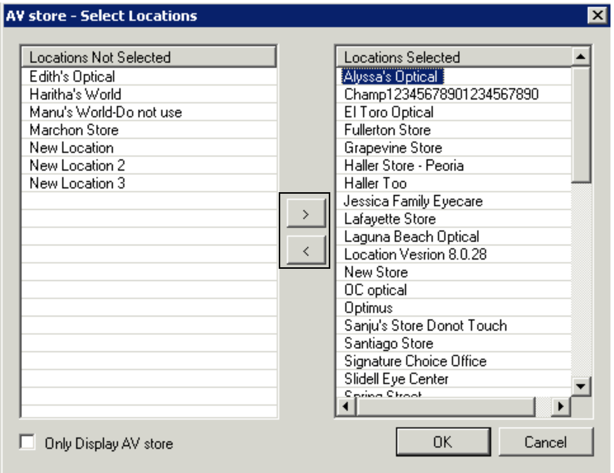
▶ To view locations in the Appointment Scheduler

1. Open the Appointment Scheduler. For more information on opening the Appointment Scheduler, go to Opening & Viewing the Appointment Scheduler on page 311.
2. Click **View** and select **Locations**.

   The Select Locations window opens.

3. 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.


AV store - Select Locations
Locations Not Selected
Edith's Optical
Haritha's World
Manu's World-Do not use
Marchon Store
New Location
New Location 2
New Location 3
>
<
Locations Selected
Alyssa's Optical
Champ12345678901234567890
El Toro Optical
Fullerton Store
Grapevine Store
Haller Store - Peoria
Haller Too
Jessica Family Eyecare
Lafayette Store
Laguna Beach Optical
Location Vesrion 8.0.28
New Store
OC optical
Optimus
Sanju's Store Donot Touch
Santiago Store
Signature Choice Office
Slidell Eye Center
☐ Only Display AV store
OK
Cancel

4. Click **OK**.

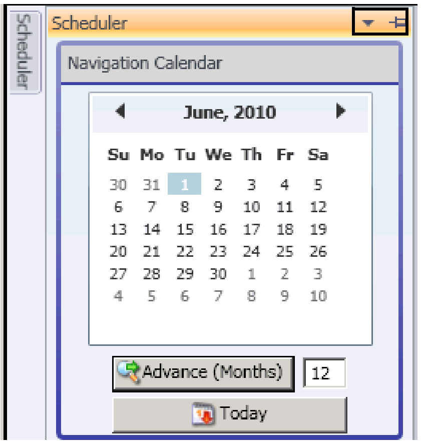
   The Appointment Scheduler views will display the locations that you selected in tabs at the bottom of the window. Click on the location's tab to view the appointment schedule for that location.

▶ 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 Calender 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**.



Su	Mo	Tu	We	Th	Fr	Sa
30	31	1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	1	2	3
4	5	6	7	8	9	10

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, 316
- To set up services, 318
- To set up provider & resource hours, 319
- To set up service templates, 321
- To set up & edit provider & resource exceptions, 326
- To set up service reminders, 328
- To set up insurance reminders, 328
- To set up appointment icons, 329

For information on setting up provider resources, watch the “Provider Resources” video.

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

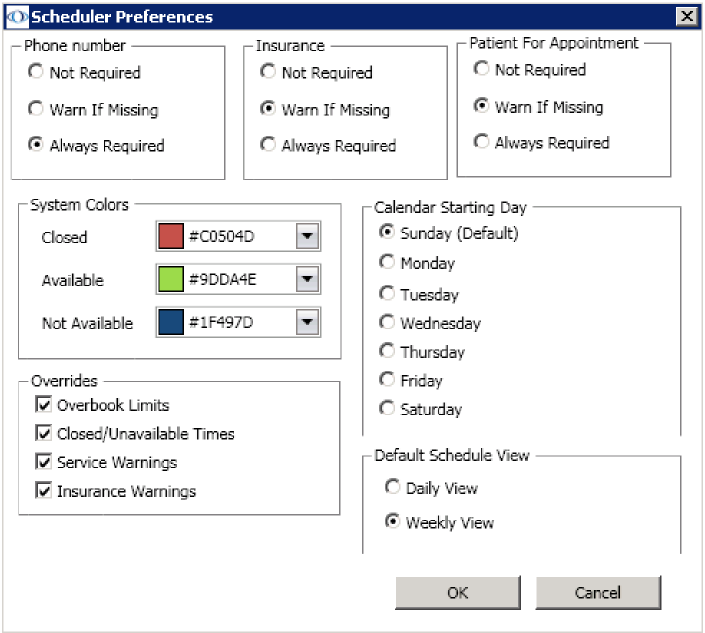
1. Open the Appointment Scheduler. For more information on opening the Appointment Scheduler, go to Opening & Viewing the Appointment Scheduler on page 311.
2. Click **Tools** and select **Scheduler Preferences**.

   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 319.

   - 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



Scheduler Preferences

Phone number
○ Not Required
○ Warn If Missing
● Always Required

Insurance
○ Not Required
● Warn If Missing
○ Always Required

Patient For Appointment
○ Not Required
● Warn If Missing
○ Always Required

System Colors
Closed 🟥 #C0504D
Available 🟩 #9DDA4E
Not Available 🟦 #1F497D

Calendar Starting Day
● Sunday (Default)
○ Monday
○ Tuesday
○ Wednesday
○ Thursday
○ Friday
○ Saturday

Overrides
☑ Overbook Limits
☑ Closed/Unavailable Times
☑ Service Warnings
☑ Insurance Warnings

Default Schedule View
○ Daily View
● Weekly View

10. Click **OK**.

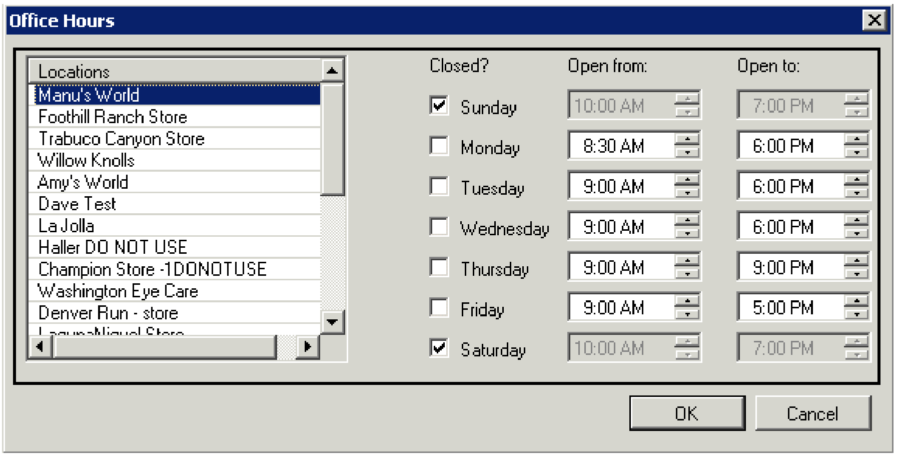
For information on setting up office hours, watch the "Office Hours" video.

▶ 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 311.
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.

5. Select or type the hours that the office is open in the **Open From** and **Open To** text boxes.



Locations
- Manu's World
- Foothill Ranch Store
- Trabuco Canyon Store
- Willow Knolls
- Amy's World
- Dave Test
- La Jolla
- Haller DO NOT USE
- Champion Store -1DONOTUSE
- Washington Eye Care
- Denver Run - store

Closed?	Open from:	Open to:
☑ Sunday	10:00 AM	7:00 PM
☐ Monday	8:30 AM	6:00 PM
☐ Tuesday	9:00 AM	6:00 PM
☐ Wednesday	9:00 AM	6:00 PM
☐ Thursday	9:00 AM	9:00 PM
☐ Friday	9:00 AM	5:00 PM
☑ Saturday	10:00 AM	7:00 PM

6. Click **OK**.

For information on setting up services, watch the “Services” video.

▶ To set up services

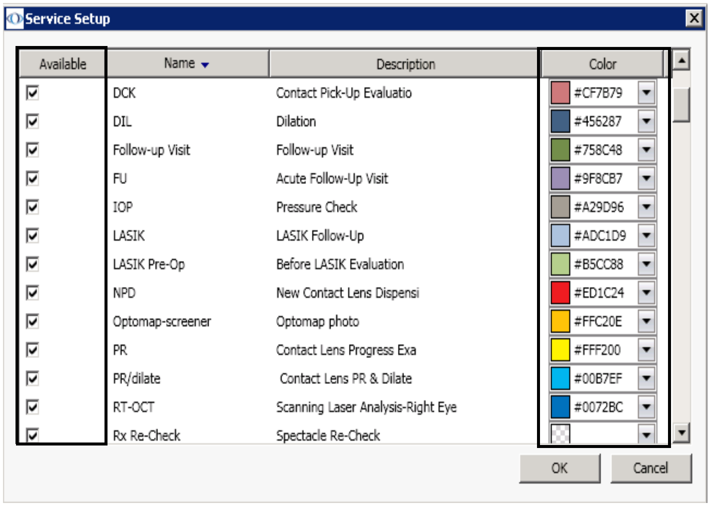
NOTES

- 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 279.
- 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.

1. Open the Appointment Scheduler. For more information on opening the Appointment Scheduler, go to Opening & Viewing the Appointment Scheduler on page 311.
2. Click **Tools** and select **Services**.

   The Service Setup window opens.
3. Select the check boxes in the **Available** column next to services for which you want to schedule appointments.

4. 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.



Available	Name	Description	Color
☑	DCK	Contact Pick-Up Evaluatio	#CF7B79
☑	DIL	Dilation	#456287
☑	Follow-up Visit	Follow-up Visit	#758C48
☑	FU	Acute Follow-Up Visit	#9F8CB7
☑	IOP	Pressure Check	#A29D96
☑	LASIK	LASIK Follow-Up	#ADC1D9
☑	LASIK Pre-Op	Before LASIK Evaluation	#B5CC88
☑	NPD	New Contact Lens Dispensi	#ED1C24
☑	Optomap-screener	Optomap photo	#FFC20E
☑	PR	Contact Lens Progress Exa	#FFF200
☑	PR/dilate	Contact Lens PR & Dilate	#00B7EF
☑	RT-OCT	Scanning Laser Analysis-Right Eye	#0072BC
☑	Rx Re-Check	Spectacle Re-Check	

5. Click **OK**.

For information on setting up provider and resource hours, watch the "Providers & Resources" video.

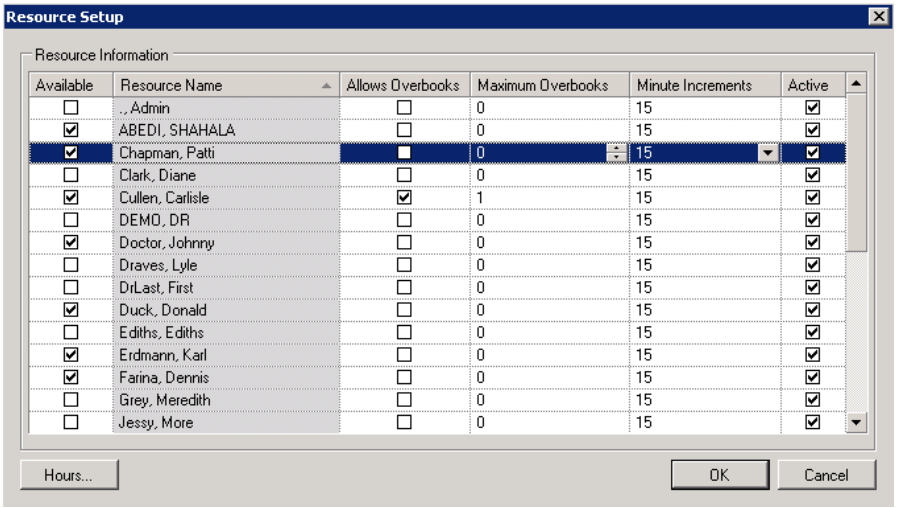
▶ To set up provider & resource hours

NOTE To add or delete provider names in OfficeMate, go to To modify or add provider information on page 51.

1. Open the Appointment Scheduler. For more information on opening the Appointment Scheduler, go to Opening & Viewing the Appointment Scheduler on page 311.
2. Click **Tools** and select **Providers And Resources**.

   The Resource Setup window opens.
3. Select the **Available** check box next to resources that are available.
4. Select the **Allows Overbooks** check box next to resources if you want to allow the Appointment Scheduler to overbook appointments for the resource.
5. 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.
6. 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.



Available	Resource Name	Allows Overbooks	Maximum Overbooks	Minute Increments	Active
☐	., Admin	☐	0	15	☑
☑	ABEDI, SHAHALA	☐	0	15	☑
☑	Chapman, Patti	☐	0	15	☑
☐	Clark, Diane	☐	0	15	☑
☑	Cullen, Carlisle	☑	1	15	☑
☐	DEMO, DR	☐	0	15	☑
☑	Doctor, Johnny	☐	0	15	☑
☐	Draves, Lyle	☐	0	15	☑
☐	DrLast, First	☐	0	15	☑
☑	Duck, Donald	☐	0	15	☑
☐	Ediths, Ediths	☐	0	15	☑
☑	Erdmann, Karl	☐	0	15	☑
☑	Farina, Dennis	☐	0	15	☑
☐	Grey, Meredith	☐	0	15	☑
☐	Jessy, More	☐	0	15	☑

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**.

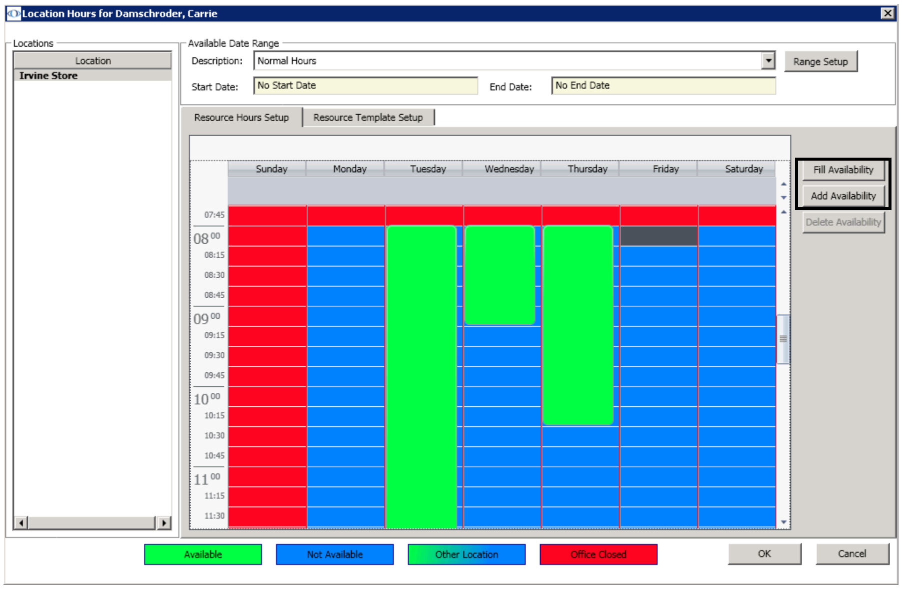
11. Complete one of the following actions to mark the resource as being available:

    – 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.



Location Hours for Damschroder, Carrie

Description: Normal Hours

Start Date: No Start Date

End Date: No End Date

Location: Irvine Store

Locations
Location
Available Date Range
Range Setup
Resource Hours Setup
Resource Template Setup
Sunday
Monday
Tuesday
Wednesday
Thursday
Friday
Saturday
07:45
08 00
08:15
08:30
08:45
09 00
09:15
09:30
09:45
10 00
10:15
10:30
10:45
11 00
11:15
11:30
Fill Availability
Add Availability
Delete Availability
Available
Not Available
Other Location
Office Closed
OK
Cancel

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" videos.

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 311.
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.

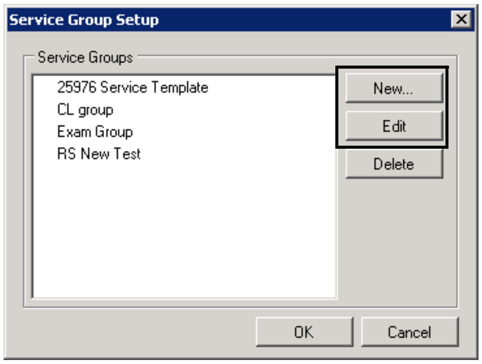
6. Click and drag your mouse cursor over the day and time on which you want to set up the service template and then complete one of the following actions:
   - Right-click the schedule grid and select **Add Template**.
   - Click the **Add Template** button.

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.

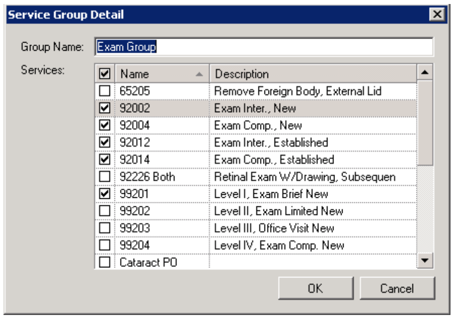


25976 Service Template
CL group
Exam Group
RS New Test

    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 318. - At least one service must be selected to create a service group.

    d. Click **OK** to save the service group.



Group Name: Exam Group

Services:

☑	Name	Description
☐	65205	Remove Foreign Body, External Lid
☑	92002	Exam Inter., New
☑	92004	Exam Comp., New
☑	92012	Exam Inter., Established
☑	92014	Exam Comp., Established
☐	92226 Both	Retinal Exam W/Drawing, Subsequen
☑	99201	Level I, Exam Brief New
☐	99202	Level II, Exam Limited New
☐	99203	Level III, Office Visit New
☐	99204	Level IV, Exam Comp. New
☐	Cataract PO	

    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.

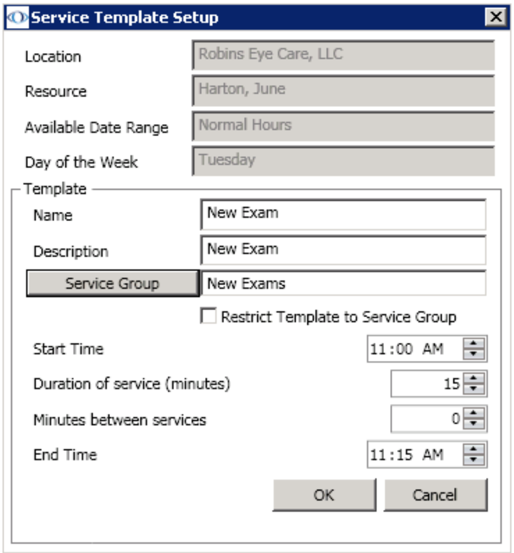
11. In the Template Pattern Setup box, select the check box next to the days of the week in which the services are available.
12. Type or select the **Start** Time.
13. Type or select the number of minutes allocated for the service in the **Duration of service (minutes)** field.

> **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.



Service Template Setup

Location: Robins Eye Care, LLC
Resource: Harton, June
Available Date Range: Normal Hours
Day of the Week: Tuesday

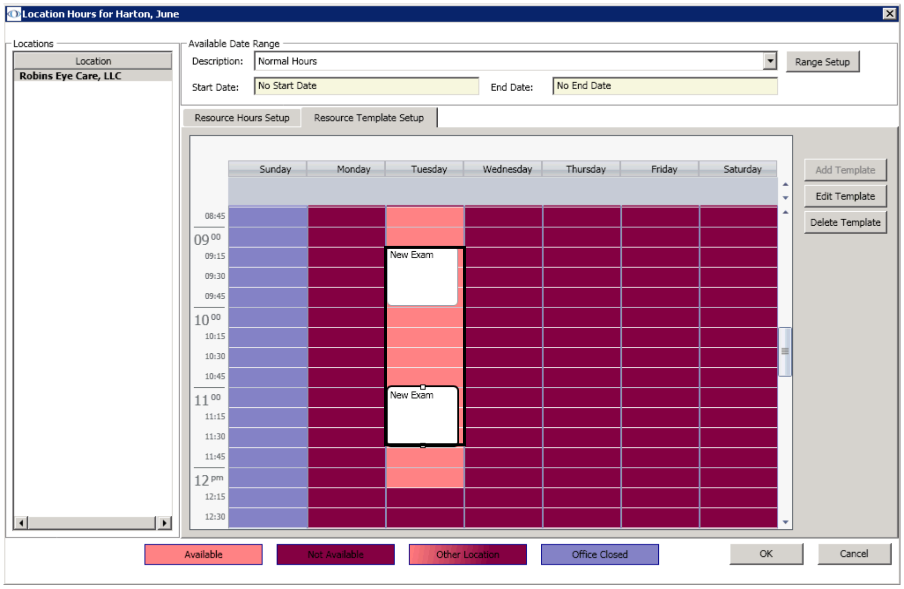
Template
Name: New Exam
Description: New Exam
Service Group: New Exams
☐ Restrict Template to Service Group
Start Time: 11:00 AM
Duration of service (minutes): 15
Minutes between services: 0
End Time: 11:15 AM

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).


Location Hours for Harton, June
Locations
Location
Robins Eye Care, LLC
Available Date Range
Range Setup
Resource Hours Setup
Resource Template Setup
Sunday
Monday
Tuesday
Wednesday
Thursday
Friday
Saturday
08:45
09 00
09:15
09:30
09:45
10 00
10:15
10:30
10:45
11 00
11:15
11:30
11:45
12 pm
12:15
12:30
New Exam
New Exam
Add Template
Edit Template
Delete Template
Available
Not Available
Other Location
Office Closed
OK
Cancel

Description: Normal Hours
Start Date: No Start Date
End Date: No End Date

For information on setting up provider and resource exceptions, watch the “Provider Exceptions” video.

▶ To set up & edit provider & resource exceptions

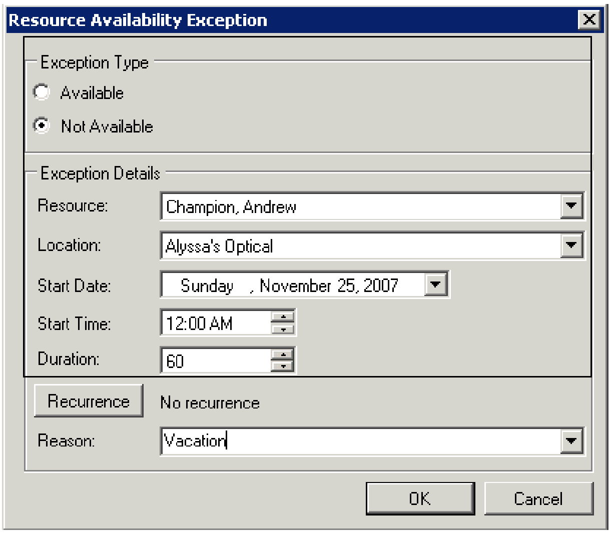
NOTES

- 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 319.
- 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 316.
- 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 311.
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.

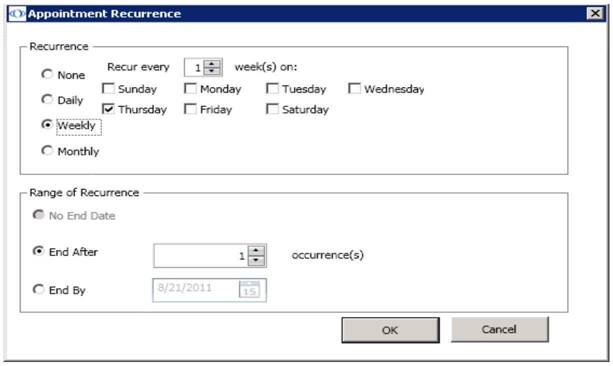

Resource Availability Exception
Exception Type
Exception Details
Recurrence
OK
Cancel

○ Available
● Not Available
Resource: Champion, Andrew
Location: Alyssa's Optical
Start Date: Sunday , November 25, 2007
Start Time: 12:00 AM
Duration: 60
No recurrence
Reason: Vacation

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**.


Appointment Recurrence
Recurrence
Range of Recurrence
OK
Cancel

○ None
○ Daily
● Weekly
○ Monthly
Recur every 1 week(s) on:
☐ Sunday ☐ Monday ☐ Tuesday ☐ Wednesday
☑ Thursday ☐ Friday ☐ Saturday
○ No End Date
● End After 1 occurrence(s)
○ End By 8/21/2011

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

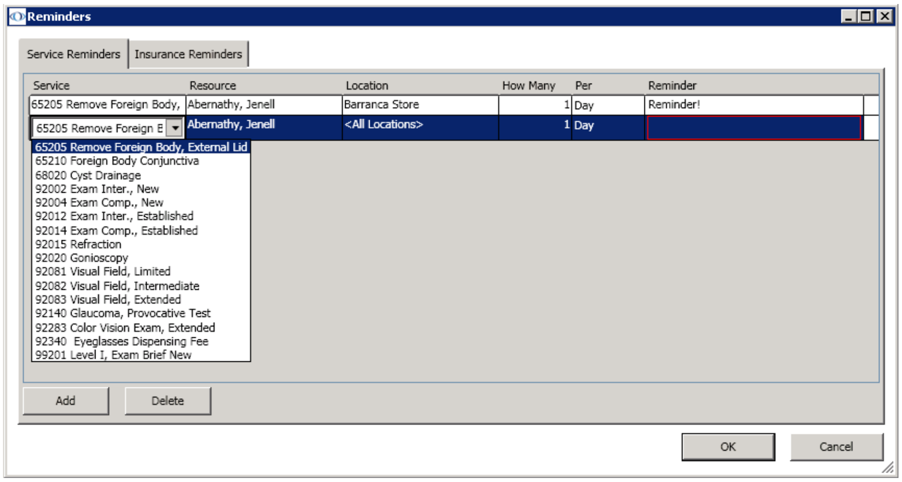
Set up service reminders to restrict scheduling appointments for patients who are scheduling a specific service. If you set up your preferences to allow overrides for service warnings, you will still be able to schedule appointments despite any service reminders and restrictions. For more information on allowing overrides, go to To set up preferences on page 316.

1. Open the Appointment Scheduler. For more information on opening the Appointment Scheduler, go to Opening & Viewing the Appointment Scheduler on page 311.
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.


Reminders
Service Reminders
Insurance Reminders
65205 Remove Foreign Body, External Lid
65210 Foreign Body Conjunctiva
68020 Cyst Drainage
92002 Exam Inter., New
92004 Exam Comp., New
92012 Exam Inter., Established
92014 Exam Comp., Established
92015 Refraction
92020 Gonioscopy
92081 Visual Field, Limited
92082 Visual Field, Intermediate
92083 Visual Field, Extended
92140 Glaucoma, Provocative Test
92283 Color Vision Exam, Extended
92340 Eyeglasses Dispensing Fee
99201 Level I, Exam Brief New
Add
Delete
OK
Cancel

Service	Resource	Location	How Many	Per	Reminder
65205 Remove Foreign Body,	Abernathy, Jenell	Barranca Store	1	Day	Reminder!
65205 Remove Foreign E	Abernathy, Jenell	<All Locations>	1	Day	

NOTE To add or delete services in OfficeMate, go to To set up services on page 318.

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**.

For information on setting up insurance reminders, watch the “Reminders” video.

To set up insurance reminders

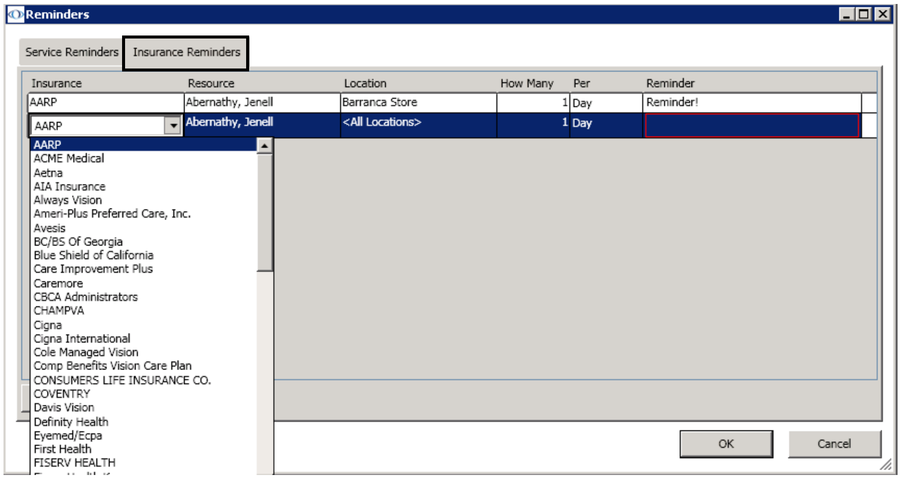
Set up insurance reminders to control the scheduling of appointments for patients who are covered by a specific insurance plan. If you set up your preferences to allow overrides for insurance warnings, you will still be able to schedule appointments despite any insurance reminders and restrictions. For more information on allowing overrides, go to To set up preferences on page 316.

1. Open the Appointment Scheduler. For more information on opening the Appointment Scheduler, go to Opening & Viewing the Appointment Scheduler on page 311.
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.


Reminders
Service Reminders
Insurance Reminders
AARP
ACME Medical
Aetna
AIA Insurance
Always Vision
Ameri-Plus Preferred Care, Inc.
Avesis
BC/BS Of Georgia
Blue Shield of California
Care Improvement Plus
Caremore
CBCA Administrators
CHAMPVA
Cigna
Cigna International
Cole Managed Vision
Comp Benefits Vision Care Plan
CONSUMERS LIFE INSURANCE CO.
COVENTRY
Davis Vision
Definity Health
Eyemed/Ecpa
First Health
FISERV HEALTH
OK
Cancel

Insurance	Resource	Location	How Many	Per	Reminder
AARP	Abernathy, Jenell	Barranca Store	1	Day	Reminder!
AARP	Abernathy, Jenell	<All Locations>	1	Day	

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**.

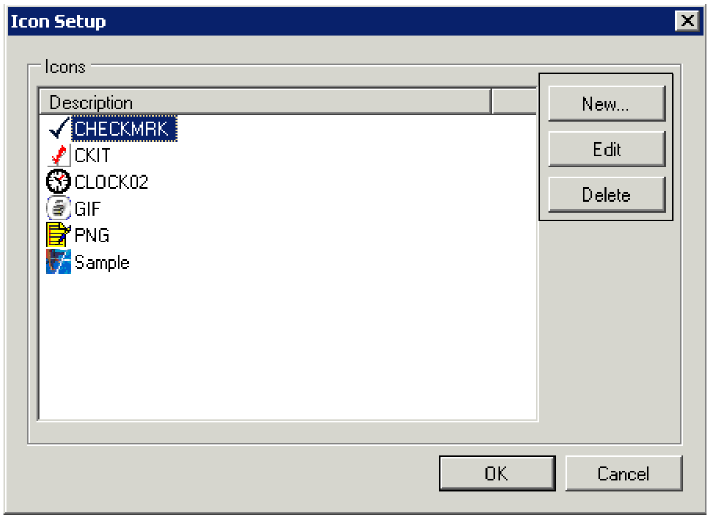
For information on setting up appointment icons, watch the "Appointment Icons" video.

▶ 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 office, patients who need more attention, etc. To assign icons to patient appointments, go to Scheduling Appointments on page 334.

1. Open the Appointment Scheduler. For more information on opening the Appointment Scheduler, go to Opening & Viewing the Appointment Scheduler on page 311.
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, 330
- To find an existing appointment time, 332

▶ 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.

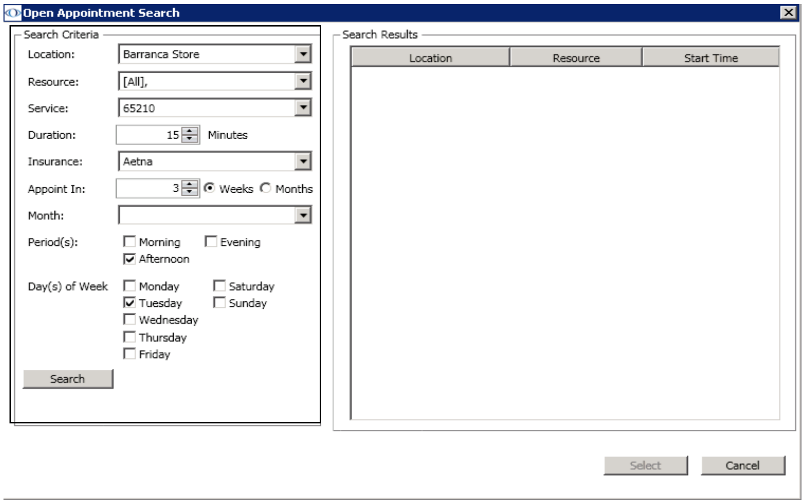
3. Select a resource from the **Resource** drop-down menu.
4. Select a service from the **Service** drop-down menu.

   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 279.

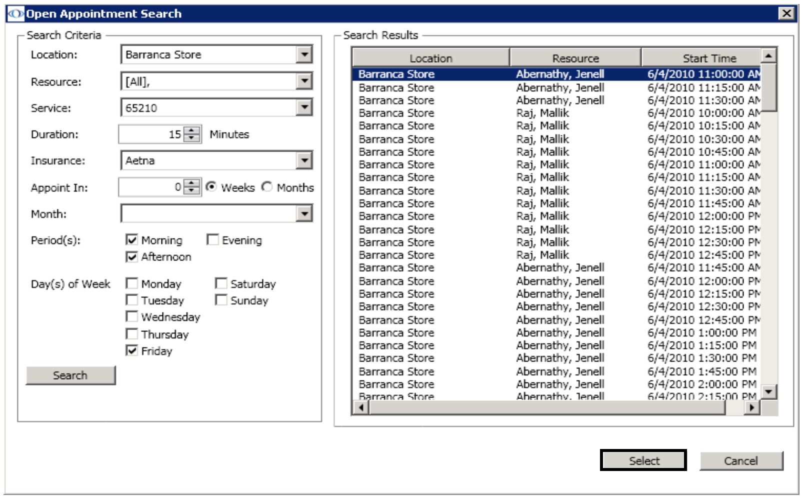
5. If the patient has insurance, select an insurance provider from the **Insurance** drop-down menu.
6. Select one or more of the following search criteria:
   - Number of months or weeks until the appointment will be scheduled in the **Appoint In** text box and the **Weeks** or **Months** radio button.
   - 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.



Location: Barranca Store
Resource: [All],
Service: 65210
Duration: 15 Minutes
Insurance: Aetna
Appoint In: 3 ● Weeks ○ Months
Month:
Period(s): ☐ Morning ☐ Evening ☑ Afternoon
Day(s) of Week ☐ Monday ☑ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday ☐ Saturday ☐ Sunday

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 334.



Search Criteria

Location: Barranca Store
Resource: [All],
Service: 65210
Duration: 15 Minutes
Insurance: Aetna
Appoint In: 0 ● Weeks ○ Months
Month:
Period(s): ☑ Morning ☐ Evening ☑ Afternoon
Day(s) of Week: ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☑ Friday ☐ Saturday ☐ Sunday

Search Results

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**.

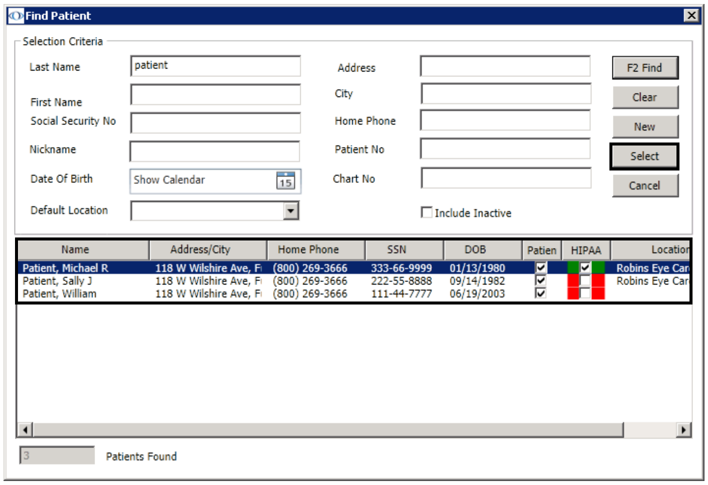
   The Find Existing Appointments window opens.

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.



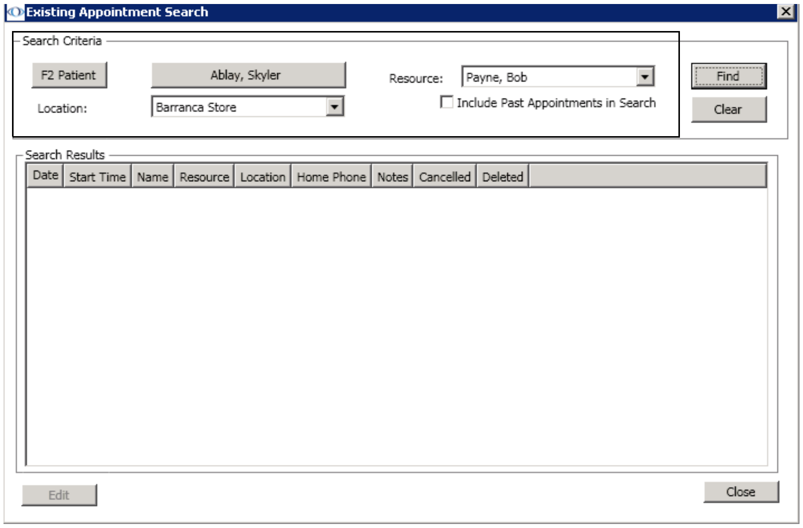
Selection Criteria

Last Name: patient
First Name:
Social Security No:
Nickname:
Date Of Birth:
Default Location:
Address:
City:
Home Phone:
Patient No:
Chart No:
☐ Include Inactive

Name	Address/City	Home Phone	SSN	DOB	Patien	HIPAA	Locatio
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	☑	🟥 ☐ 🟥	

3 Patients Found

3. Select appropriate search criteria from the **Search Criteria** box.


Existing Appointment Search
Search Criteria
F2 Patient
Find
Clear
Search Results
Date
Start Time
Name
Resource
Location
Home Phone
Notes
Cancelled
Deleted
Edit
Close

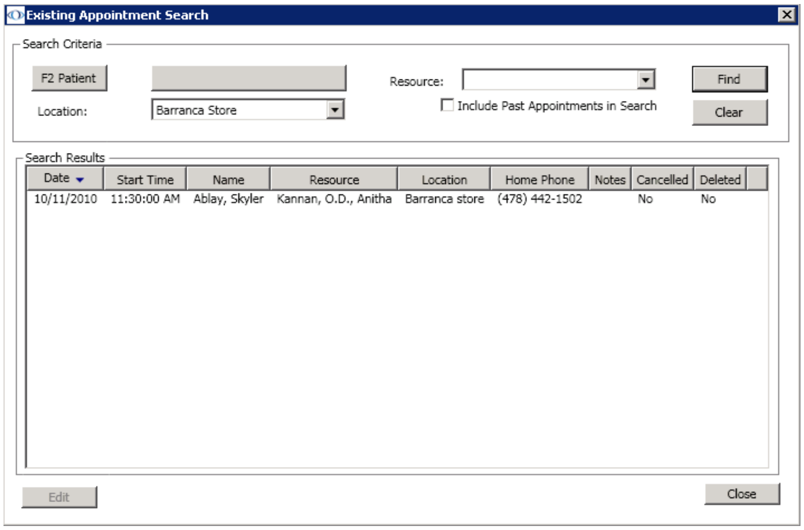
Ablay, Skyler

Resource: Payne, Bob

Location: Barranca Store

☐ Include Past Appointments in Search

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 341.


Existing Appointment Search
Search Criteria
F2 Patient
Find
Clear
Search Results
Edit
Close

Resource:

Location: Barranca Store

☐ Include Past Appointments in Search

Date	Start Time	Name	Resource	Location	Home Phone	Notes	Cancelled	Deleted
10/11/2010	11:30:00 AM	Ablay, Skyler	Kannan, O.D., Anitha	Barranca store	(478) 442-1502		No	No

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, 334
- To modify scheduled appointments, 341

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 315. • Click **Refresh** to refresh the Appointment Scheduler with the most up-to-date appointment information.

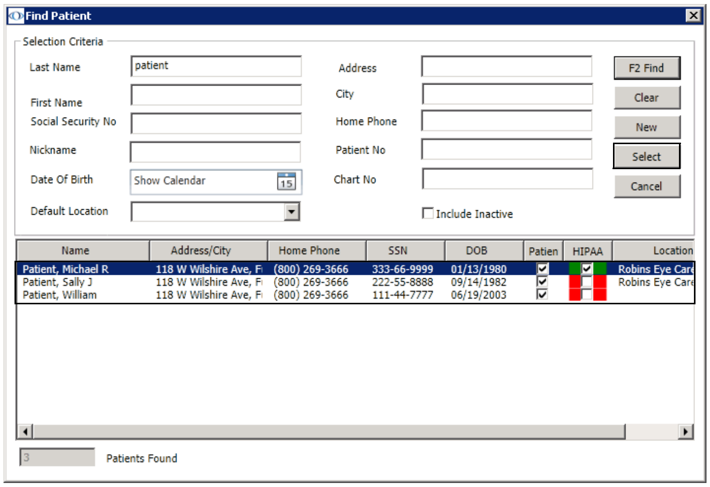
For information on scheduling appointments, watch the "OfficeMate Scheduler 'Go'" videos.

▶ 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 311.
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 205 to record the patient's demographic and insurance information and record patient notes. For more information on adding new patients to OfficeMate in the Appointment Scheduler, watch the "Demographics" and "New Patient" videos.

c. Select a patient and click **Select** or double-click on the patient.



Last Name: patient
First Name:
Social Security No:
Nickname:
Date Of Birth: Show Calendar
Default Location:
Address:
City:
Home Phone:
Patient No:
Chart No:
☐ 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	☑	🟩☑🟩	Robins Eye Care
Patient, Sally J	118 W Wilshire Ave, F	(800) 269-3666	222-55-8888	09/14/1982	☑	🟥☐🟥	Robins Eye Care
Patient, William	118 W Wilshire Ave, F	(800) 269-3666	111-44-7777	06/19/2003	☑	🟥☐🟥	

3 Patients Found

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 205 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 330

   OR

   Click and drag your mouse cursor over an available timeslot on the time grid.

NOTES

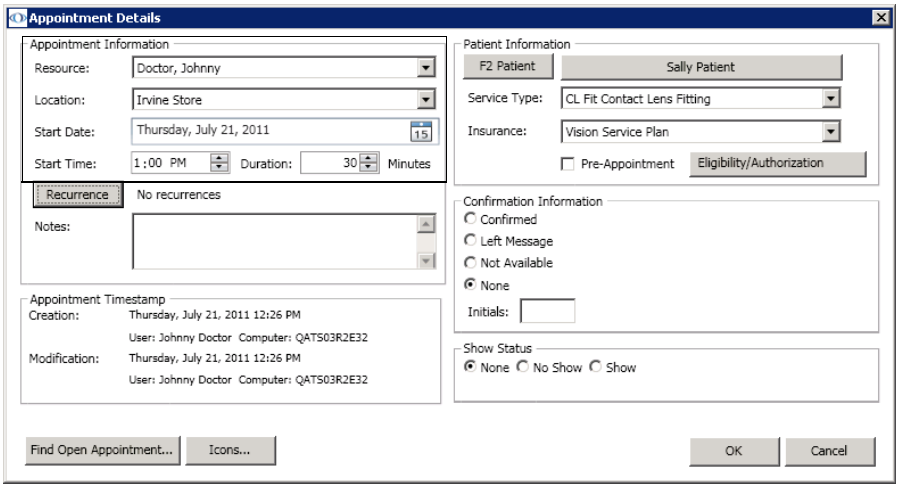
- To quickly advance the Appointment Scheduler to a future month, type the number of months that you want to advance the Appointment Scheduler in the text box next to the **Advance (Months)** button in the Navigation Calendar and then click the **Advance (Months)** button.
- To view today's Appointment Scheduler, click the **Today** button in the Navigation Calendar.

4. 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.
5. Select a resource from the **Resource** drop-down menu, if the correct resource is not already selected.
6. Select a location from the **Location** drop-down menu, if the correct location is not already selected.
7. Type or select a start date for the appointment from the **Start Date** drop-down menu.
8. Type or select a starting time for the appointment from the **Start Time** text box.
9. Type or select the duration of the appointment (in minutes) in the **Duration** text box.



Appointment Information
Resource: Doctor, Johnny
Location: Irvine Store
Start Date: Thursday, July 21, 2011
Start Time: 1:00 PM
Duration: 30 Minutes
No recurrences

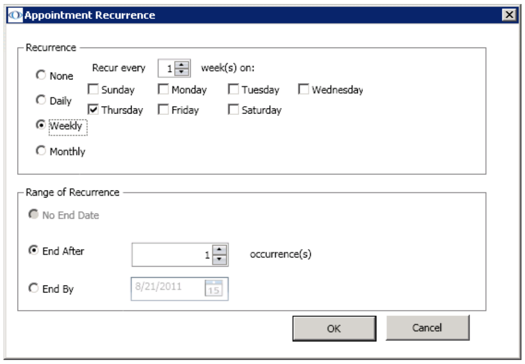
Appointment Timestamp
Creation: Thursday, July 21, 2011 12:26 PM
User: Johnny Doctor Computer: QATS03R2E32
Modification: Thursday, July 21, 2011 12:26 PM
User: Johnny Doctor Computer: QATS03R2E32

Patient Information
Sally Patient
Service Type: CL Fit Contact Lens Fitting
Insurance: Vision Service Plan
☐ Pre-Appointment

Confirmation Information
○ Confirmed
○ Left Message
○ Not Available
● None
Initials:

Show Status
● None ○ No Show ○ Show

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
Range of Recurrence
OK
Cancel

○ None
○ Daily
● Weekly
○ Monthly

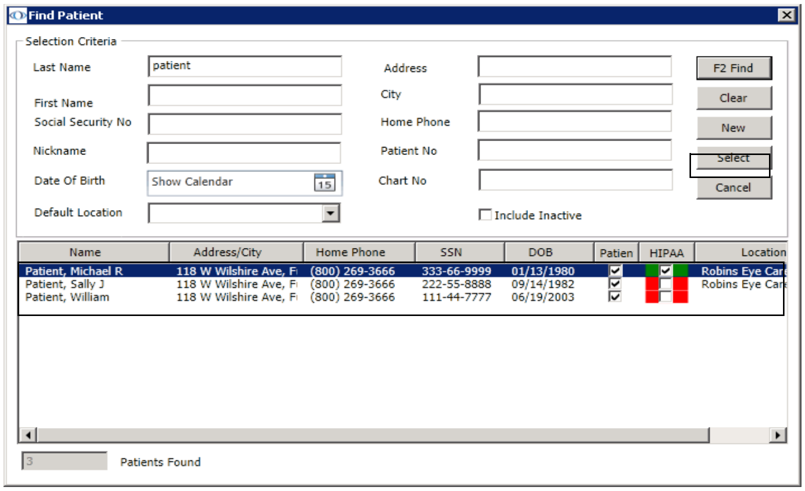
Recur every 1 week(s) on:
☐ Sunday ☐ Monday ☐ Tuesday ☐ Wednesday
☑ Thursday ☐ Friday ☐ Saturday

○ No End Date
● End After 1 occurrence(s)
○ End By 8/21/2011

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 205 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
Address
City
Home Phone
Patient No
Chart No
First Name
Social Security No
Nickname
Default Location
F2 Find
Clear
New
Select
Cancel

Last Name: patient
Date Of Birth: Show Calendar
☐ Include Inactive

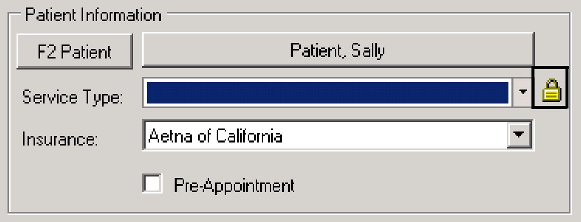
Name	Address/City	Home Phone	SSN	DOB	Patien	HIPAA	Location
Patient, Michael R	118 W Wilshire Ave, F	(800) 269-3666	333-66-9999	01/13/1980	☑	🟩☑🟩	Robins Eye Car
Patient, Sally J	118 W Wilshire Ave, F	(800) 269-3666	222-55-8888	09/14/1982	☑	🟥☐🟥	Robins Eye Car
Patient, William	118 W Wilshire Ave, F	(800) 269-3666	111-44-7777	06/19/2003	☑	🟥☐🟥	

3 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 318.
- 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.

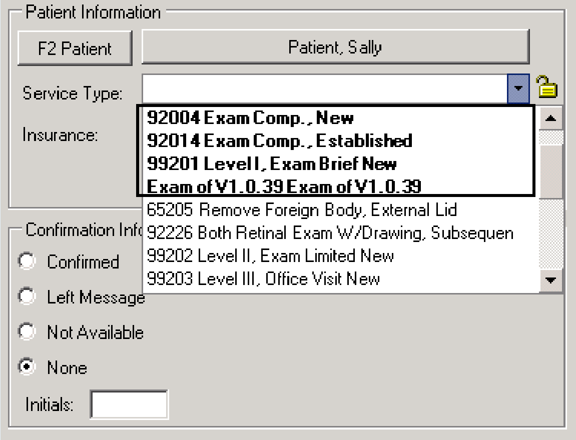

Patient Information
F2 Patient
Service Type:
Insurance:
Pre-Appointment

Patient, Sally

Insurance: Aetna of California

☐ Pre-Appointment

- 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.


Patient Information
F2 Patient
Service Type:
Insurance:
Confirmation Info
Initials:

Patient, Sally

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
99203 Level III, Office Visit New

○ Confirmed
○ Left Message
○ Not Available
● None

- For information about creating and modifying appointment templates, go to To set up service templates on page 321.

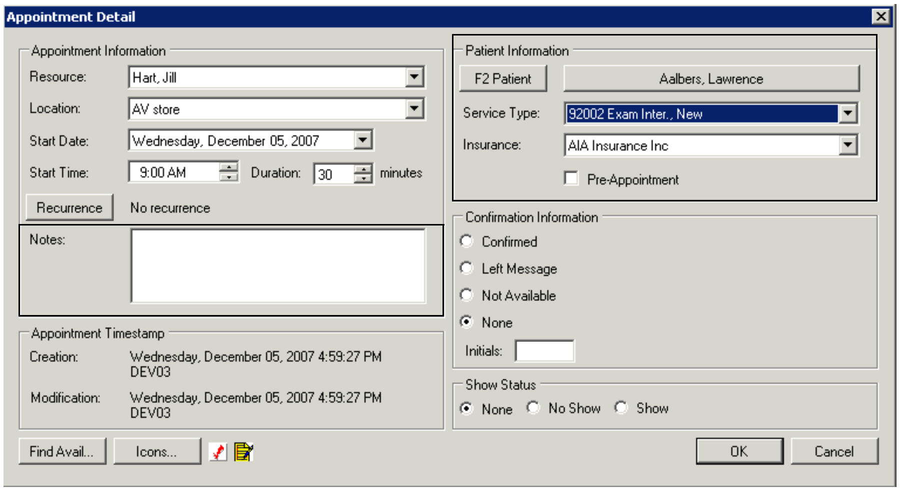
14. If the patient has insurance, select the patient’s insurance provider from the **Insurance** drop-down menu.

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 532.

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.

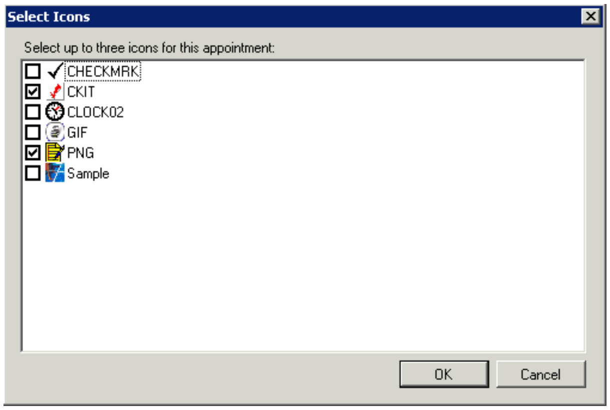

Appointment Detail
Appointment Information
Recurrence
Notes:
Appointment Timestamp
Patient Information
F2 Patient
Confirmation Information
Show Status
Find Avail...
Icons...
OK
Cancel

Resource: Hart, Jill
Location: AV store
Start Date: Wednesday, December 05, 2007
Start Time: 9:00 AM Duration: 30 minutes
No recurrence
Creation: Wednesday, December 05, 2007 4:59:27 PM DEV03
Modification: Wednesday, December 05, 2007 4:59:27 PM DEV03
Aalbers, Lawrence
Service Type: 92002 Exam Inter., New
Insurance: AIA Insurance Inc
☐ Pre-Appointment
○ Confirmed
○ Left Message
○ Not Available
● None
Initials:
● None ○ No Show ○ Show

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 330 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 329.



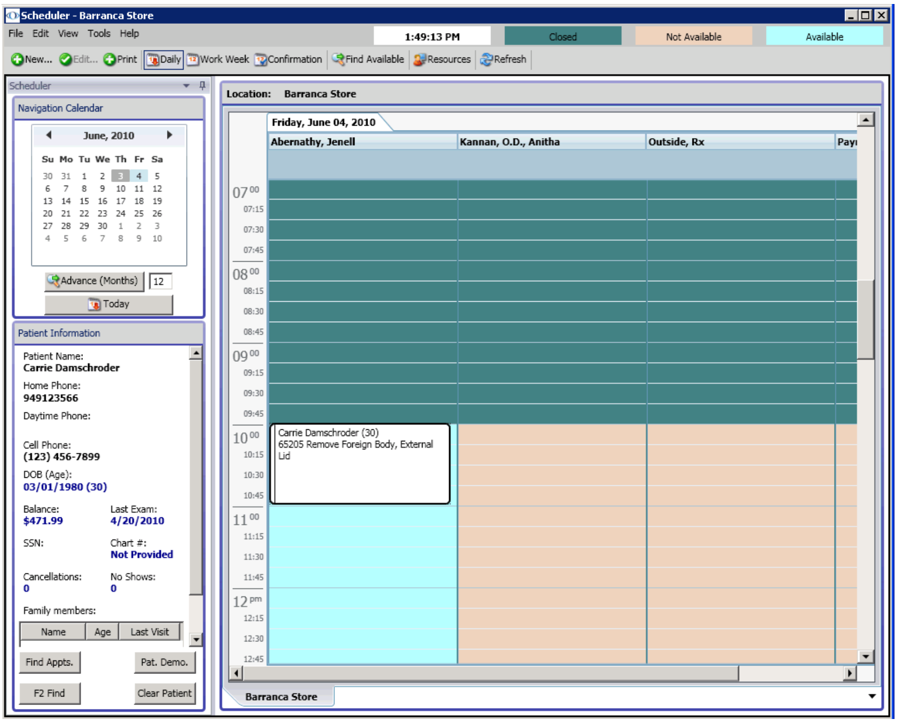
Select Icons

Select up to three icons for this appointment:

☐ CHECKMRK
☑ CKIT
☐ CLOCK02
☐ GIF
☑ PNG
☐ Sample

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.


Scheduler - Barranca Store
File Edit View Tools Help
1:49:13 PM
Closed
Not Available
Available
New...
Edit...
Print
Daily
Work Week
Confirmation
Find Available
Resources
Refresh
Scheduler
Navigation Calendar
June, 2010
Advance (Months)
12
Today
Patient Information
Family members:
Name
Age
Last Visit
Find Appts.
Pat. Demo.
F2 Find
Clear Patient
Location: Barranca Store
Friday, June 04, 2010
Abernathy, Jenell
Kannan, O.D., Anitha
Outside, Rx
Barranca Store

Patient Name: Carrie Damschroder
Home Phone: 949123566
Daytime Phone:
Cell Phone: (123) 456-7899
DOB (Age): 03/01/1980 (30)
Balance: $471.99
Last Exam: 4/20/2010
SSN:
Chart #: Not Provided
Cancellations: 0
No Shows: 0

Carrie Damschroder (30)
65205 Remove Foreign Body, External Lid

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.

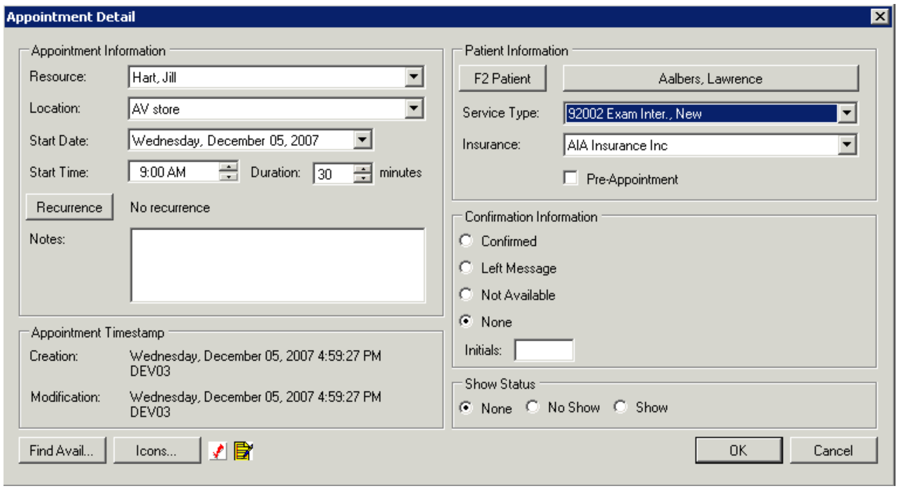
For information on modifying appointments, watch the "OfficeMate Scheduler 'Go'" videos.

▶ 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 311.
2. Find an existing appointment. For more information on finding an existing appointment, go to To find an existing appointment time on page 332.

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 334.



Appointment Information
Resource: Hart, Jill
Location: AV store
Start Date: Wednesday, December 05, 2007
Start Time: 9:00 AM
Duration: 30 minutes
Recurrence: No recurrence
Notes:

Appointment Timestamp
Creation: Wednesday, December 05, 2007 4:59:27 PM DEV03
Modification: Wednesday, December 05, 2007 4:59:27 PM DEV03

Patient Information
F2 Patient: Aalbers, Lawrence
Service Type: 92002 Exam Inter., New
Insurance: AIA Insurance Inc
☐ Pre-Appointment

Confirmation Information
○ Confirmed
○ Left Message
○ Not Available
● None
Initials:

Show Status
● None ○ No Show ○ Show

Recording Patients Shows and No Shows

For information on recording no shows, watch the “OfficeMate Scheduler ‘Go’” videos.

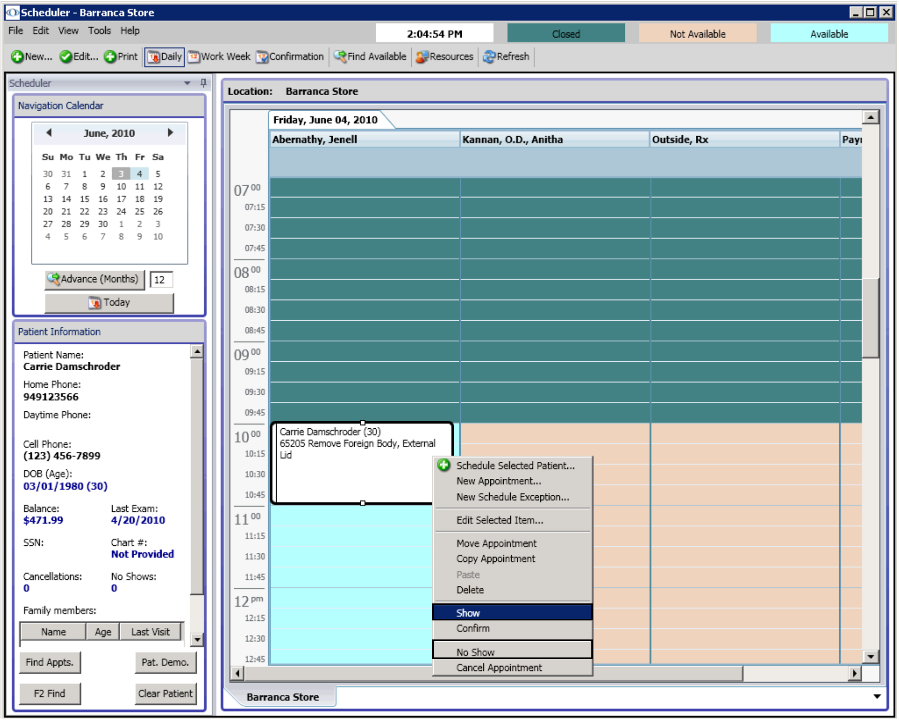
NOTE To print a report of all no show appointments, go to Cancellations And No Shows on page 642.

1. Open the Appointment Scheduler. For more information on opening the Appointment Scheduler, go to Opening & Viewing the Appointment Scheduler on page 311.
2. Find an existing appointment. For more information on finding an existing appointment, go to To find an existing appointment time on page 332.

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.


Scheduler - Barranca Store
File Edit View Tools Help
2:04:54 PM
Closed
Not Available
Available
New... Edit... Print Daily Work Week Confirmation Find Available Resources Refresh
Scheduler
Navigation Calendar
June, 2010
Advance (Months) 12
Today
Patient Information
Family members:
Name Age Last Visit
Find Appts. Pat. Demo.
F2 Find Clear Patient
Location: Barranca Store
Friday, June 04, 2010
Abernathy, Jenell
Kannan, O.D., Anitha
Outside, Rx
Schedule Selected Patient...
New Appointment...
New Schedule Exception...
Edit Selected Item...
Move Appointment
Copy Appointment
Paste
Delete
Show
Confirm
No Show
Cancel Appointment
Barranca Store

Patient Name: **Carrie Damschroder**
Home Phone: **949123566**
Daytime Phone:
Cell Phone: **(123) 456-7899**
DOB (Age): **03/01/1980 (30)**
Balance: **$471.99**
Last Exam: **4/20/2010**
SSN:
Chart #: **Not Provided**
Cancellations: **0**
No Shows: **0**

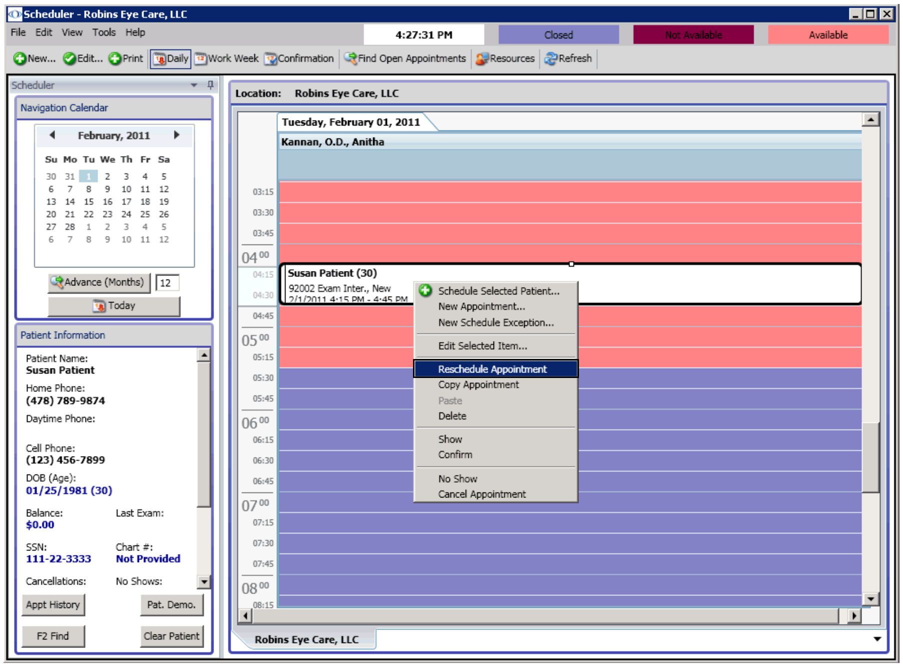
Carrie Damschroder (30)
65205 Remove Foreign Body, External Lid

Rescheduling Appointments

1. Open the Appointment Scheduler. For more information on opening the Appointment Scheduler, go to Opening & Viewing the Appointment Scheduler on page 311.
2. Find an existing appointment. For more information on finding an existing appointment, go to To find an existing appointment time on page 332.

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.


Scheduler - Robins Eye Care, LLC
File Edit View Tools Help
4:27:31 PM
Closed
Not Available
Available
New... Edit... Print Daily Work Week Confirmation Find Open Appointments Resources Refresh
Scheduler
Navigation Calendar
February, 2011
Advance (Months) 12
Today
Patient Information
Location: Robins Eye Care, LLC
Tuesday, February 01, 2011
Kannan, O.D., Anitha
Schedule Selected Patient...
New Appointment...
New Schedule Exception...
Edit Selected Item...
Reschedule Appointment
Copy Appointment
Paste
Delete
Show
Confirm
No Show
Cancel Appointment
Appt History
Pat. Demo.
F2 Find
Clear Patient
Robins Eye Care, LLC

Susan Patient (30)
92002 Exam Inter., New
2/1/2011 4:15 PM - 4:45 PM

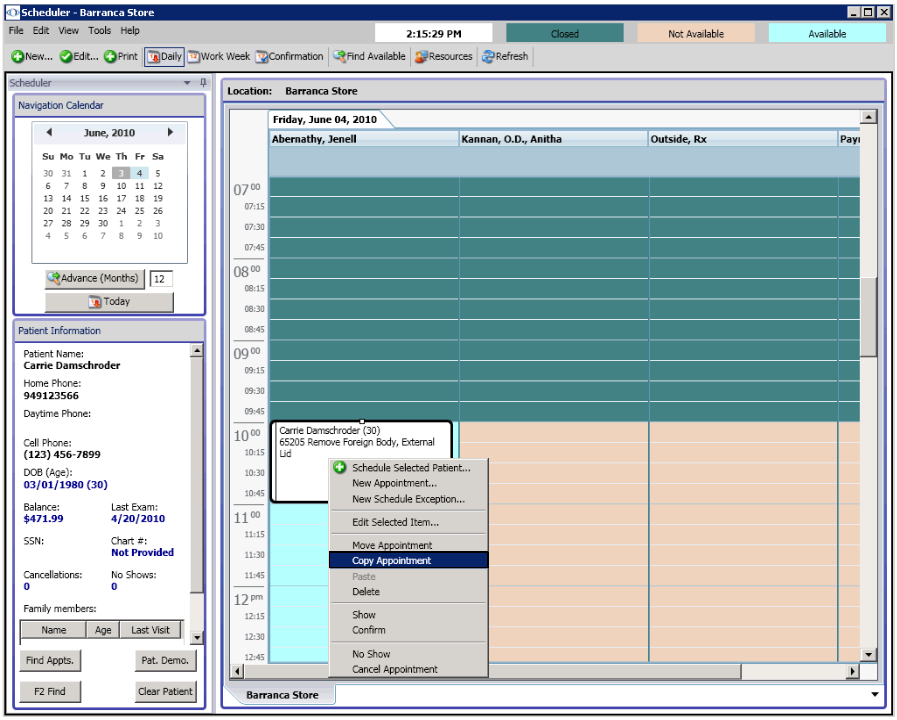
Patient Name: Susan Patient
Home Phone: (478) 789-9874
Daytime Phone:
Cell Phone: (123) 456-7899
DOB (Age): 01/25/1981 (30)
Balance: $0.00
Last Exam:
SSN: 111-22-3333
Chart #: Not Provided
Cancellations:
No Shows:

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 311.
2. Find an existing appointment. For more information on finding an existing appointment, go to To find an existing appointment time on page 332.

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**.


Scheduler - Barranca Store
File Edit View Tools Help
2:15:29 PM
Closed
Not Available
Available
New... Edit... Print Daily Work Week Confirmation Find Available Resources Refresh
Scheduler
Navigation Calendar
June, 2010
Su Mo Tu We Th Fr Sa
Advance (Months) 12
Today
Patient Information
Location: Barranca Store
Friday, June 04, 2010
Abernathy, Jenell
Kannan, O.D., Anitha
Outside, Rx
Schedule Selected Patient...
New Appointment...
New Schedule Exception...
Edit Selected Item...
Move Appointment
Copy Appointment
Paste
Delete
Show
Confirm
No Show
Cancel Appointment
Family members:
Name Age Last Visit
Find Appts.
Pat. Demo.
F2 Find
Clear Patient
Barranca Store

Patient Name:
Carrie Damschroder

Home Phone:
949123566

Daytime Phone:

Cell Phone:
(123) 456-7899

DOB (Age):
03/01/1980 (30)

Balance: $471.99
Last Exam: 4/20/2010
SSN:
Chart #: Not Provided
Cancellations: 0
No Shows: 0

Carrie Damschroder (30)
65205 Remove Foreign Body, External Lid

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

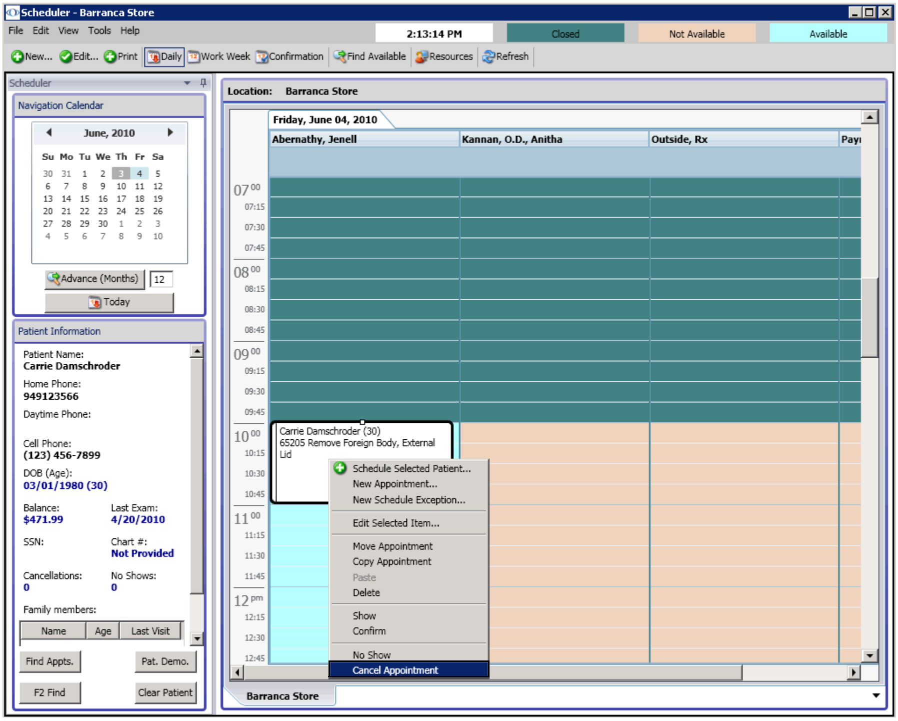
NOTES

- To print a report of all canceled appointments, go to Cancellations And No Shows on page 642.
- 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 346.

For information on canceling appointments, watch the "OfficeMate Scheduler 'Go'" videos.

1. Open the Appointment Scheduler. For more information on opening the Appointment Scheduler, go to Opening & Viewing the Appointment Scheduler on page 311.
2. Find an existing appointment. For more information on finding an existing appointment, go to To find an existing appointment time on page 332.

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**.


Scheduler - Barranca Store
File Edit View Tools Help
2:13:14 PM
Closed
Not Available
Available
New... Edit... Print Daily Work Week Confirmation Find Available Resources Refresh
Scheduler
Navigation Calendar
June, 2010
Su Mo Tu We Th Fr Sa
Advance (Months) 12
Today
Patient Information
Find Appts. Pat. Demo.
F2 Find Clear Patient
Location: Barranca Store
Friday, June 04, 2010
Abernathy, Jenell
Kannan, O.D., Anitha
Outside, Rx
07 00
08 00
09 00
10 00
11 00
12 pm
Schedule Selected Patient...
New Appointment...
New Schedule Exception...
Edit Selected Item...
Move Appointment
Copy Appointment
Paste
Delete
Show
Confirm
No Show
Cancel Appointment
Barranca Store

Patient Name:
Carrie Damschroder

Home Phone:
949123566

Daytime Phone:

Cell Phone:
(123) 456-7899

DOB (Age):
03/01/1980 (30)

Balance: **$471.99**
Last Exam: **4/20/2010**

SSN:
Chart #: **Not Provided**

Cancellations: **0**
No Shows: **0**

Family members:

Name	Age	Last Visit

Carrie Damschroder (30)
65205 Remove Foreign Body, External Lid

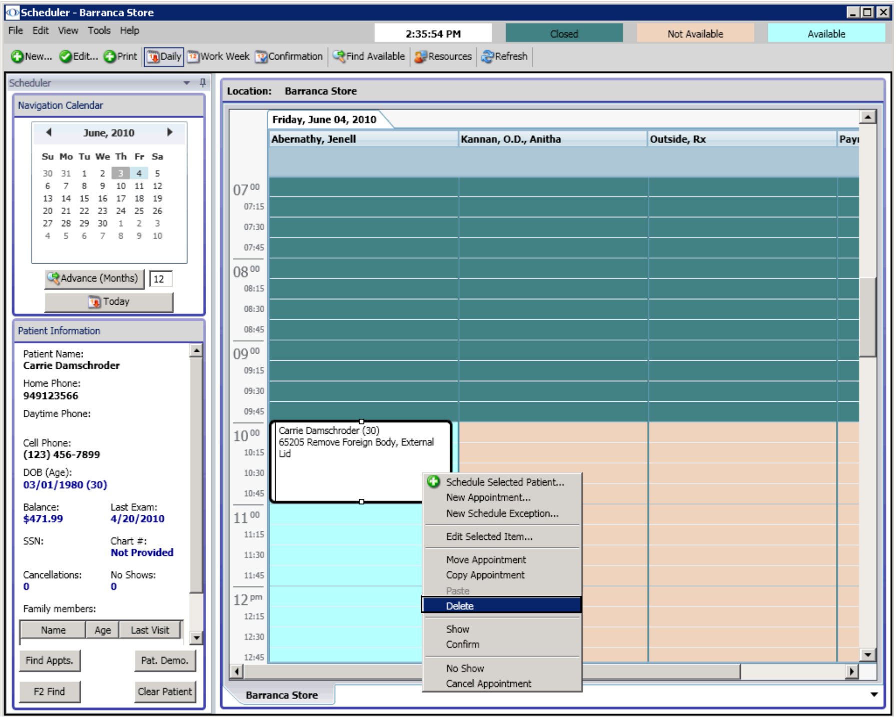
4. Click **OK** to cancel the appointment.

Deleting Appointments

NOTE Deleted appointments are *not* tracked in OfficeMate. If you want to track appointments that you are removing from the Appointment Scheduler, to go Canceling Appointments on page 345.

1. Open the Appointment Scheduler. For more information on opening the Appointment Scheduler, go to Opening & Viewing the Appointment Scheduler on page 311.
2. Find an existing appointment. For more information on finding an existing appointment, go to To find an existing appointment time on page 332.

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**.


Scheduler - Barranca Store
File Edit View Tools Help
2:35:54 PM
Closed
Not Available
Available
New...
Edit...
Print
Daily
Work Week
Confirmation
Find Available
Resources
Refresh
Scheduler
Navigation Calendar
June, 2010
Su Mo Tu We Th Fr Sa
Advance (Months)
12
Today
Patient Information
Location:
Barranca Store
Friday, June 04, 2010
Abernathy, Jenell
Kannan, O.D., Anitha
Outside, Rx
Schedule Selected Patient...
New Appointment...
New Schedule Exception...
Edit Selected Item...
Move Appointment
Copy Appointment
Paste
Delete
Show
Confirm
No Show
Cancel Appointment
Name
Age
Last Visit
Find Appts.
Pat. Demo.
F2 Find
Clear Patient
Barranca Store

Patient Name:
Carrie Damschroder
Home Phone:
949123566
Daytime Phone:
Cell Phone:
(123) 456-7899
DOB (Age):
03/01/1980 (30)
Balance: **$471.99**
Last Exam: **4/20/2010**
SSN:
Chart #: **Not Provided**
Cancellations: **0**
No Shows: **0**
Family members:

Carrie Damschroder (30)
65205 Remove Foreign Body, External Lid

4. Click **OK** to delete the appointment.

Confirming Appointments

For information on confirming appointments, watch the "Confirmation Screen" 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 311.

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.

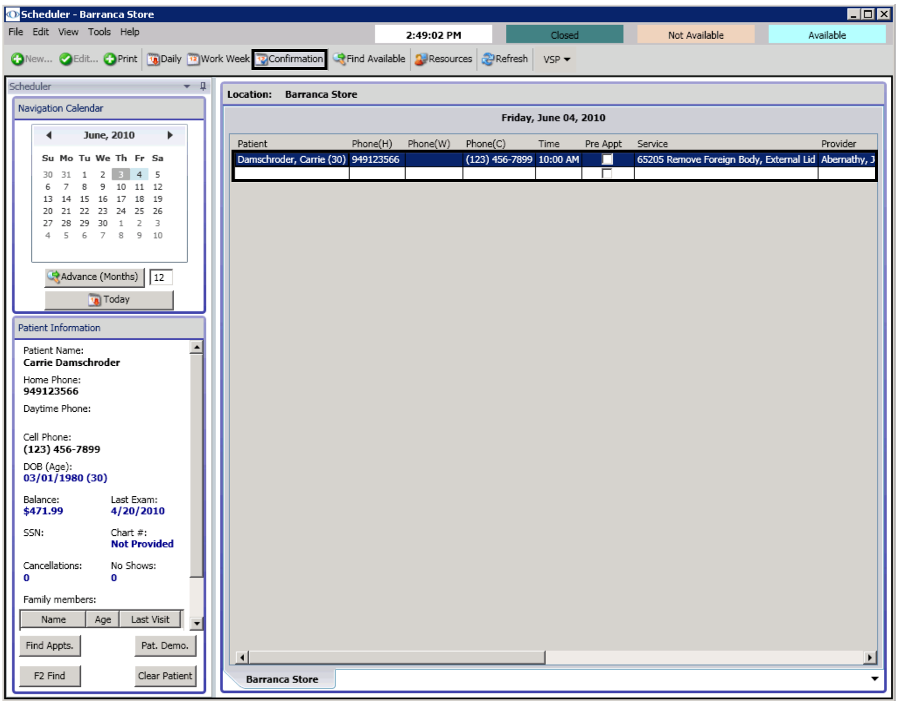
   OR

   Click the **Today** button on the Appointment Scheduler toolbar to view today's appointment schedule.

5. 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**.
6. 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.

7. Call the patients on the printed list and confirm their appointments.
8. 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.


Scheduler - Barranca Store
File Edit View Tools Help
2:49:02 PM
Closed
Not Available
Available
New...
Edit...
Print
Daily
Work Week
Confirmation
Find Available
Resources
Refresh
VSP
Scheduler
Navigation Calendar
June, 2010
Su Mo Tu We Th Fr Sa
Advance (Months)
12
Today
Patient Information
Find Appts.
Pat. Demo.
F2 Find
Clear Patient
Barranca Store

Location: Barranca Store

Friday, June 04, 2010

Patient	Phone(H)	Phone(W)	Phone(C)	Time	Pre Appt	Service	Provider
Damschroder, Carrie (30)	949123566		(123) 456-7899	10:00 AM	☐	65205 Remove Foreign Body, External Lid	Abernathy, J
					☐		

Patient Name:
Carrie Damschroder
Home Phone:
949123566
Daytime Phone:
Cell Phone:
(123) 456-7899
DOB (Age):
03/01/1980 (30)
Balance:
$471.99
Last Exam:
4/20/2010
SSN:
Chart #:
Not Provided
Cancellations:
0
No Shows:
0
Family members:

Name	Age	Last Visit

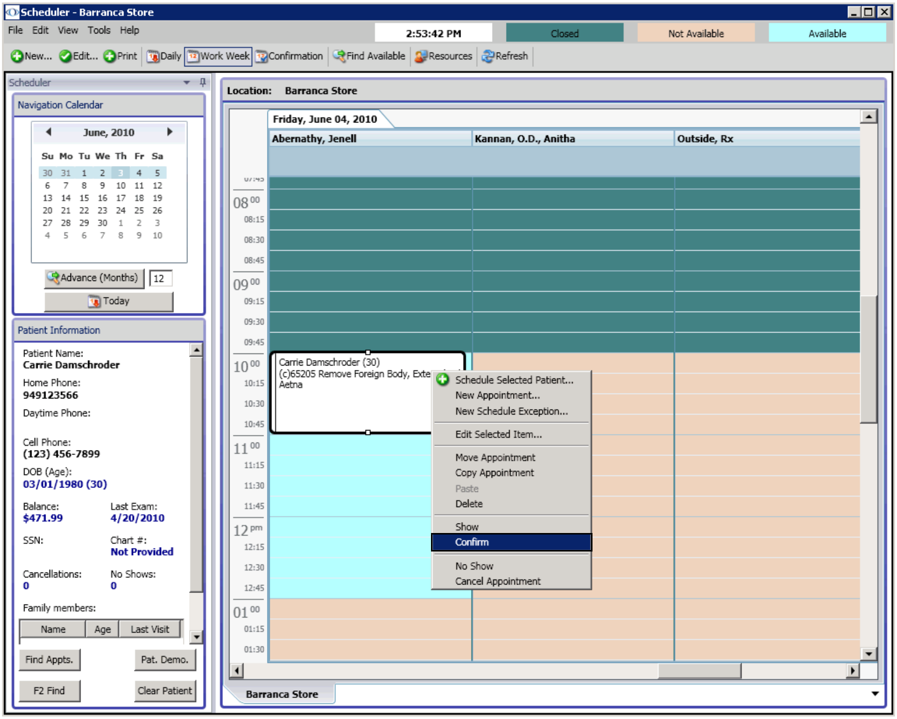
9. Type your initials in the **Init.** text box.
10. Type notes in the **Notes** text box, if necessary.
11. To verify a patient's insurance eligibility, double-click the row in which the patient's name appears.

    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 217. 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 332.
    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.


Scheduler - Barranca Store
File Edit View Tools Help
2:53:42 PM
Closed
Not Available
Available
New... Edit... Print Daily Work Week Confirmation Find Available Resources Refresh
Scheduler
Navigation Calendar
June, 2010
Advance (Months) 12
Today
Patient Information
Family members:
Name Age Last Visit
Find Appts. Pat. Demo.
F2 Find Clear Patient
Abernathy, Jenell
Kannan, O.D., Anitha
Outside, Rx
Schedule Selected Patient...
New Appointment...
New Schedule Exception...
Edit Selected Item...
Move Appointment
Copy Appointment
Paste
Delete
Show
Confirm
No Show
Cancel Appointment
Barranca Store

Location: Barranca Store

Friday, June 04, 2010

Carrie Damschroder (30)
(c)65205 Remove Foreign Body, Exte
Aetna

Patient Name: Carrie Damschroder
Home Phone: 949123566
Daytime Phone:
Cell Phone: (123) 456-7899
DOB (Age): 03/01/1980 (30)
Balance: $471.99
Last Exam: 4/20/2010
SSN:
Chart #: Not Provided
Cancellations: 0
No Shows: 0

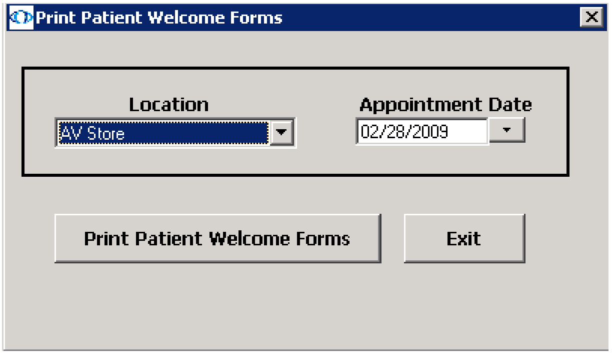
Printing Patient Welcome Forms

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 347.

1. Open the Appointment Scheduler. For more information on opening the Appointment Scheduler, go to Opening & Viewing the Appointment Scheduler on page 311.
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.



Location: AV Store

Appointment Date: 02/28/2009

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

In this chapter:

For information on receipts and adjustments, watch the "Patient Receipts" video.

- Opening a Patient's Receipts & Adjustments, 351
- Applying Payments to Patient Receivables, 352
- Refunding Patient Credits, 360
- Applying Insurance Payments to Any Open Balances, 361
- Applying Insurance Payments to Only Specific Patients, 365
- Recording Insurance Payments Using Electronic Remittance Advice, 368
- Recording Insurance Chargebacks, 381
- Adjusting, Transferring, & Writing Off Charges, 384
- Modifying Payments Using the Receipt History, 403

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.

2. 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 407.

Applying Payments to Patient Receivables

This section tells you how to apply payments to patient receivables, including how

- To apply payments to patient receivables, 352
- To record prepayments, 355
- To pay open items with credit amounts, 357

For information on applying unapplied amounts to patient receivables, watch the “Unapplied Amounts & Credits” video.

If you are using a TMS-integrated device to record payments on patient receivables, see the *Using Total Merchant Services (TMS) with OfficeMate* document for detailed instructions.

For information on recording patient identity and security information, watch the “Red Flags Rule” video.

▶ To apply payments to patient receivables

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 351.
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 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 63. - If you have received a notification that the patient’s identity may have been stolen, go to To record financial information on page 223 to record the notification.

4. Type the payment amount in the **Amount Paid** text box.

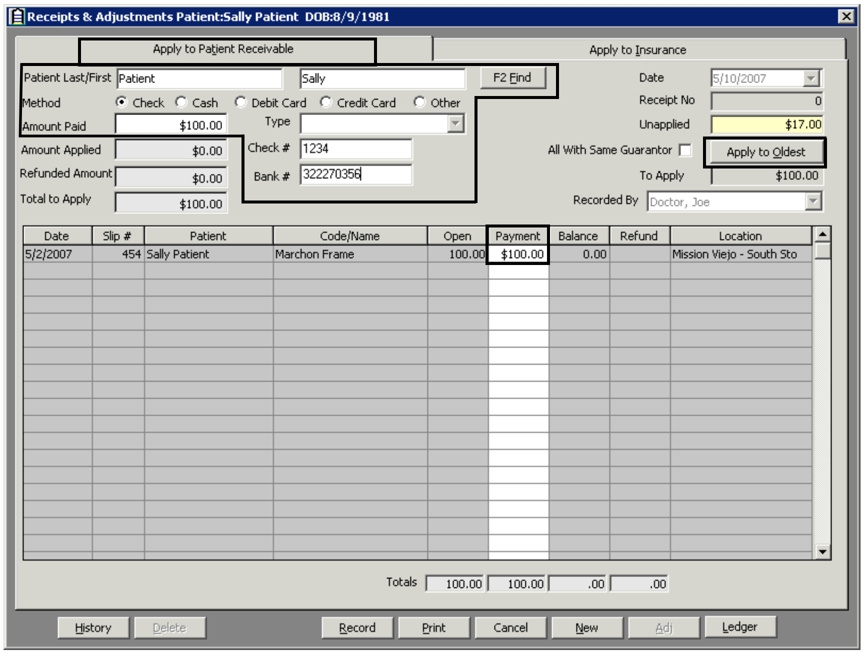
5. Apply the payment amount using one of the following methods:
   - If you are applying a check payment, type the check number for your deposit ticket in the **Check #** text box.
   - If you are applying a cash payment, type the cash amount tendered in the **Tendered** text box. The change amount (if 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.
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 63.

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

Patient Last/First: Patient | Sally

Method: ● Check ○ Cash ○ Debit Card ○ Credit Card ○ Other

Amount Paid: $100.00

Type:

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

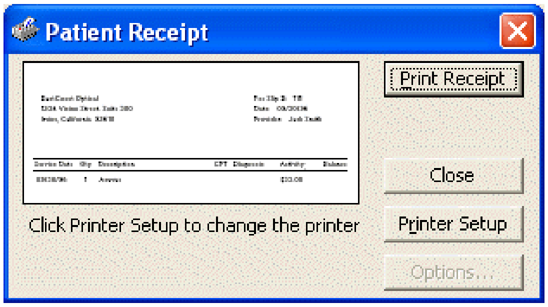
Date	Slip #	Patient	Code/Name	Open	Payment	Balance	Refund	Location
5/2/2007	454	Sally Patient	Marchon Frame	100.00	$100.00	0.00		Mission Viejo - South Sto

Totals: 100.00 | 100.00 | .00 | .00

9. If you want to adjust a charge, go to Adjusting, Transferring, & Writing Off Charges on page 384.
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 403.



Click Printer Setup to change the printer

▶ 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 357. • 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 63.

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 351.
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

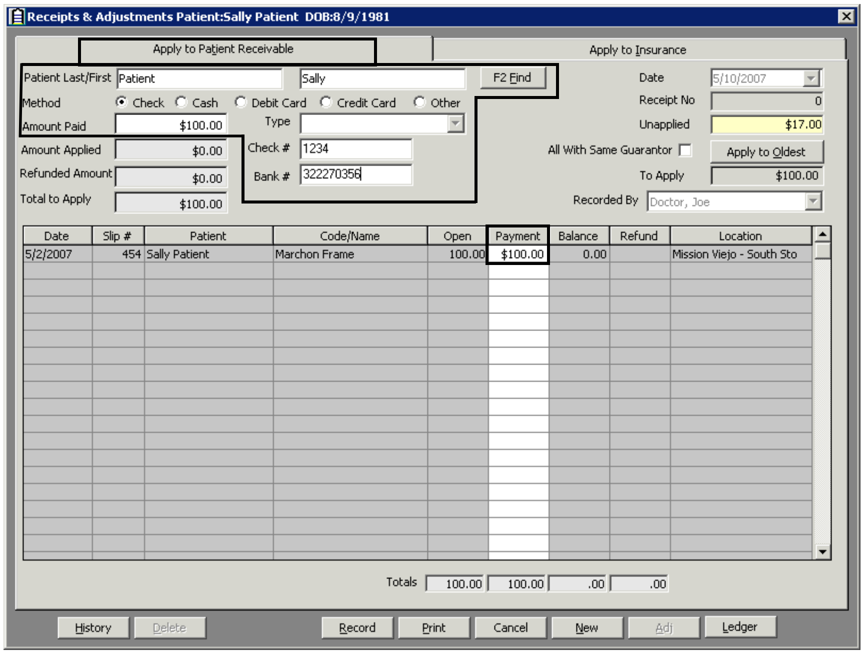
Patient Identification box to indicate whether or not you have verified that the patient's identity matches the types of identification listed.

For information on recording patient identify and security information, watch the "Red Flags Rule" video.

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 63.
- If you have received a notification that the patient's identity may have been stolen, go to To record financial information on page 223 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.


Receipts & Adjustments Patient:Sally Patient DOB:8/9/1981
Apply to Patient Receivable
Apply to Insurance
F2 Find
Apply to Oldest
History
Delete
Record
Print
Cancel
New
Adj
Ledger

Patient Last/First: Patient Sally
Method: ● Check ○ Cash ○ Debit Card ○ Credit Card ○ Other
Amount Paid: $100.00
Type:
Check #: 1234
Bank #: 322270356
Amount Applied: $0.00
Refunded Amount: $0.00
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

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.

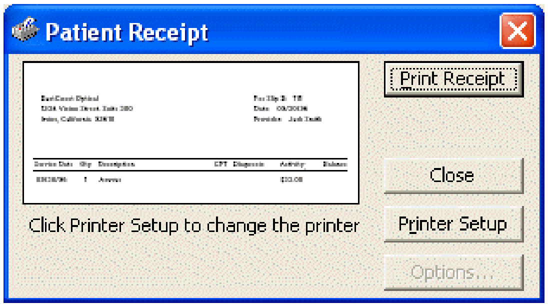
– Click **Printer Setup** to set up the printer or select a printer other than the default printer. For more information on setting up the printer, go to Changing the Posting Date on page 20.

– 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 403.
- View the prepayment in the Receipt History window and on the Patient Receipt History tab in the Patient Ledger window.



Click Printer Setup to change the printer

▶ To pay open items with credit amounts

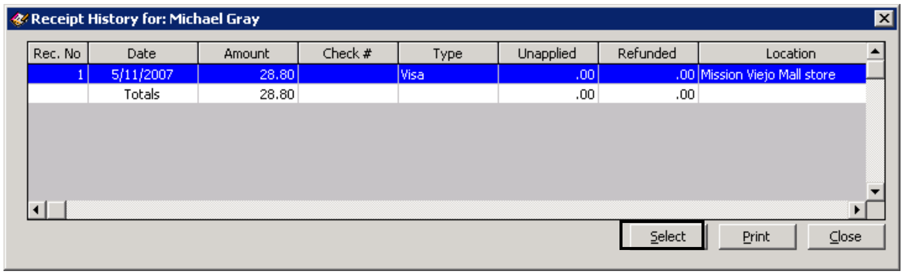
For information on paying open items with credits, watch the "Unapplied Amounts & Credits" video.

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 63.

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 351.
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.

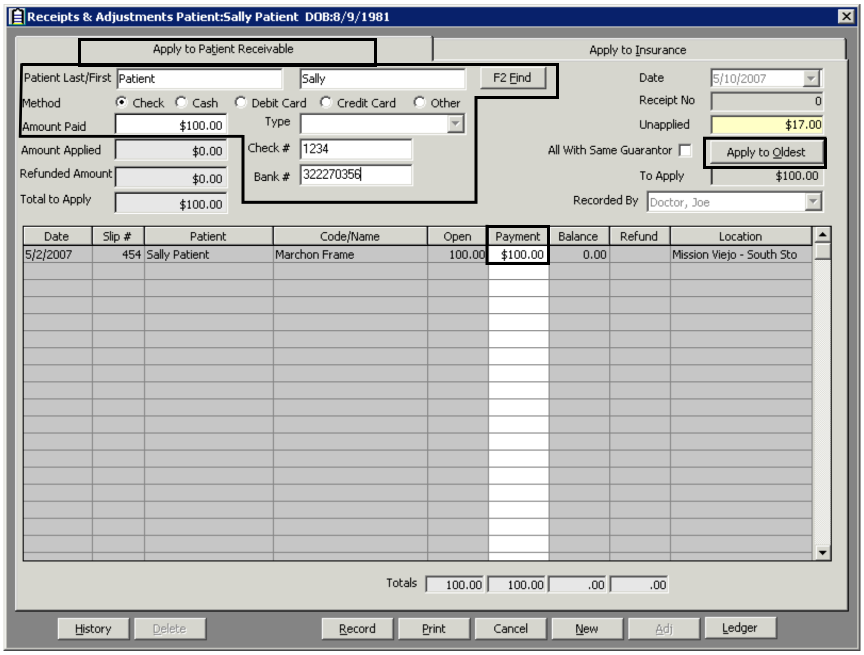
4. Select the person recording the transaction from the **Recorded By** drop-down menu, if this field is not locked.
5. If you want to apply this payment amount to other family members, select the **All With Same Guarantor** check box to view information on all of the guarantor's family members.

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 63.

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.



Receipts & Adjustments Patient:Sally Patient DOB:8/9/1981

Patient Last/First: Patient, Sally
Method: ● Check ○ Cash ○ Debit Card ○ Credit Card ○ Other
Amount Paid: $100.00
Type:
Check #: 1234
Bank #: 322270356
Amount Applied: $0.00
Refunded Amount: $0.00
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

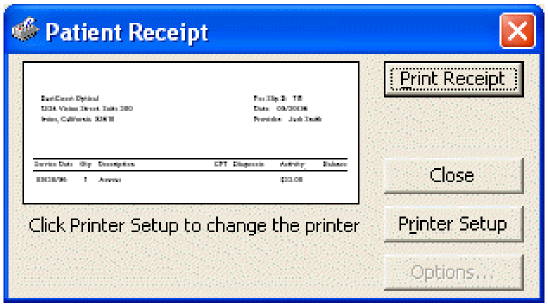
7. If you want to adjust a charge, go to Adjusting, Transferring, & Writing Off Charges on page 384.

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 403.



Click Printer Setup to change the printer

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 412. For information about adjusting charges, go to Adjusting, Transferring, & Writing Off Charges on page 384.

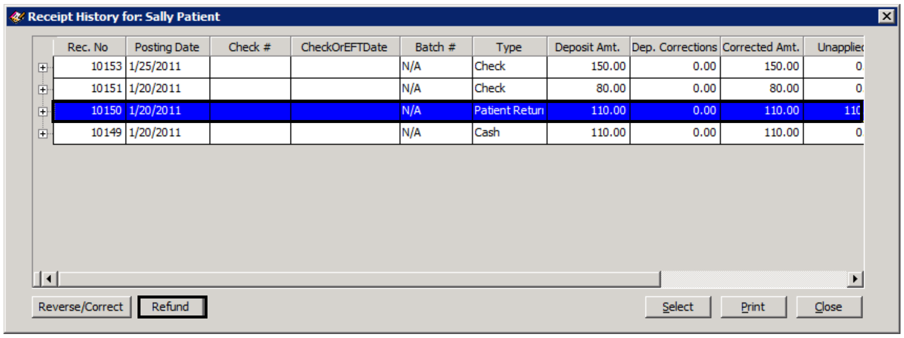
10. Open a patient's Receipts & Adjustments window. For more information on opening Receipts & Adjustments window, go to Opening a Patient's Receipts & Adjustments on page 351.
11. Click **History**.

    The Receipt History window opens.

For information on refunding patient credits, watch the "Returns & Refunds" video.

If you are using a TMS-integrated device to refund patient credits, see the *Using Total Merchant Services (TMS) with OfficeMate* document for detailed instructions.

12. Select a receipt and click **Refund**.

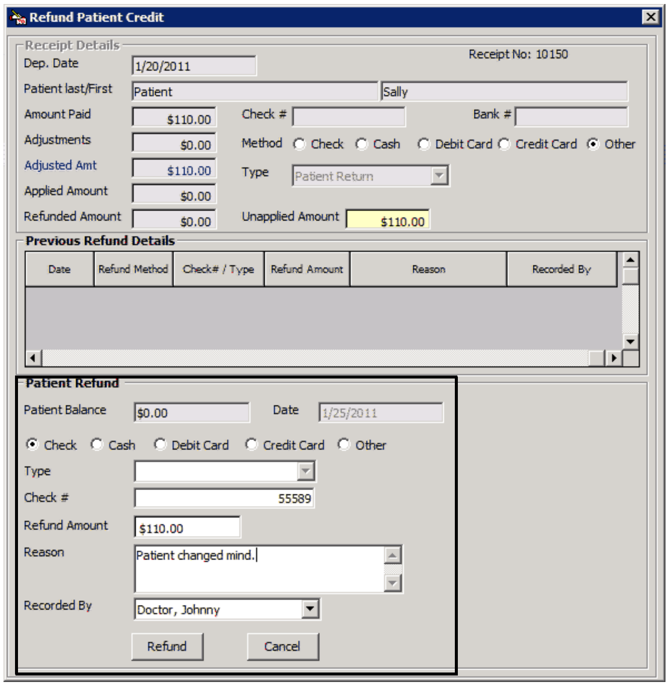


Receipt History for: Sally Patient

Rec. No	Posting Date	Check #	CheckOrEFTDate	Batch #	Type	Deposit Amt.	Dep. Corrections	Corrected Amt.	Unapplie
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 Retur	110.00	0.00	110.00	11
10149	1/20/2011			N/A	Cash	110.00	0.00	110.00	0

The Refund Patient Credit window opens.

13. Complete the fields in the **Patient Refund** section.



Refund Patient Credit

Receipt Details

Receipt No: 10150
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

14. 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 680.

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 351.
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.

5. Click **Display Charges** and select **Display Summary View** or **Display Detail View**.

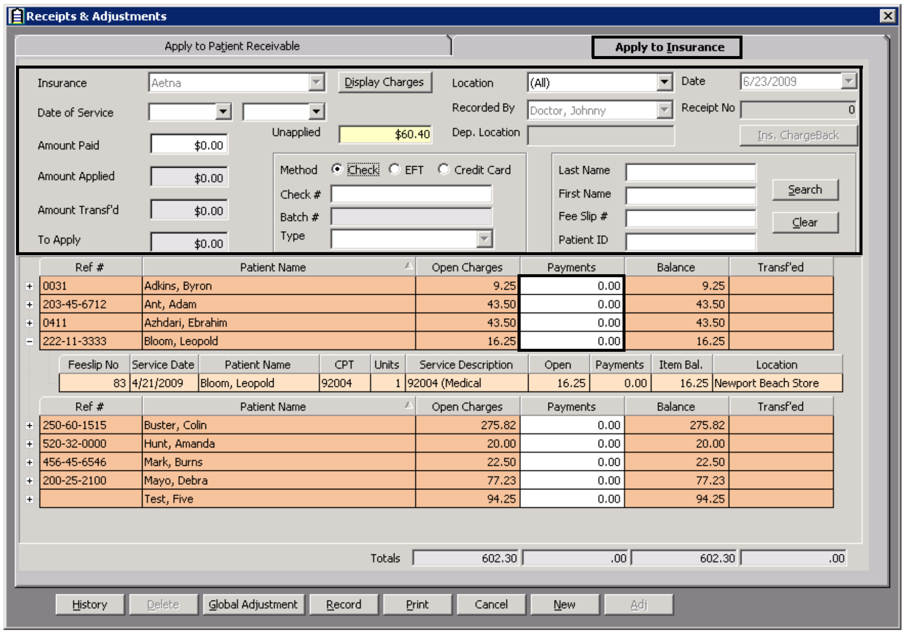
   NOTES
   - If you view the insurance charges in the summary view, you can post payments by patient total balances.
   - If you view the insurance charges in the detail view, you can post payments by line item.

6. Type the payment amount in the **Amount Paid** text box.
7. Select one of the following payment Method radio buttons:
   - **Check**
   - **EFT**
   - **Credit Card**
8. If you selected check or EFT as the payment method, select the check or EFT date from the Check/EFT Date calendar.
9. 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.
10. Select the person recording the transaction from the **Recorded By** drop-down menu, if this field is not locked.

11. 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 381.
- 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 384.



Insurance: Aetna
Date of Service:
Amount Paid: $0.00
Amount Applied: $0.00
Amount Transf'd: $0.00
To Apply: $0.00
Unapplied: $60.40
Location: (All)
Recorded By: Doctor, Johnny
Dep. Location:
Date: 6/23/2009
Receipt No: 0
Method: ● Check ○ EFT ○ Credit Card
Check #:
Batch #:
Type:
Last Name:
First Name:
Fee Slip #:
Patient ID:

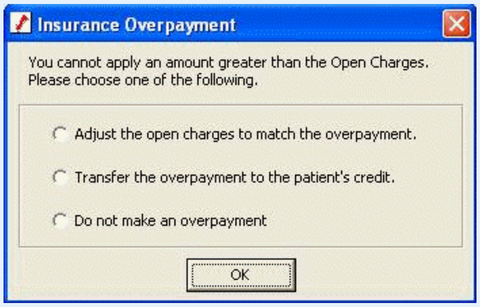
	Ref #	Patient Name	Open Charges	Payments	Balance	Transf'ed
+	0031	Adkins, Byron	9.25	0.00	9.25	
+	203-45-6712	Ant, Adam	43.50	0.00	43.50	
+	0411	Azhdari, Ebrahim	43.50	0.00	43.50	
−	222-11-3333	Bloom, Leopold	16.25	0.00	16.25	

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'ed
+	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

12. If you want to adjust a charge, go to Adjusting, Transferring, & Writing Off Charges on page 384.
13. Click **Print** if you want to print the list of patient insurance receivables.

14. Click **Record** to apply the payments.

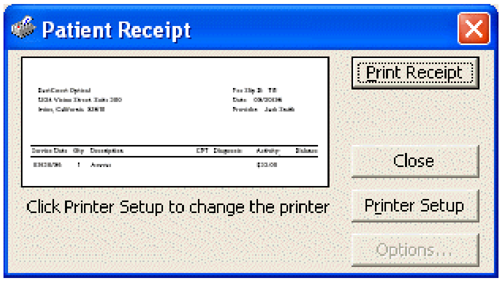
> **NOTE** If you try to record a payment on a line item in the detailed view that is higher than the open charges, the Insurance Overpayment window opens. Choose to adjust the open charges to match the overpayment amount, transfer the overpayment to the patient's credit, or not make the overpayment.
>
> - 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.
>
> 
>
>
> You cannot apply an amount greater than the Open Charges.
> Please choose one of the following.
>
> ○ Adjust the open charges to match the overpayment.
> ○ Transfer the overpayment to the patient's credit.
> ○ Do not make an overpayment
>
>

– 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 403.



Click Printer Setup to change the printer

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 351.
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.

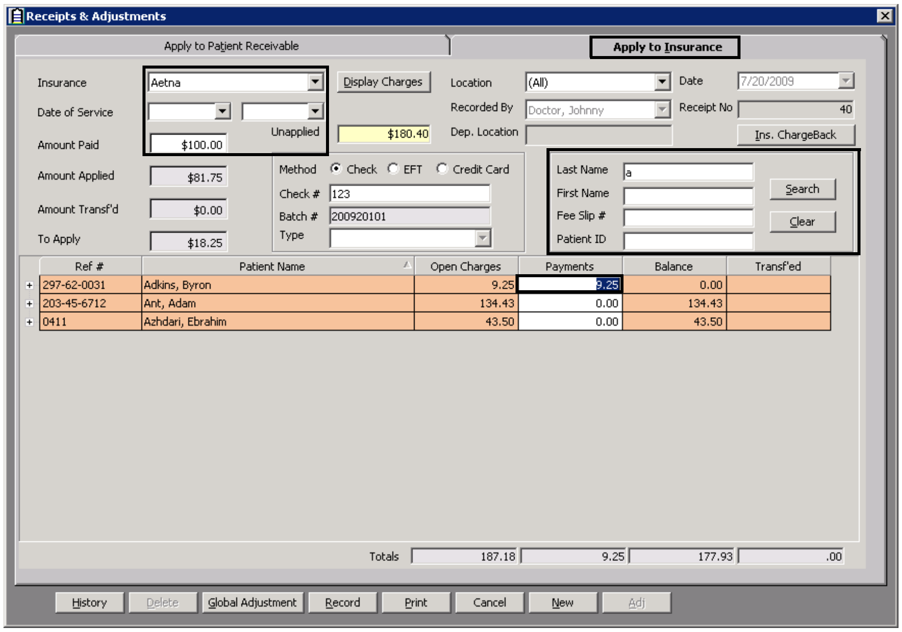
NOTE	Alternatively, you can search for the patient by typing the first few letters of the patient’s first name, typing the fee slip number, or typing the patient number.

10. Click **Search** to locate open insurance balances that match your search criteria.

11. 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 384.


Receipts & Adjustments
Apply to Patient Receivable
Apply to Insurance
Display Charges
Ins. ChargeBack
Search
Clear
History
Delete
Global Adjustment
Record
Print
Cancel
New
Adj

Insurance: Aetna
Date of Service:
Amount Paid: $100.00
Unapplied: $180.40
Amount Applied: $81.75
Amount Transf'd: $0.00
To Apply: $18.25
Location: (All)
Recorded By: Doctor, Johnny
Dep. Location:
Date: 7/20/2009
Receipt No: 40
Method: ● Check ○ EFT ○ Credit Card
Check #: 123
Batch #: 200920101
Type:
Last Name: a
First Name:
Fee Slip #:
Patient ID:

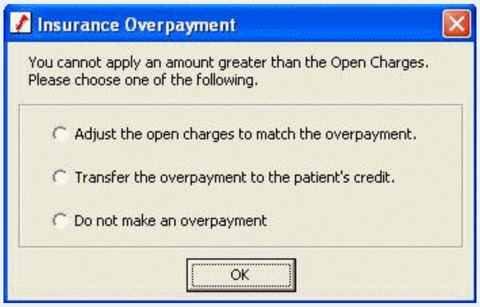
Ref #	Patient Name	Open Charges	Payments	Balance	Transf'ed
297-62-0031	Adkins, Byron	9.25	9.25	0.00	
203-45-6712	Ant, Adam	134.43	0.00	134.43	
0411	Azhdari, Ebrahim	43.50	0.00	43.50	
	Totals	187.18	9.25	177.93	.00

12. Repeat steps 9–11 for each patient for whom the payment should be applied.
13. If you want to adjust a charge, go to Adjusting, Transferring, & Writing Off Charges on page 384.
14. 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.

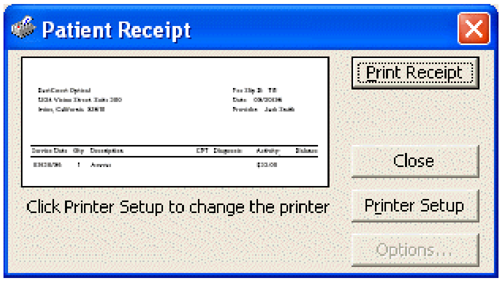


You cannot apply an amount greater than the Open Charges.
Please choose one of the following.

○ Adjust the open charges to match the overpayment.
○ Transfer the overpayment to the patient's credit.
○ Do not make an overpayment

- 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 403.



Click Printer Setup to change the printer

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, 368
- To load the electronic remittance advice file, 369
- To review the ERA information, 371
- To process interest payments and provider adjustments, 376
- To resolve nonexistent line items, 376
- To resolve overpayments, 378
- To resolve lab chargeback entries, 379
- To resolve irreconcilable entries, 381

For more information on using the ERA feature, watch 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 369.

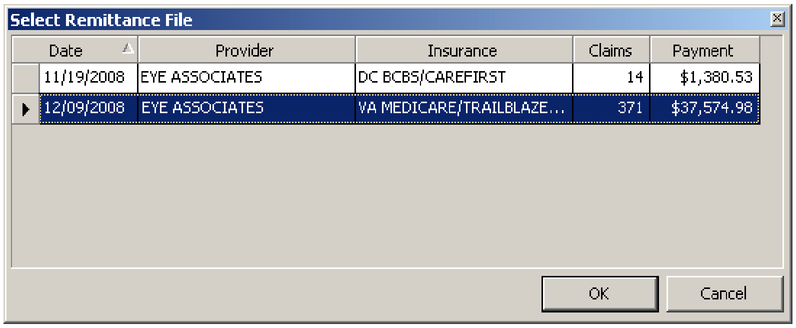
▶ To load the electronic remittance advice file

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 *\era%.rmt* at the end of the path you enter on Gateway's website. For example, **C:\OfficeMate\DATA\EMC\ERA\era%.rmt**.

2. Open the Insurance Remittance Advice window. For more information, go to To open the Insurance Remittance Advice Entry window on page 368.
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.

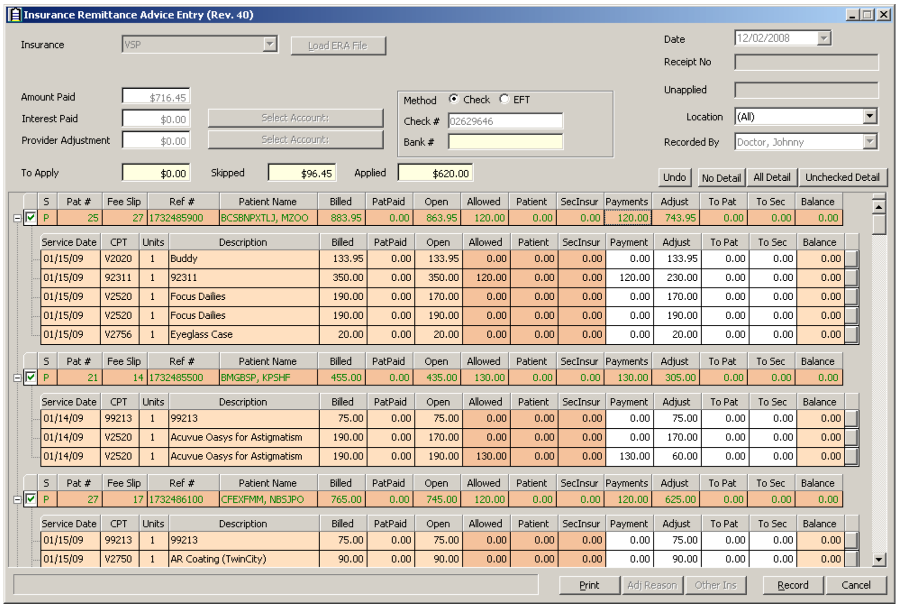
5. Review any error messages that appear and perform the following steps:
   a. Click **Yes** to search for the patient.

   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 381.

The Insurance Remittance Advice Entry window populates with information about the payment and lists all of the patients and claims covered in the payment.



Insurance Remittance Advice Entry (Rev. 40)

Insurance: VSP
Date: 12/02/2008
Receipt No:
Unapplied:
Amount Paid: $716.45
Interest Paid: $0.00
Provider Adjustment: $0.00
Method: ● Check ○ EFT
Check #: 02629646
Bank #:
Location: (All)
Recorded By: Doctor, Johnny
To Apply: $0.00
Skipped: $96.45
Applied: $620.00

S	Pat #	Fee Slip	Ref #	Patient Name	Billed	PatPaid	Open	Allowed	Patient	SecInsur	Payments	Adjust	To Pat	To Sec	Balance
☑ P	25	27	1732485900	BCSBNPXTLJ, MZOO	883.95	0.00	863.95	120.00	0.00	0.00	120.00	743.95	0.00	0.00	0.00

Service Date	CPT	Units	Description	Billed	PatPaid	Open	Allowed	Patient	SecInsur	Payment	Adjust	To Pat	To Sec	Balance
01/15/09	V2020	1	Buddy	133.95	0.00	133.95	0.00	0.00	0.00	0.00	133.95	0.00	0.00	0.00
01/15/09	92311	1	92311	350.00	0.00	350.00	120.00	0.00	0.00	120.00	230.00	0.00	0.00	0.00
01/15/09	V2520	1	Focus Dailies	190.00	0.00	170.00	0.00	0.00	0.00	0.00	170.00	0.00	0.00	0.00
01/15/09	V2520	1	Focus Dailies	190.00	0.00	190.00	0.00	0.00	0.00	0.00	190.00	0.00	0.00	0.00
01/15/09	V2756	1	Eyeglass Case	20.00	0.00	20.00	0.00	0.00	0.00	0.00	20.00	0.00	0.00	0.00

S	Pat #	Fee Slip	Ref #	Patient Name	Billed	PatPaid	Open	Allowed	Patient	SecInsur	Payments	Adjust	To Pat	To Sec	Balance
☑ 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	0.00

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

S	Pat #	Fee Slip	Ref #	Patient Name	Billed	PatPaid	Open	Allowed	Patient	SecInsur	Payments	Adjust	To Pat	To Sec	Balance
☑ P	27	17	1732486100	CFEXFMM, NBSJPO	765.00	0.00	745.00	120.00	0.00	0.00	120.00	625.00	0.00	0.00	0.00

Service Date	CPT	Units	Description	Billed	PatPaid	Open	Allowed	Patient	SecInsur	Payment	Adjust	To Pat	To Sec	Balance
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

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 371.

   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 376
Black, bold text	To resolve overpayments on page 378
Green, bold text	To resolve lab chargeback entries on page 379
Red, bold text	To resolve lab chargeback entries on page 379

- 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

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 368.

   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.

2. 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:

<table>
<tr><th>This column</th><th>Displays this information</th></tr>
<tr><td>check box</td><td>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.</td></tr>
<tr><td>S</td><td>Displays the status of the claim. Refer to the following table to determine the status of the claim.
<table>
<tr><th>Status</th><th>Meaning</th></tr>
<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>
</table></td></tr>
<tr><td>Pat #</td><td>Displays the patient number from OfficeMate.</td></tr>
<tr><td>Fee Slip</td><td>Displays the fee slip number associated with the claim.</td></tr>
<tr><td>Ref #</td><td>Displays the reference number assigned to the claim by the clearinghouse.</td></tr>
<tr><td>Patient Name</td><td>Displays the patient’s name.</td></tr>
<tr><td>Billed</td><td>Displays the insurance amount billed on the fee slip in OfficeMate.</td></tr>
<tr><td>PatPaid</td><td>Displays the amount the patient paid, as recorded in OfficeMate.</td></tr>
<tr><td>Open</td><td>Displays the open charges for the claim, as recorded in OfficeMate.</td></tr>
</table>

NOTE, CONT.

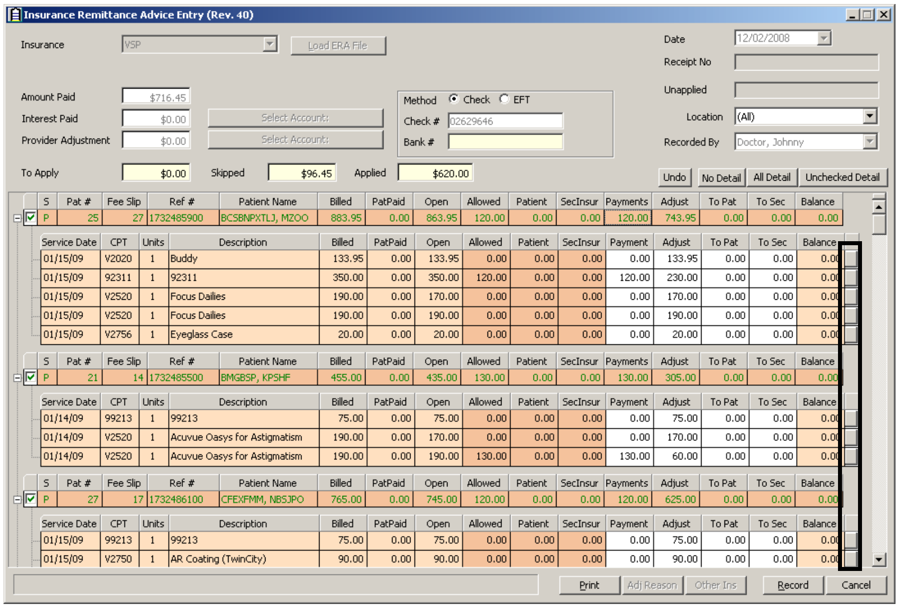
This column	Displays this information
Allowed	Displays the amount covered by insurance according to the ERA.
Patient	Displays the amount for which the patient is responsible.
SecInsur	Displays the amount for which the secondary insurance is responsible (crossover).
Payment	Displays the insurance payment 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.

5. 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: VSP
Date: 12/02/2008
Receipt No:
Unapplied:
Amount Paid: $716.45
Interest Paid: $0.00
Provider Adjustment: $0.00
Method: ● Check ○ EFT
Check #: 02629646
Bank #:
Location: (All)
Recorded By: Doctor, Johnny
To Apply: $0.00
Skipped: $96.45
Applied: $620.00

	S	Pat #	Fee Slip	Ref #	Patient Name	Billed	PatPaid	Open	Allowed	Patient	SecInsur	Payments	Adjust	To Pat	To Sec	Balance
☑	P	25	27	1732485900	BCSBNPXTLJ, MZOO	883.95	0.00	863.95	120.00	0.00	0.00	120.00	743.95	0.00	0.00	0.00

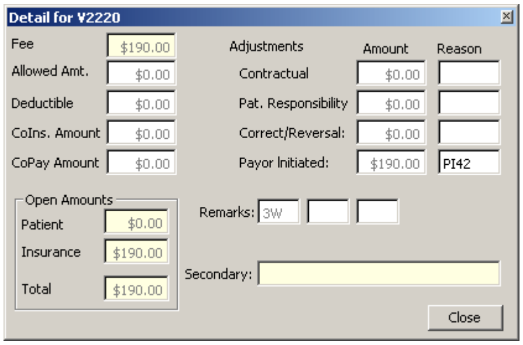
Service Date	CPT	Units	Description	Billed	PatPaid	Open	Allowed	Patient	SecInsur	Payment	Adjust	To Pat	To Sec	Balance
01/15/09	V2020	1	Buddy	133.95	0.00	133.95	0.00	0.00	0.00	0.00	133.95	0.00	0.00	0.0
01/15/09	92311	1	92311	350.00	0.00	350.00	120.00	0.00	0.00	120.00	230.00	0.00	0.00	0.0
01/15/09	V2520	1	Focus Dailies	190.00	0.00	170.00	0.00	0.00	0.00	0.00	170.00	0.00	0.00	0.0
01/15/09	V2520	1	Focus Dailies	190.00	0.00	190.00	0.00	0.00	0.00	0.00	190.00	0.00	0.00	0.0
01/15/09	V2756	1	Eyeglass Case	20.00	0.00	20.00	0.00	0.00	0.00	0.00	20.00	0.00	0.00	0.0

	S	Pat #	Fee Slip	Ref #	Patient Name	Billed	PatPaid	Open	Allowed	Patient	SecInsur	Payments	Adjust	To Pat	To Sec	Balance
☑	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	0.00

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	0.0
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	0.0
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	0.0

	S	Pat #	Fee Slip	Ref #	Patient Name	Billed	PatPaid	Open	Allowed	Patient	SecInsur	Payments	Adjust	To Pat	To Sec	Balance
☑	P	27	17	1732486100	CFEXFMM, NBSJPO	765.00	0.00	745.00	120.00	0.00	0.00	120.00	625.00	0.00	0.00	0.00

Service Date	CPT	Units	Description	Billed	PatPaid	Open	Allowed	Patient	SecInsur	Payment	Adjust	To Pat	To Sec	Balance
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	0.0
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	0.0



Detail for V2220

Fee: $190.00
Allowed Amt.: $0.00
Deductible: $0.00
CoIns. Amount: $0.00
CoPay Amount: $0.00

Adjustments	Amount	Reason
Contractual	$0.00	
Pat. Responsibility	$0.00	
Correct/Reversal:	$0.00	
Payor Initiated:	$190.00	PI42

Open Amounts
Patient: $0.00
Insurance: $190.00
Total: $190.00

Remarks: 3W
Secondary:

6. 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 376. For information on resolving overpayments in black, bold text, go to To resolve overpayments on page 378. For information on resolving lab chargebacks in red, bold or green, bold text, go to To resolve lab chargeback entries on page 379.

▶ 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 201.

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 368.
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 371.
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 351.

▶ To resolve nonexistent line items

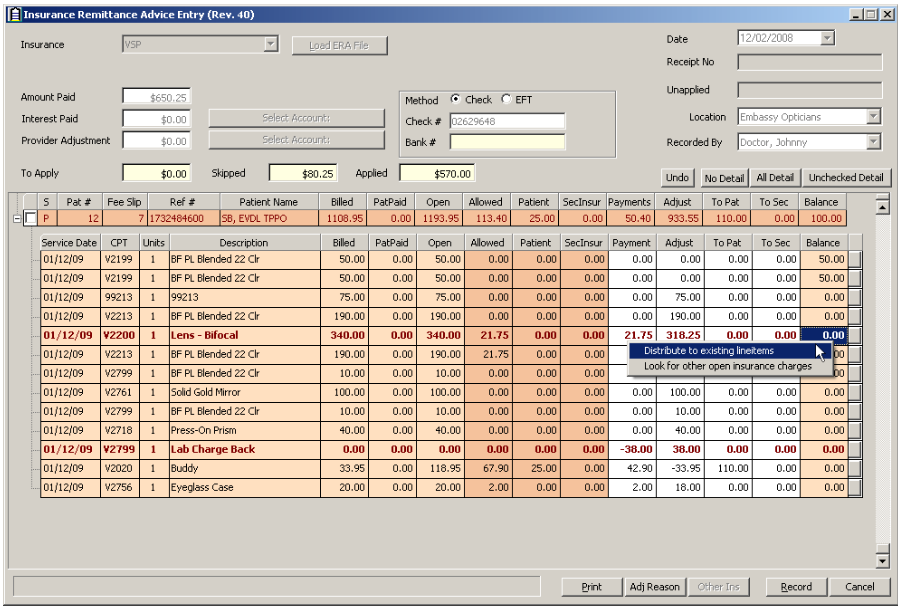
1. Ensure that the Insurance Remittance Advice Entry window is open and an ERA file is loaded. For information on opening the Insurance Remittance Advice Entry window and loading an ERA file, go to To open the Insurance Remittance Advice Entry window on page 368.
2. Review the information displayed in the Insurance Remittance Advice Entry window. For more information on Reviewing the ERA information go to To review the ERA information on page 371.

   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: VSP

Date: 12/02/2008

Receipt No:

Unapplied:

Amount Paid: $650.25

Interest Paid: $0.00

Provider Adjustment: $0.00

Method: ● Check ○ EFT

Check #: 02629648

Bank #:

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, EVDL 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	75.00	0.00	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	190.00	0.00	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	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
01/12/09	V2799	1	BF PL Blended 22 Clr	10.00	0.00	10.00	0.00	0.00	0.00	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
01/12/09	V2761	1	Solid Gold Mirror	100.00	0.00	100.00	0.00	0.00	0.00	0.00	100.00	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	10.00	0.00	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	40.00	0.00	0.00	0.00
01/12/09	**V2799**	**1**	**Lab Charge Back**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**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	Eyeglass Case	20.00	0.00	20.00	2.00	0.00	0.00	2.00	18.00	0.00	0.00	0.00

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 378. For information on resolving lab chargebacks in red, bold text, go to To resolve lab chargeback entries on page 379.
6. If you are *completely* finished resolving nonexistent line items and recording insurance payments in the ERA, click **Record**.

NOTE

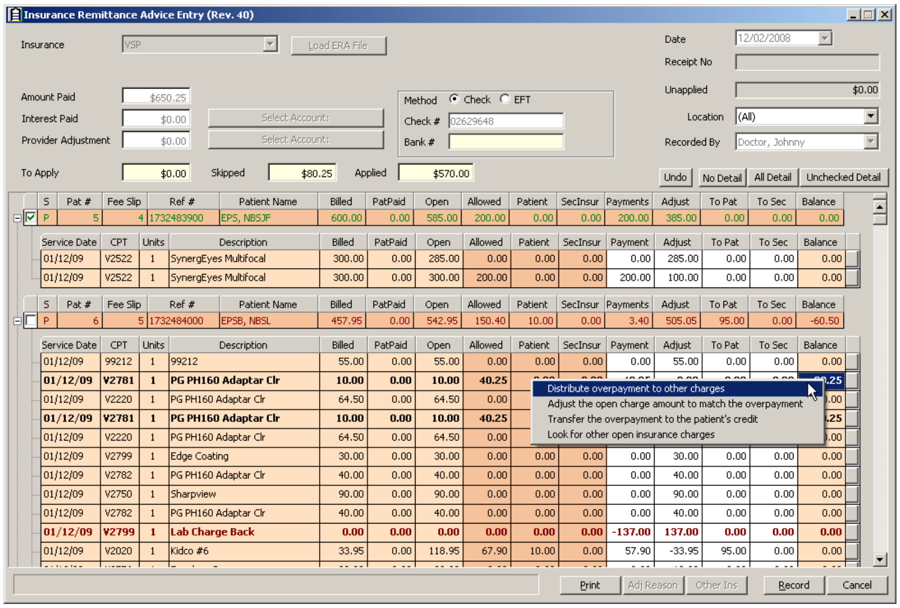
Do *not* record an ERA until you are completely finished reviewing, processing, and resolving any issues in it! If you record an ERA prior to completing these tasks, the ERA will close, you will not be able to reload it, and you will need to manually record insurance payments.

For more information on resolving overpayments, watch the "Insurance Chargebacks & 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 368.
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 371.

   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.



Insurance Remittance Advice Entry (Rev. 40)

Insurance: VSP
Date: 12/02/2008
Receipt No:
Amount Paid: $650.25
Interest Paid: $0.00
Provider Adjustment: $0.00
Method: ● Check ○ EFT
Check #: 02629648
Bank #:
Unapplied: $0.00
Location: (All)
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	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	Payment	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	0.00	285.00	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

S	Pat #	Fee Slip	Ref #	Patient Name	Billed	PatPaid	Open	Allowed	Patient	SecInsur	Payments	Adjust	To Pat	To Sec	Balance
☐ 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	Payment	Adjust	To Pat	To Sec	Balance
01/12/09	99212	1	99212	55.00	0.00	55.00	0.00	0.00	0.00	0.00	55.00	0.00	0.00	0.00
01/12/09	**V2781**	**1**	**PG PH160 Adaptar Clr**	**10.00**	**0.00**	**10.00**	**40.25**							
01/12/09	V2220	1	PG PH160 Adaptar Clr	64.50	0.00	64.50	0.00							
01/12/09	**V2781**	**1**	**PG PH160 Adaptar Clr**	**10.00**	**0.00**	**10.00**	**40.25**							
01/12/09	V2220	1	PG PH160 Adaptar Clr	64.50	0.00	64.50	0.00							
01/12/09	V2799	1	Edge Coating	30.00	0.00	30.00	0.00	0.00	0.00	0.00	30.00	0.00	0.00	0.00
01/12/09	V2782	1	PG PH160 Adaptar Clr	40.00	0.00	40.00	0.00	0.00	0.00	0.00	40.00	0.00	0.00	0.00
01/12/09	V2750	1	Sharpview	90.00	0.00	90.00	0.00	0.00	0.00	0.00	90.00	0.00	0.00	0.00
01/12/09	V2782	1	PG PH160 Adaptar Clr	40.00	0.00	40.00	0.00	0.00	0.00	0.00	40.00	0.00	0.00	0.00
01/12/09	**V2799**	**1**	**Lab Charge Back**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**-137.00**	**137.00**	**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

Load ERA File
Select Account:
Select Account:
Undo
No Detail
All Detail
Unchecked Detail
Distribute overpayment to other charges
Adjust the open charge amount to match the overpayment
Transfer the overpayment to the patient's credit
Look for other open insurance charges
Print
Adj Reason
Other Ins
Record
Cancel

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 376. 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 379.

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.

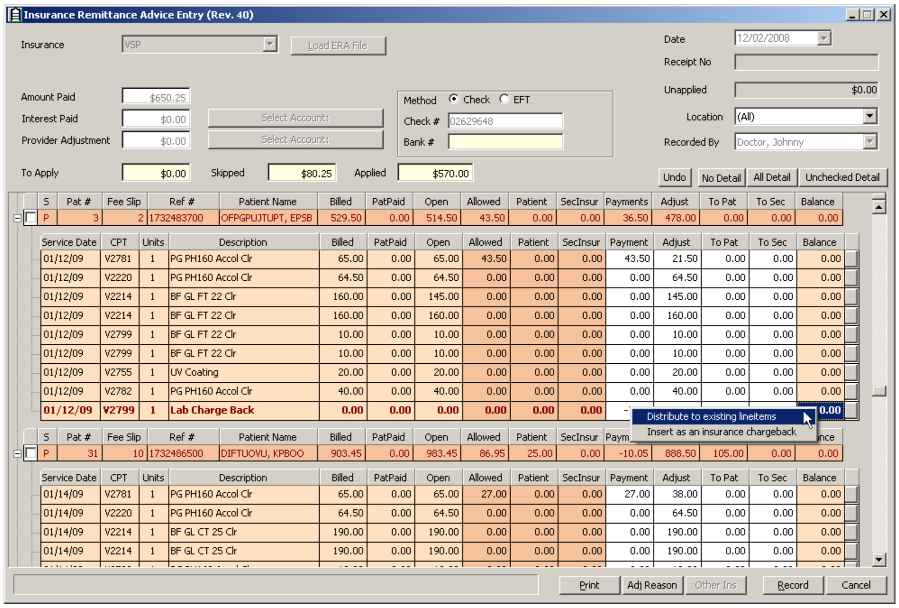
For more information on resolving chargebacks, watch the "Insurance Chargebacks & Overpayments" video.

▶ 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 368.
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 371.
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.



Insurance Remittance Advice Entry (Rev. 40)

Insurance: VSP
Date: 12/02/2008
Receipt No:
Amount Paid: $650.25
Interest Paid: $0.00
Provider Adjustment: $0.00
Method: ● Check ○ EFT
Check #: 02629648
Bank #:
Unapplied: $0.00
Location: (All)
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	3	2	1732483700	OFPGPUJTUPT, EPSB	529.50	0.00	514.50	43.50	0.00	0.00	36.50	478.00	0.00	0.00	0.00

Service Date	CPT	Units	Description	Billed	PatPaid	Open	Allowed	Patient	SecInsur	Payment	Adjust	To Pat	To Sec	Balance
01/12/09	V2781	1	PG PH160 Accol Clr	65.00	0.00	65.00	43.50	0.00	0.00	43.50	21.50	0.00	0.00	0.00
01/12/09	V2220	1	PG PH160 Accol Clr	64.50	0.00	64.50	0.00	0.00	0.00	0.00	64.50	0.00	0.00	0.00
01/12/09	V2214	1	BF GL FT 22 Clr	160.00	0.00	145.00	0.00	0.00	0.00	0.00	145.00	0.00	0.00	0.00
01/12/09	V2214	1	BF GL FT 22 Clr	160.00	0.00	160.00	0.00	0.00	0.00	0.00	160.00	0.00	0.00	0.00
01/12/09	V2799	1	BF GL FT 22 Clr	10.00	0.00	10.00	0.00	0.00	0.00	0.00	10.00	0.00	0.00	0.00
01/12/09	V2799	1	BF GL FT 22 Clr	10.00	0.00	10.00	0.00	0.00	0.00	0.00	10.00	0.00	0.00	0.00
01/12/09	V2755	1	UV Coating	20.00	0.00	20.00	0.00	0.00	0.00	0.00	20.00	0.00	0.00	0.00
01/12/09	V2782	1	PG PH160 Accol Clr	40.00	0.00	40.00	0.00	0.00	0.00	0.00	40.00	0.00	0.00	0.00
01/12/09	**V2799**	**1**	**Lab Charge Back**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	-				**0.00**

S	Pat #	Fee Slip	Ref #	Patient Name	Billed	PatPaid	Open	Allowed	Patient	SecInsur	Paym				nce
P	31	10	1732486500	DIFTUOVU, KPBOO	903.45	0.00	983.45	86.95	25.00	0.00	-10.05	888.50	105.00	0.00	0.00

Service Date	CPT	Units	Description	Billed	PatPaid	Open	Allowed	Patient	SecInsur	Payment	Adjust	To Pat	To Sec	Balance
01/14/09	V2781	1	PG PH160 Accol Clr	65.00	0.00	65.00	27.00	0.00	0.00	27.00	38.00	0.00	0.00	0.00
01/14/09	V2220	1	PG PH160 Accol Clr	64.50	0.00	64.50	0.00	0.00	0.00	0.00	64.50	0.00	0.00	0.00
01/14/09	V2214	1	BF GL CT 25 Clr	190.00	0.00	190.00	0.00	0.00	0.00	0.00	190.00	0.00	0.00	0.00
01/14/09	V2214	1	BF GL CT 25 Clr	190.00	0.00	190.00	0.00	0.00	0.00	0.00	190.00	0.00	0.00	0.00

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 376. For information on resolving overpayments in bold, black text, go to To resolve overpayments on page 378.
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 368.
2. Resolve the line items requiring attention. For information resolving line items, go to To resolve nonexistent line items on page 376, To resolve overpayments on page 378, and To resolve lab chargeback entries on page 379.
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 351.
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 361.

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.

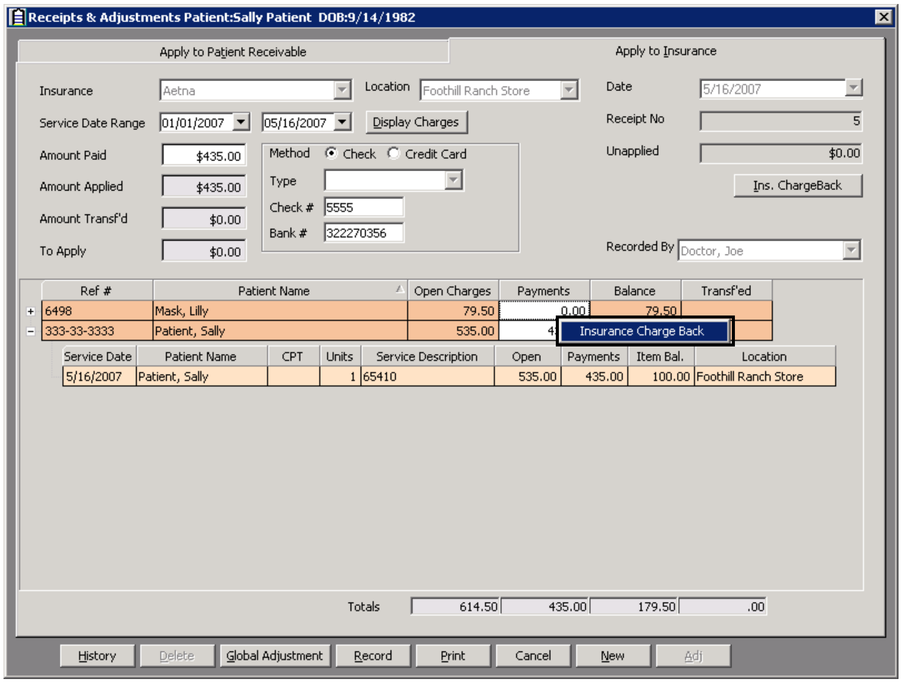
1. Open the Receipts & Adjustments window. For more information on opening the Receipts & Adjustments window, go to Opening a Patient's Receipts & Adjustments on page 351.
2. Click the **Apply to Insurance** tab.
3. Select an insurance company from the **Insurance** drop-down menu.
4. Type or select 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 361.
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 213.


Receipts & Adjustments Patient:Sally Patient DOB:9/14/1982
Apply to Patient Receivable
Apply to Insurance
Display Charges
Ins. ChargeBack
Insurance Charge Back
History
Delete
Global Adjustment
Record
Print
Cancel
New
Adj

Insurance: Aetna
Location: Foothill Ranch Store
Date: 5/16/2007
Service Date Range: 01/01/2007 05/16/2007
Receipt No: 5
Amount Paid: $435.00
Method: ● Check ○ Credit Card
Unapplied: $0.00
Amount Applied: $435.00
Type:
Amount Transf'd: $0.00
Check #: 5555
To Apply: $0.00
Bank #: 322270356
Recorded By: Doctor, Joe

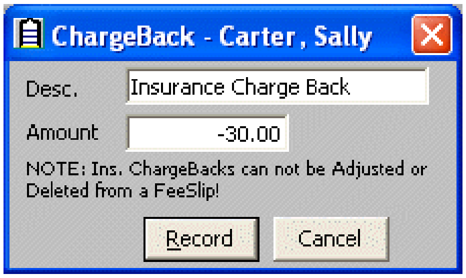
	Ref #	Patient Name	Open Charges	Payments	Balance	Transf'd
+	6498	Mask, Lilly	79.50	0.00	79.50	
−	333-33-3333	Patient, Sally	535.00	4		

Service Date	Patient Name	CPT	Units	Service Description	Open	Payments	Item Bal.	Location
5/16/2007	Patient, Sally		1	65410	535.00	435.00	100.00	Foothill Ranch Store

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.


ChargeBack - Carter, Sally

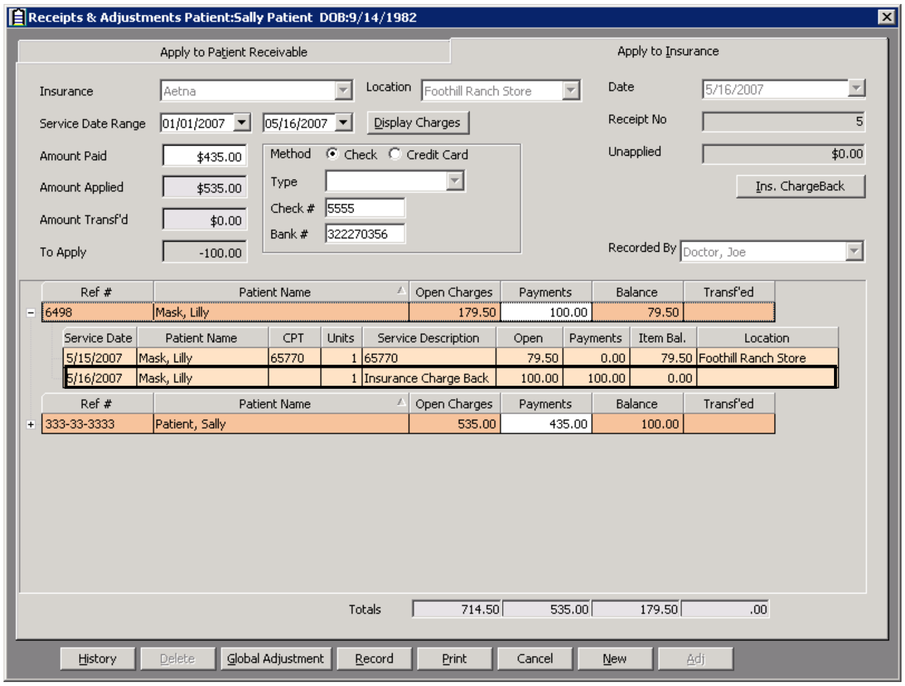
Desc. Insurance Charge Back

Amount -30.00

NOTE: Ins. ChargeBacks can not be Adjusted or Deleted from a FeeSlip!

12. Click **Record**.

    A chargeback is posted and displayed as a line item in the Receipts & Adjustments and Fee Slip windows.


Receipts & Adjustments Patient:Sally Patient DOB:9/14/1982

Insurance Aetna
Location Foothill Ranch Store
Date 5/16/2007
Service Date Range 01/01/2007 05/16/2007
Receipt No 5
Amount Paid $435.00
Method ● Check ○ Credit Card
Unapplied $0.00
Amount Applied $535.00
Type
Check # 5555
Bank # 322270356
Amount Transf'd $0.00
To Apply -100.00
Recorded By Doctor, Joe

	Ref #	Patient Name	Open Charges	Payments	Balance	Transf'ed
−	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'ed
+	333-33-3333	Patient, Sally	535.00	435.00	100.00	

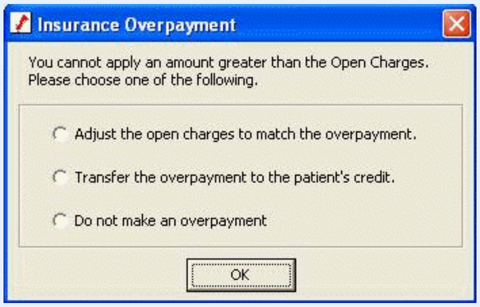
Totals 714.50 535.00 179.50 .00

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 97.
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.



You cannot apply an amount greater than the Open Charges.
Please choose one of the following.

○ Adjust the open charges to match the overpayment.
○ Transfer the overpayment to the patient's credit.
○ Do not make an overpayment

- 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 403.

Adjusting, Transferring, & Writing Off Charges

When you are recording payments, you can adjust charges due to pervious 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 403.

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 407.

This section includes the following topics:

- Adjusting Charges, 385
- Transferring Charges, 395
- Writing Off Charges, 400

Adjusting Charges

This section tells you how to adjust charges, including how

- To add & modify adjustment types, 385
- To adjust patients' charges, 386
- To adjust insurance charges, 388
- To adjust charges on receipts, 390
- To record insurance denials, 392

NOTE	To adjust previous payments and charges, go to Modifying Payments Using the Receipt History on page 403.

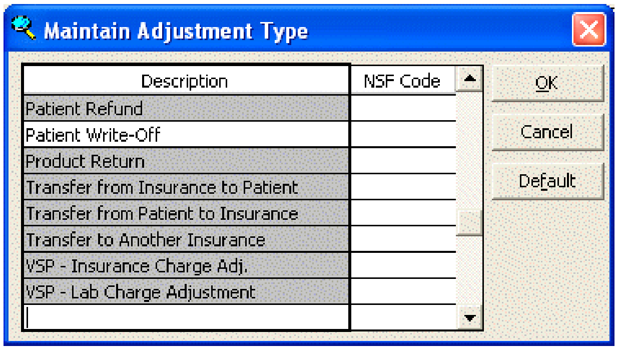
▶ To add & modify adjustment types

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 351.
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.



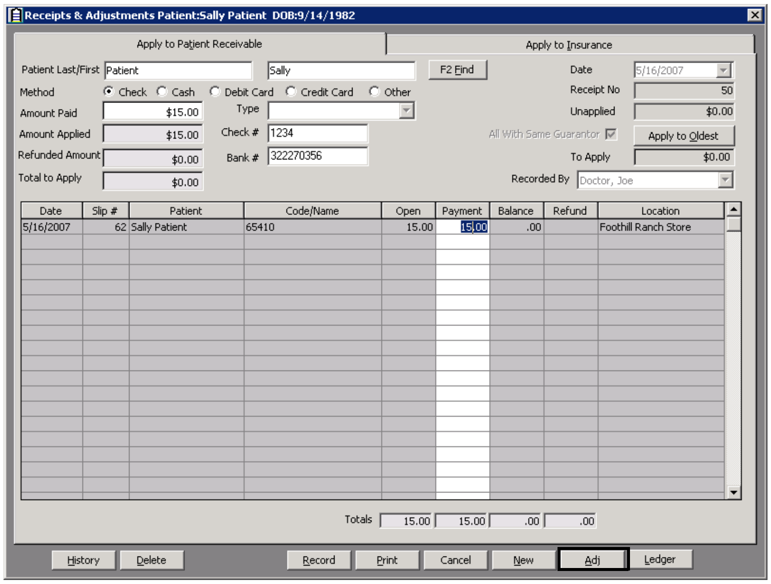
Description	NSF Code
Patient Refund	
Patient Write-Off	
Product Return	
Transfer from Insurance to Patient	
Transfer from Patient to Insurance	
Transfer to Another Insurance	
VSP - Insurance Charge Adj.	
VSP - Lab Charge Adjustment	

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 351.
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**.


Receipts & Adjustments Patient:Sally Patient DOB:9/14/1982
Apply to Patient Receivable
Apply to Insurance
F2 Find
Apply to Oldest
History
Delete
Record
Print
Cancel
New
Adj
Ledger

Patient Last/First: Patient, Sally
Method: ● Check ○ Cash ○ Debit Card ○ Credit Card ○ Other
Amount Paid: $15.00
Amount Applied: $15.00
Refunded Amount: $0.00
Total to Apply: $0.00
Type:
Check #: 1234
Bank #: 322270356
Date: 5/16/2007
Receipt No: 50
Unapplied: $0.00
All With Same Guarantor ☑
To Apply: $0.00
Recorded By: Doctor, Joe

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 385.
9. Select the **Increase** or **Decrease** Balance Effect radio button.

NOTE To correct a negative balance, select the **Decrease** radio button.

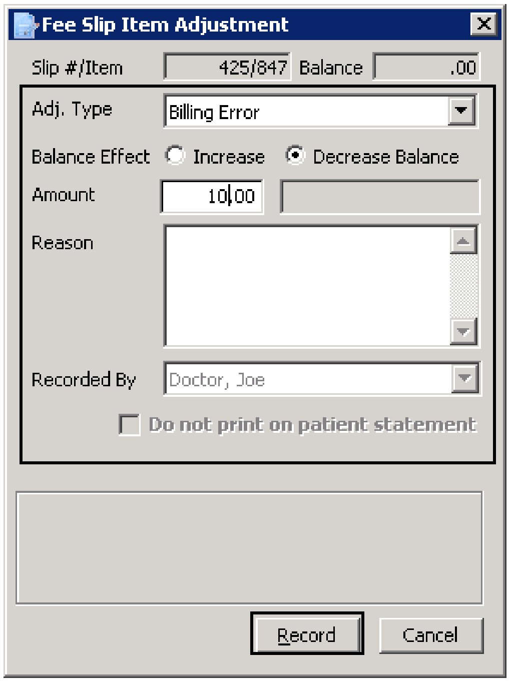
10. Type the amount that you want to increase or decrease the item in the **Amount** text box.
11. Type a reason for the adjustment in the **Reason** text box, if necessary.
12. Select the person recording the transaction from the **Recorded By** drop-down menu, if this field is not locked.
13. If applicable, 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 73.

14. Click **Record**.

NOTE After you record an adjustment, the adjustment is assigned a receipt number. To view adjustments, click **Ledger**.



Fee Slip Item Adjustment

Slip #/Item 425/847 Balance .00

Adj. Type Billing Error

Balance Effect ○ Increase ● Decrease Balance

Amount 10.00

Reason

Recorded By Doctor, Joe

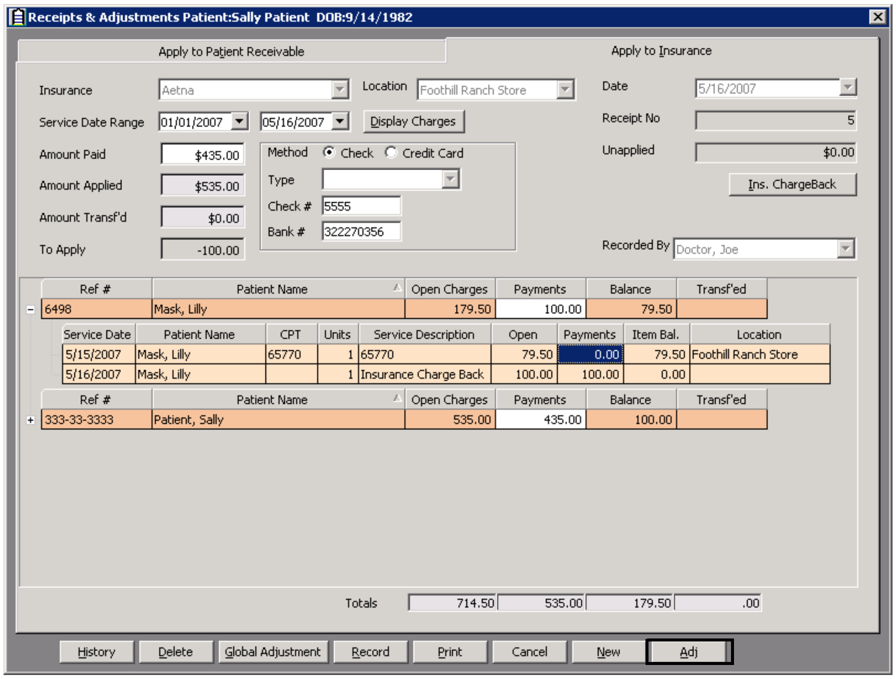
☐ Do not print on patient statement

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 351.
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**.


Receipts & Adjustments Patient:Sally Patient DOB:9/14/1982
Apply to Patient Receivable
Apply to Insurance
Display Charges
Ins. ChargeBack
History
Delete
Global Adjustment
Record
Print
Cancel
New
Adj

Insurance: Aetna
Location: Foothill Ranch Store
Date: 5/16/2007
Service Date Range: 01/01/2007 05/16/2007
Receipt No: 5
Amount Paid: $435.00
Method: ● Check ○ Credit Card
Unapplied: $0.00
Amount Applied: $535.00
Type:
Amount Transf'd: $0.00
Check #: 5555
To Apply: -100.00
Bank #: 322270356
Recorded By: Doctor, Joe

Ref #	Patient Name	Open Charges	Payments	Balance	Transf'ed
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'ed
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.

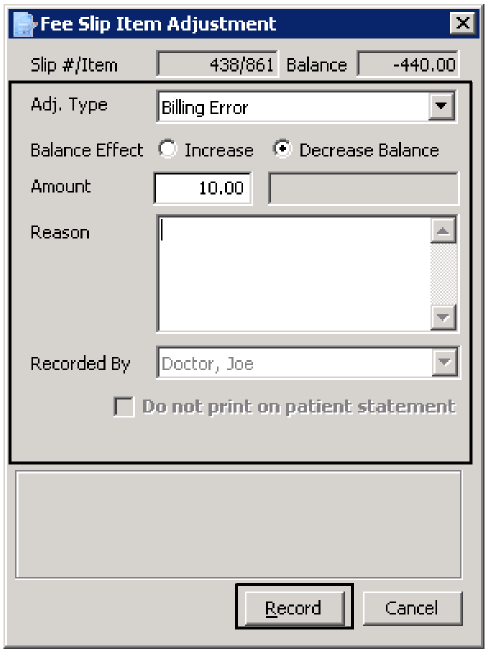
12. Select an adjustment type from the **Adj. Type** drop-down menu. For more information on adding and modifying adjustment types, go to To add & modify adjustment types on page 385.
13. Select the **Increase** or **Decrease** Balance Effect radio button.
14. Type the amount that you want to increase 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 73.

18. Click **Record**.



Slip #/Item 438/861 Balance -440.00
Adj. Type Billing Error
Balance Effect ○ Increase ● Decrease Balance
Amount 10.00
Reason
Recorded By Doctor, Joe
☐ Do not print on patient statement

19. Click **Record** on the Receipts & Adjustments window.

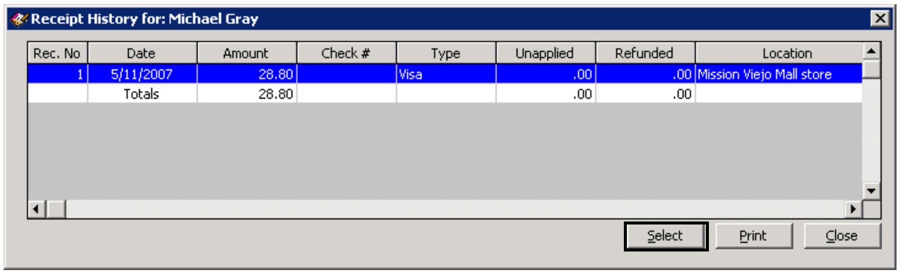
▶ To adjust charges on receipts

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 351.
2. Click **History**.

   The Receipt History window opens.

3. Click on the payment receipt that you want to adjust, click **Select**, and select **Load Summary View** or **Load Detail View**.


Receipt History for: Michael Gray

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	

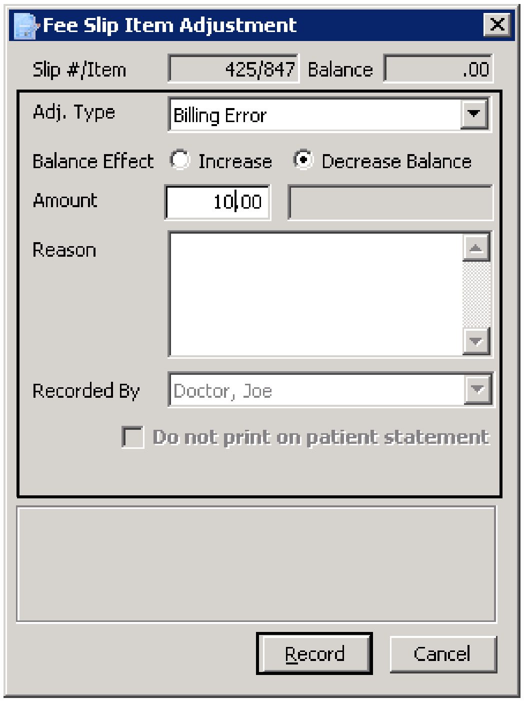
4. Select the person recording the transaction from the **Recorded By** drop-down menu, if this field is not locked. For more information on locking and unlocking this menu, go to Setting Up Security on page 97.
5. Click in the **Payment** text box for the item that you want to adjust.
6. Click **Adj**.

   The Fee Slip Item Adjustment window opens.
7. 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 385.
8. Select the **Increase** or **Decrease** Balance Effect radio button.
9. Type the amount that you want to increase or decrease the item in the **Amount** text box.
10. Type a reason for the adjustment in the **Reason** text box, if necessary.
11. 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 97.
12. 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 73.

13. Click **Record**.



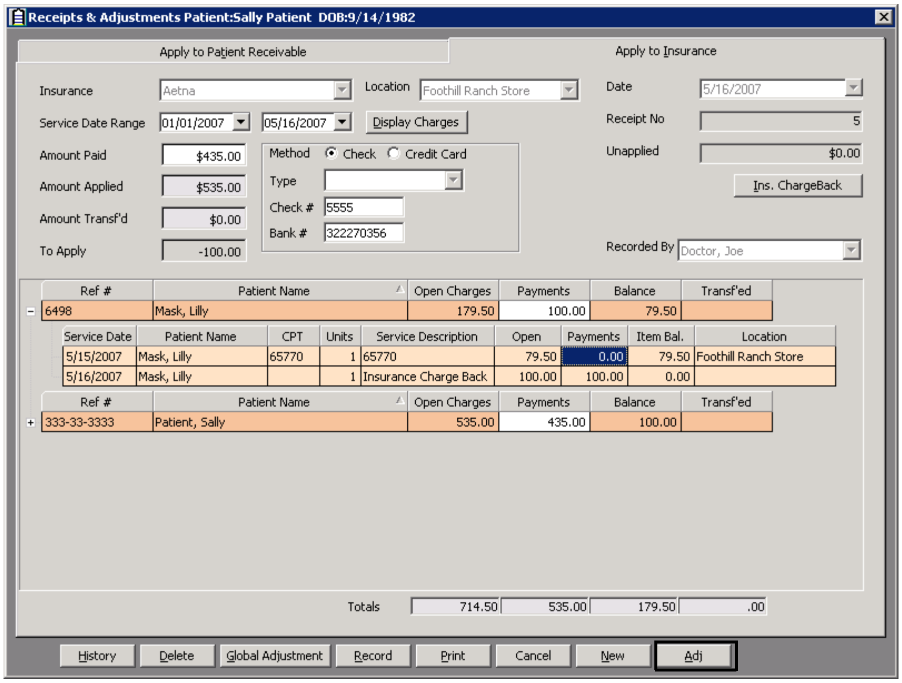
Slip #/Item 425/847 Balance .00
Adj. Type Billing Error
Balance Effect ○ Increase ● Decrease Balance
Amount 10.00
Reason
Recorded By Doctor, Joe
☐ Do not print on patient statement

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 351.
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**.


Receipts & Adjustments Patient:Sally Patient DOB:9/14/1982
Apply to Patient Receivable
Apply to Insurance
Display Charges
Ins. ChargeBack
History
Delete
Global Adjustment
Record
Print
Cancel
New
Adj

Insurance: Aetna
Location: Foothill Ranch Store
Date: 5/16/2007
Service Date Range: 01/01/2007 05/16/2007
Receipt No: 5
Amount Paid: $435.00
Method: ● Check ○ Credit Card
Unapplied: $0.00
Amount Applied: $535.00
Type:
Amount Transf'd: $0.00
Check #: 5555
Bank #: 322270356
To Apply: -100.00
Recorded By: Doctor, Joe

Ref #	Patient Name	Open Charges	Payments	Balance	Transf'ed
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'ed
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 709.

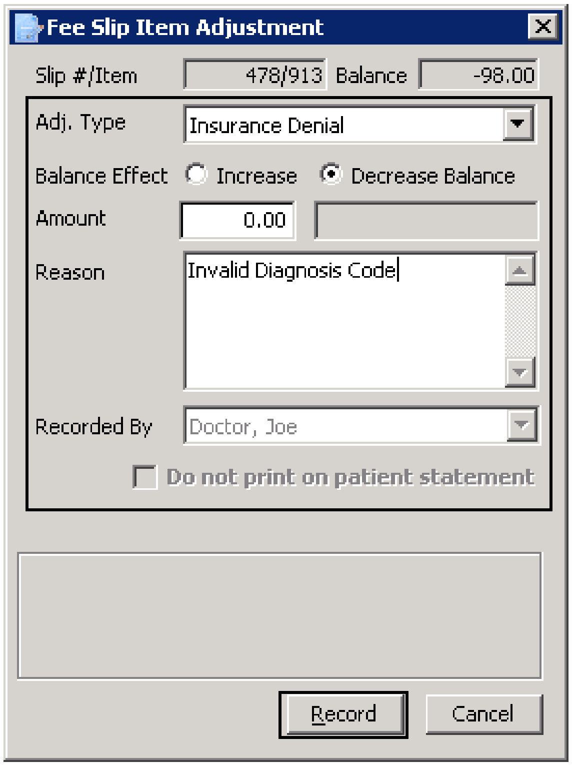
15. Select the person recording the transaction from the **Recorded By** drop-down menu, if this field is not locked.
16. If applicable, select the **Do not print on patient statement** check box if you do not want the adjustment to print on the Statements report and then select a line item already on 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 73.

17. Click **Record**.



Fee Slip Item Adjustment

Slip #/Item 478/913 Balance -98.00

Adj. Type Insurance Denial

Balance Effect ○ Increase ● Decrease Balance

Amount 0.00

Reason Invalid Diagnosis Code

Recorded By Doctor, Joe

☐ Do not print on patient statement

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, 395
- To transfer insurance charges to patients, 397
- To transfer unapplied insurance credits to patients, 399

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 351.
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

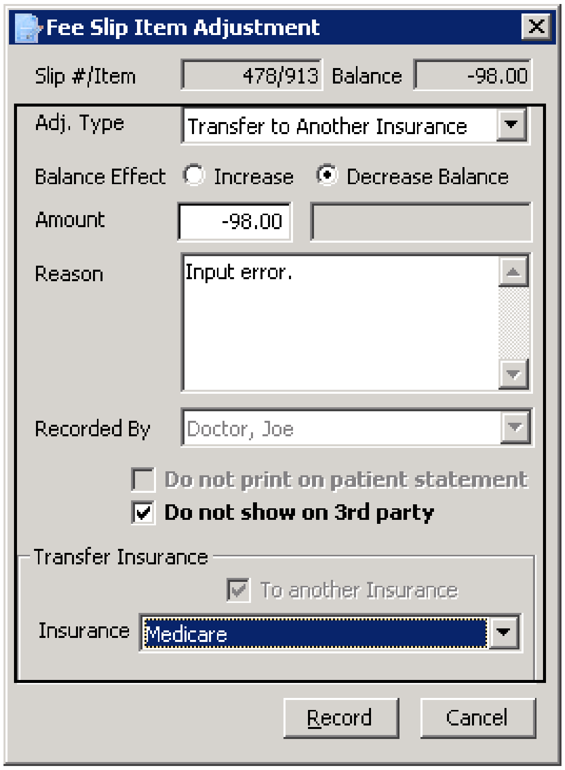
- If you select the **Do not print on patient statement** check box without also selecting items that exactly offset the original adjustment, then the balance on the Statements report will not be correct.
- You must select the **Yes** radio button in the System Preferences window's Statements tab to 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 73.

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 213.



Slip #/Item 478/913 Balance -98.00

Adj. Type Transfer to Another Insurance

Balance Effect ○ Increase ● Decrease Balance

Amount -98.00

Reason Input error.

Recorded By Doctor, Joe

☐ Do not print on patient statement

☑ Do not show on 3rd party

Transfer Insurance

☑ To another Insurance

Insurance Medicare

18. Click **Record**.
19. Click **Record** on the Receipts & Adjustments window.

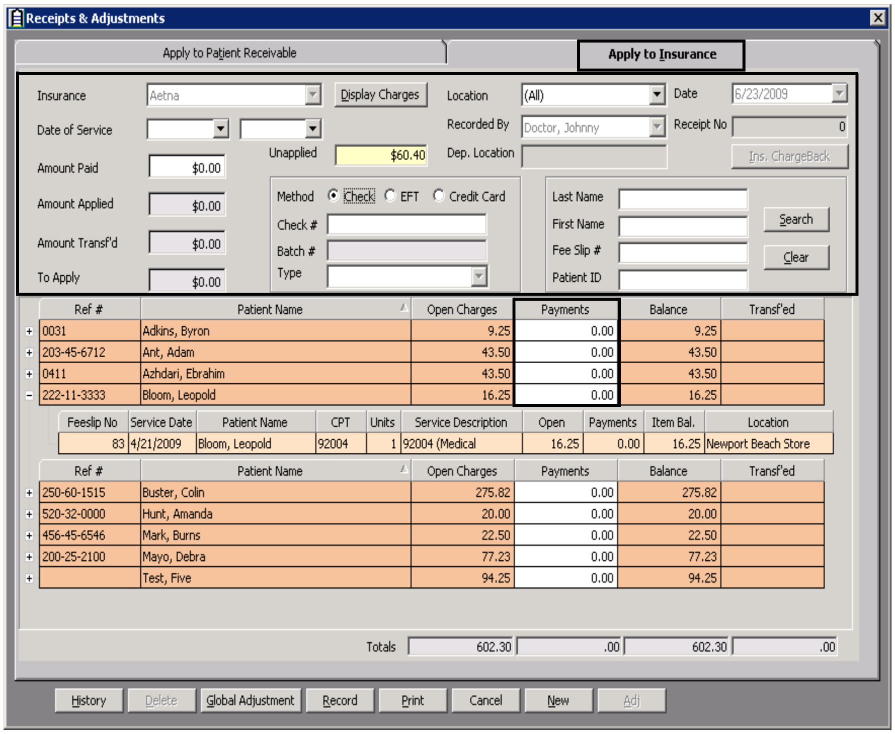
▶ To transfer insurance charges to patients

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 351.
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.



Insurance: Aetna
Date of Service:
Amount Paid: $0.00
Amount Applied: $0.00
Amount Transf'd: $0.00
To Apply: $0.00
Unapplied: $60.40
Location: (All)
Recorded By: Doctor, Johnny
Dep. Location:
Date: 6/23/2009
Receipt No: 0
Method: ● Check ○ EFT ○ Credit Card
Check #:
Batch #:
Type:
Last Name:
First Name:
Fee Slip #:
Patient ID:

	Ref #	Patient Name	Open Charges	Payments	Balance	Transf'ed
+	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'ed
+	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 **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.

12. 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.

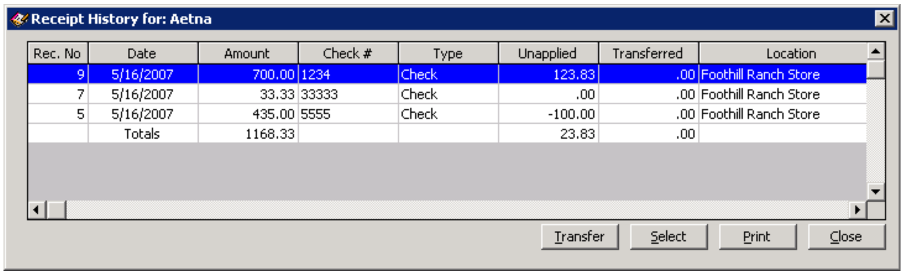
▶ To transfer unapplied insurance credits to patients

NOTE You cannot delete an insurance credit after it has been transferred.

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 351.
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. Click **History**.

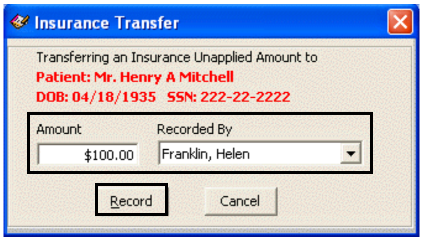
   The Receipt History window opens.
7. Select an item to transfer and click **Transfer**.



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

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.

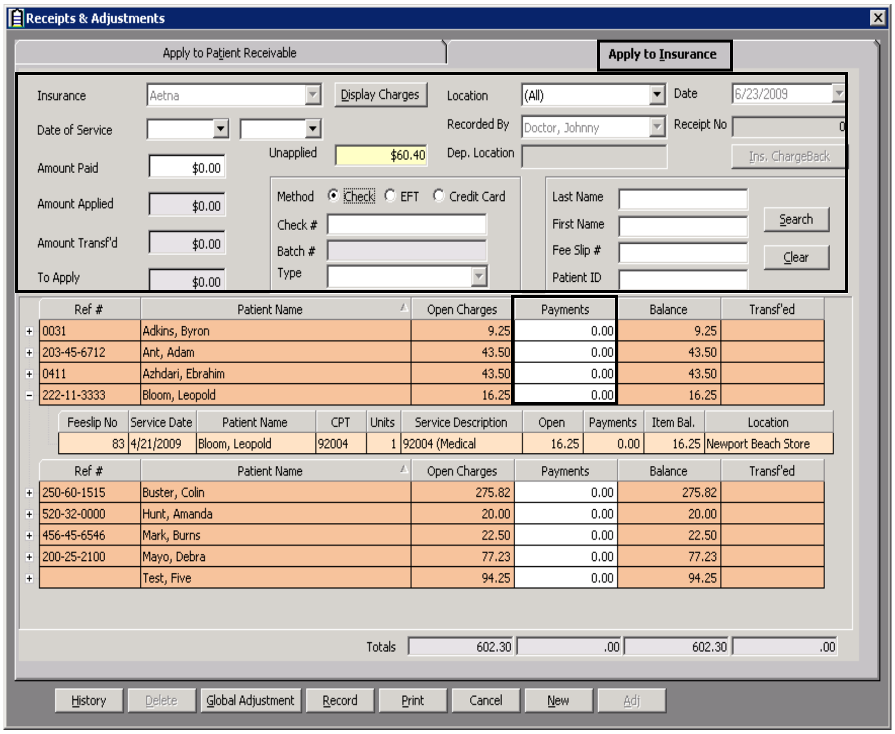
Writing Off Charges

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 351.
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.



Insurance: Aetna
Date of Service:
Amount Paid: $0.00
Amount Applied: $0.00
Amount Transf'd: $0.00
To Apply: $0.00
Unapplied: $60.40
Method: ● Check ○ EFT ○ Credit Card
Check #:
Batch #:
Type:
Location: (All)
Recorded By: Doctor, Johnny
Dep. Location:
Date: 6/23/2009
Receipt No: 0
Last Name:
First Name:
Fee Slip #:
Patient ID:

	Ref #	Patient Name	Open Charges	Payments	Balance	Transf'ed
+	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'ed
+	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

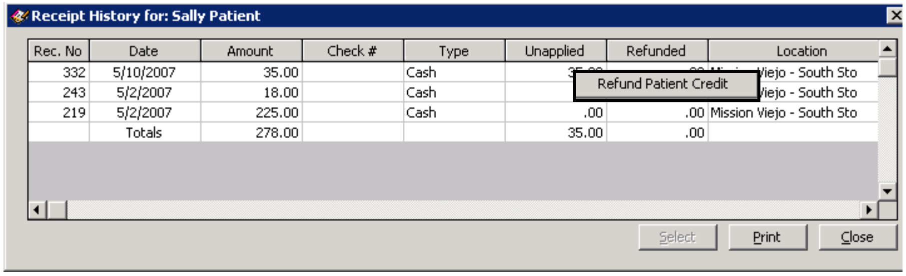
- To refund unapplied patient credits, 403
- To modify recorded payments, 405
- To pay open items with credit amounts, 405

To refund unapplied patient credits

For information on refunds, watch the "Returns & Refunds" video.

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 351.
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**.

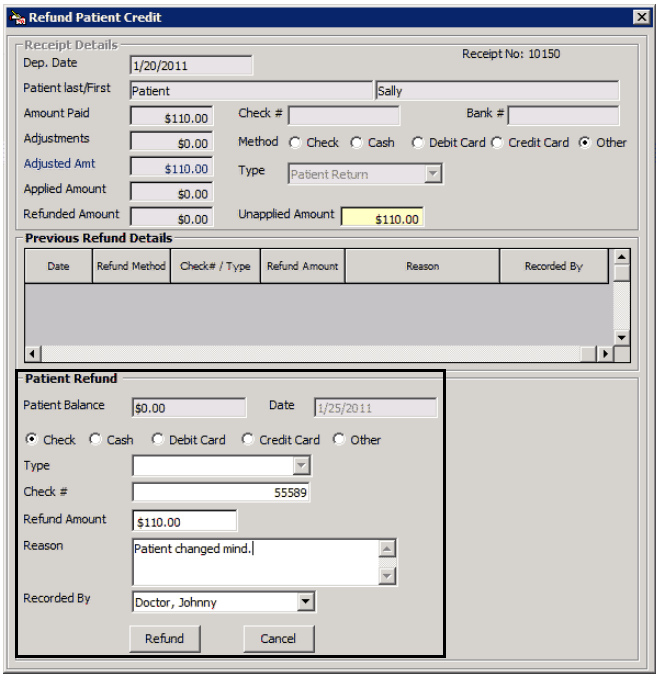


Receipt History for: Sally Patient

Rec. No	Date	Amount	Check #	Type	Unapplied	Refunded	Location
332	5/10/2007	35.00		Cash	[illegible]	[illegible]	[illegible]iejo - South Sto
243	5/2/2007	18.00		Cash			[illegible]iejo - 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.



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

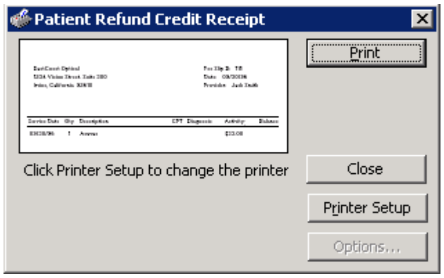
Check # 55589

Refund Amount $110.00

Reason Patient changed mind.

Recorded By Doctor, Johnny

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.



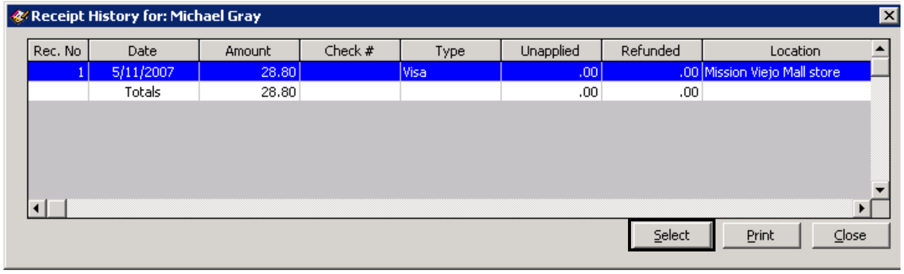
Click Printer Setup to change the printer

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 680.

▶ 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 351.
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**.

   
   Receipt History for: Michael Gray

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 352 and Adjusting Charges on page 385.

▶ To pay open items with credit amounts

- Go to To pay open items with credit amounts on page 357.

Using the Patient Ledger

8

In this chapter:

- Opening a Patient's Ledger, 407
- Viewing Fee Slips, 408
- Viewing & Modifying Receipts, 409
- Returning Products, 412
- Adjusting Charges, 414
- Adjusting Deposits, 415
- Adding Additional Data to Fee Slip Line Items, 416
- Printing the Patient Ledger, 417
- Viewing & Printing Statements, 418

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.

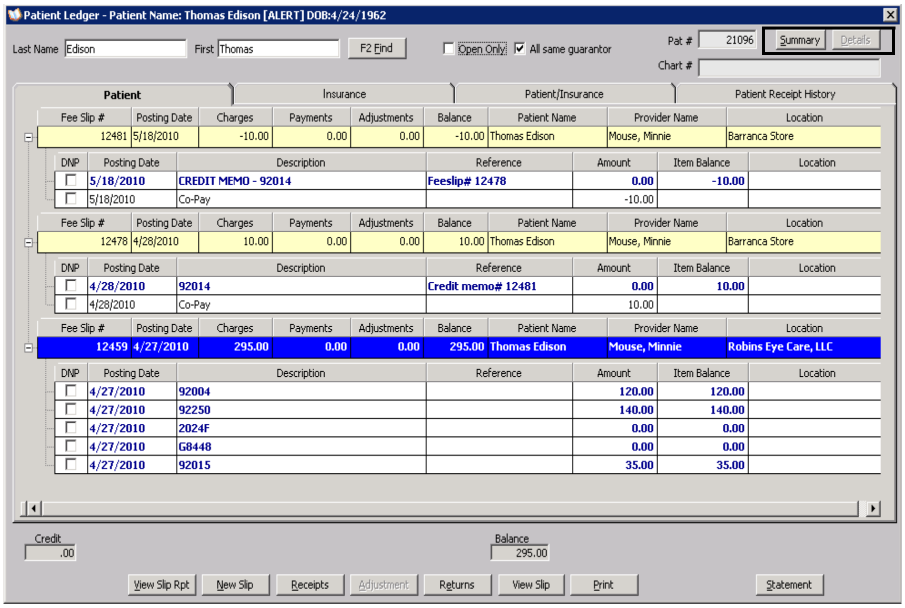
Opening a Patient's Ledger

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.

6. Click the **Patient**, **Insurance**, **Patient/Insurance**, or **Patient Receipt History** tab.

NOTE The Insurance tab defaults to display fee slips from *all* insurance carriers.

7. 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
☐ Open Only
☑ All same guarantor
Pat #: 21096
Chart #:

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
☐	5/18/2010	CREDIT MEMO - 92014	Feeslip# 12478	0.00	-10.00	
☐	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	Posting Date	Description	Reference	Amount	Item Balance	Location
☐	4/28/2010	92014	Credit memo# 12481	0.00	10.00	
☐	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	Posting Date	Description	Reference	Amount	Item Balance	Location
☐	4/27/2010	92004		120.00	120.00	
☐	4/27/2010	92250		140.00	140.00	
☐	4/27/2010	2024F		0.00	0.00	
☐	4/27/2010	G8448		0.00	0.00	
☐	4/27/2010	92015		35.00	35.00	

Credit: .00
Balance: 295.00

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

This section tells you how to view fee slips from the Patient Ledger window, including how

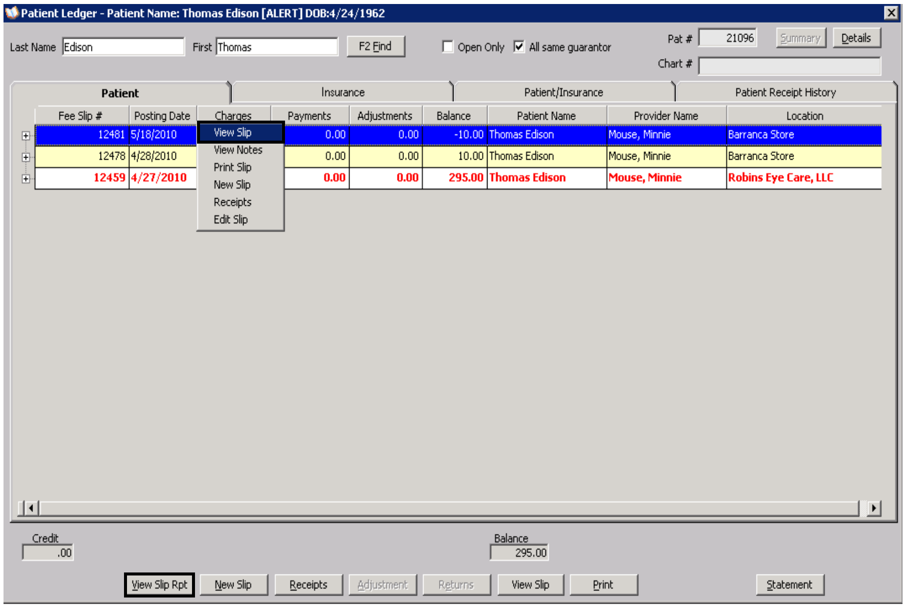
- To view fee slips, 408

For more information on fee slips, watch the "Fee Slips" video.

▶ To view fee slips

1. Open a patient's ledger. For more information on opening a patient's ledger, go to Opening a Patient's Ledger on page 407.

2. 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**.



Patient Ledger - Patient Name: Thomas Edison [ALERT] DOB:4/24/1962

Last Name: Edison
First: Thomas
☐ Open Only
☑ All same guarantor
Pat #: 21096
Chart #:

Fee Slip #	Posting Date	Charges	Payments	Adjustments	Balance	Patient Name	Provider Name	Location
12481	5/18/2010		0.00	0.00	-10.00	Thomas Edison	Mouse, Minnie	Barranca Store
12478	4/28/2010		0.00	0.00	10.00	Thomas Edison	Mouse, Minnie	Barranca Store
12459	4/27/2010		0.00	0.00	295.00	Thomas Edison	Mouse, Minnie	Robins Eye Care, LLC

Credit: .00
Balance: 295.00

F2 Find
Summary
Details
Patient
Insurance
Patient/Insurance
Patient Receipt History
View Slip
View Notes
Print Slip
New Slip
Receipts
Edit Slip
View Slip Rpt
New Slip
Receipts
Adjustment
Returns
View Slip
Print
Statement

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

This section tells you how to view and modify receipts in the Patient Ledger window, including how

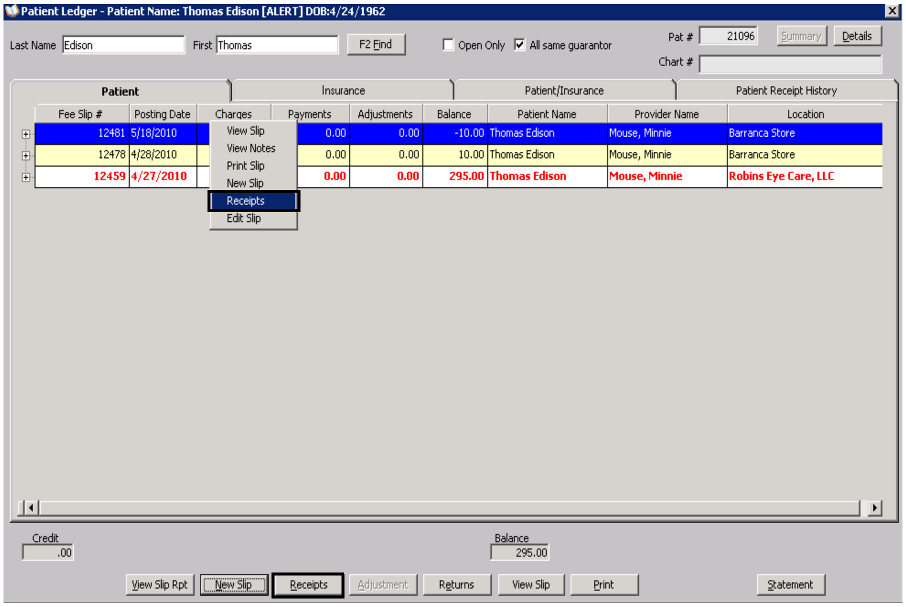
- To view receipts, 409
- To modify payments on receipts, 410
- To pay open items with credit amounts, 411

For more information on receipts, watch the “Patient Receipts” video.

▶ To view receipts

1. Open a patient’s ledger. For more information on opening a patient’s ledger, go to Opening a Patient’s Ledger on page 407.

2. Select a fee slip and click **Receipts** or right-click the fee slip in the Patient, Insurance, or Patient/Insurance tab and select **Receipts**.



Patient Ledger - Patient Name: Thomas Edison [ALERT] DOB:4/24/1962

Last Name Edison First Thomas ☐ Open Only ☑ All same guarantor Pat # 21096 Chart #

Fee Slip #	Posting Date	Charges	Payments	Adjustments	Balance	Patient Name	Provider Name	Location
12481	5/18/2010		0.00	0.00	-10.00	Thomas Edison	Mouse, Minnie	Barranca Store
12478	4/28/2010		0.00	0.00	10.00	Thomas Edison	Mouse, Minnie	Barranca Store
12459	4/27/2010		0.00	0.00	295.00	Thomas Edison	Mouse, Minnie	Robins Eye Care, LLC

Credit .00 Balance 295.00

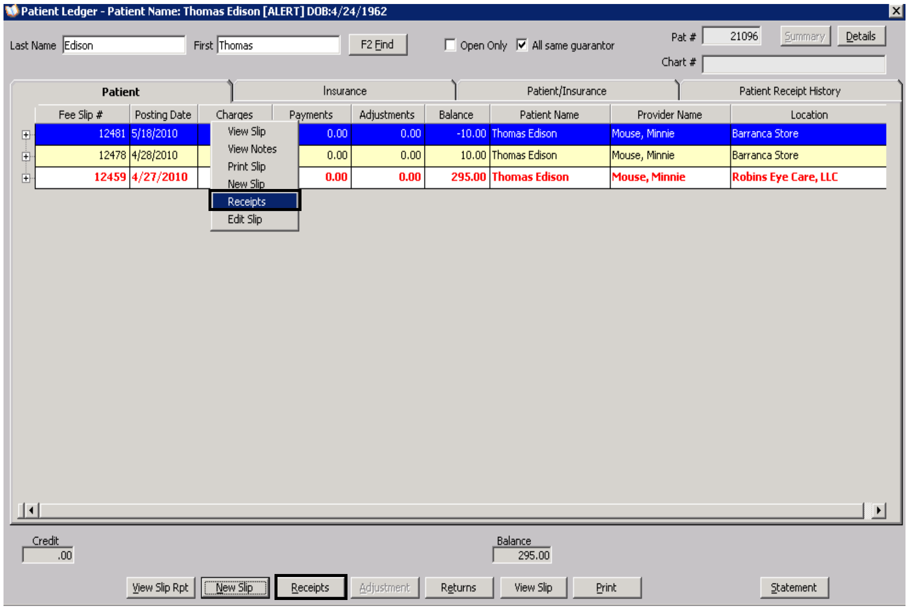
F2 Find
Summary
Details
Patient
Insurance
Patient/Insurance
Patient Receipt History
View Slip
View Notes
Print Slip
New Slip
Receipts
Edit Slip
View Slip Rpt
New Slip
Receipts
Adjustment
Returns
View Slip
Print
Statement

The Receipts & Adjustments window opens.

To modify payments on receipts

For information on modifying payments on receipts, watch the “Correcting Receipts” video.

1. Open a patient’s ledger. For more information on opening a patient’s ledger, go to Opening a Patient’s Ledger on page 407.
2. Select a fee slip and click **Receipts** or right-click the fee slip in the Patient, Insurance, or Patient/Insurance tab and select **Receipts**.



Patient Ledger - Patient Name: Thomas Edison [ALERT] DOB:4/24/1962

Last Name Edison First Thomas ☐ Open Only ☑ All same guarantor Pat # 21096 Chart #

Fee Slip #	Posting Date	Charges	Payments	Adjustments	Balance	Patient Name	Provider Name	Location
12481	5/18/2010		0.00	0.00	-10.00	Thomas Edison	Mouse, Minnie	Barranca Store
12478	4/28/2010		0.00	0.00	10.00	Thomas Edison	Mouse, Minnie	Barranca Store
12459	4/27/2010		0.00	0.00	295.00	Thomas Edison	Mouse, Minnie	Robins Eye Care, LLC

Credit .00 Balance 295.00

F2 Find
Summary
Details
Patient
Insurance
Patient/Insurance
Patient Receipt History
View Slip
View Notes
Print Slip
New Slip
Receipts
Edit Slip
View Slip Rpt
New Slip
Receipts
Adjustment
Returns
View Slip
Print
Statement

The Receipts & Adjustments window opens.

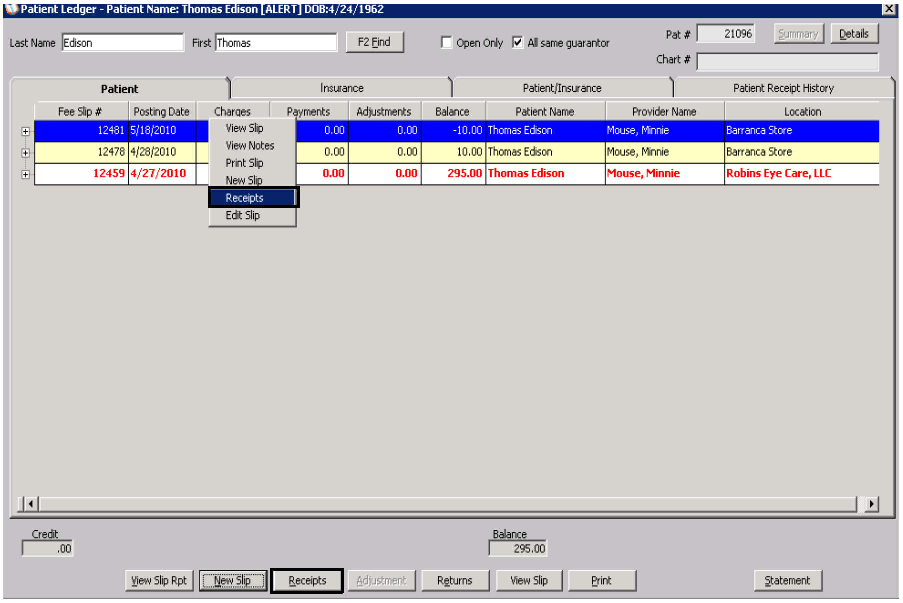
3. Modify payments using the instructions in Applying Payments to Patient Receivables on page 352, Applying Insurance Payments to Any Open Balances on page 361, or Modifying Payments Using the Receipt History on page 403.

▶ To pay open items with credit amounts

For information on paying open items with credits, watch the "Unapplied Amounts & Credits" video.

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 63.

1. Open a patient's ledger. For more information on opening a patient's ledger, go to Opening a Patient's Ledger on page 407.
2. Select a fee slip and click **Receipts** or right-click the fee slip in the Patient, Insurance, or Patient/Insurance tab and select **Receipts**.



Patient Ledger - Patient Name: Thomas Edison [ALERT] DOB:4/24/1962

Last Name Edison
First Thomas
☐ Open Only ☑ All same guarantor
Pat # 21096
Chart #

Fee Slip #	Posting Date	Charges	Payments	Adjustments	Balance	Patient Name	Provider Name	Location
12481	5/18/2010		0.00	0.00	-10.00	Thomas Edison	Mouse, Minnie	Barranca Store
12478	4/28/2010		0.00	0.00	10.00	Thomas Edison	Mouse, Minnie	Barranca Store
12459	4/27/2010		0.00	0.00	295.00	Thomas Edison	Mouse, Minnie	Robins Eye Care, LLC

Credit .00
Balance 295.00

F2 Find
Summary
Details
Patient
Insurance
Patient/Insurance
Patient Receipt History
View Slip
View Notes
Print Slip
New Slip
Receipts
Edit Slip
View Slip Rpt
New Slip
Receipts
Adjustment
Returns
View Slip
Print
Statement

The Receipts & Adjustments window opens.

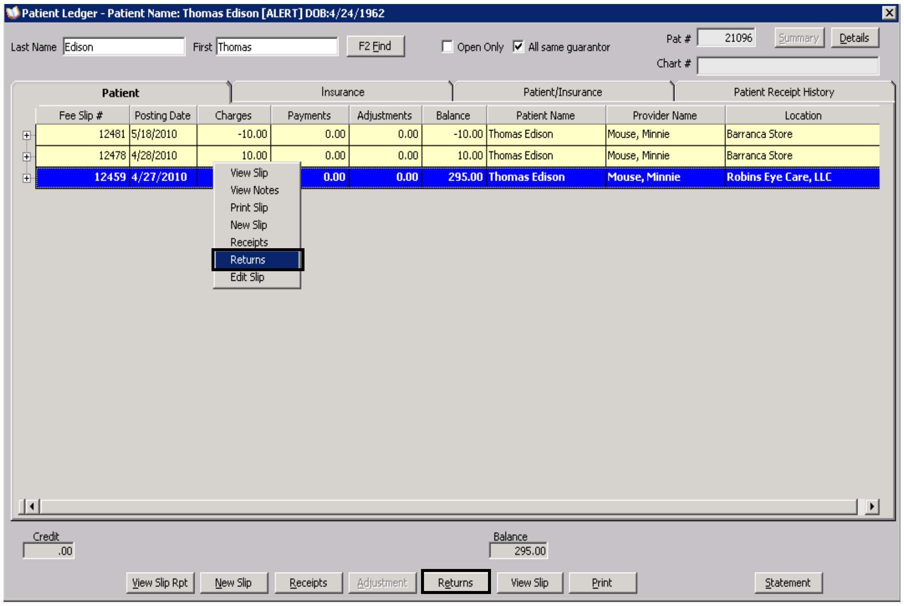
3. Pay the open item with a credit amount using the instructions in To pay open items with credit amounts on page 405.

Returning Products

For information on returning products, watch the "Returns & Refunds" video.

If you are using a TMS-integrated device to return products, see the *Using Total Merchant Services (TMS) with OfficeMate* document for detailed instructions.

1. 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 407. 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**.



Patient Ledger - Patient Name: Thomas Edison [ALERT] DOB:4/24/1962

Last Name: Edison
First: Thomas
☐ Open Only
☑ All same guarantor
Pat #: 21096
Chart #:

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		0.00	0.00	295.00	Thomas Edison	Mouse, Minnie	Robins Eye Care, LLC

Credit: .00
Balance: 295.00

F2 Find
Summary
Details
Patient
Insurance
Patient/Insurance
Patient Receipt History
View Slip
View Notes
Print Slip
New Slip
Receipts
Returns
Edit Slip
View Slip Rpt
New Slip
Receipts
Adjustment
Returns
View Slip
Print
Statement

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.

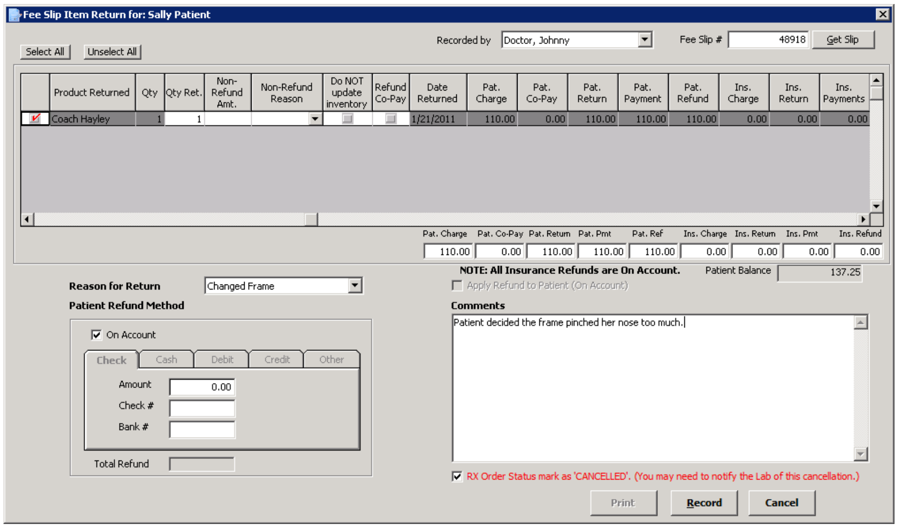
NOTE	Only products recorded on fee slips can be added back into inventory.

    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.

9. 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.


Select All
Unselect All
Get Slip
Check
Cash
Debit
Credit
Other
Print
Record
Cancel

Fee Slip Item Return for: Sally Patient

Recorded by: Doctor, Johnny

Fee Slip #: 48918

	Product Returned	Qty	Qty Ret.	Non-Refund Amt.	Non-Refund Reason	Do NOT update inventory	Refund Co-Pay	Date Returned	Pat. Charge	Pat. Co-Pay	Pat. Return	Pat. Payment	Pat. Refund	Ins. Charge	Ins. Return	Ins. Payments
☑	Coach Hayley	1	1			☐	☐	1/21/2011	110.00	0.00	110.00	110.00	110.00	0.00	0.00	0.00

Pat. Charge	Pat. Co-Pay	Pat. Return	Pat. Pmt	Pat. Ref	Ins. Charge	Ins. Return	Ins. Pmt	Ins. Refund
110.00	0.00	110.00	110.00	110.00	0.00	0.00	0.00	0.00

NOTE: All Insurance Refunds are On Account.

Patient Balance: 137.25

☐ Apply Refund to Patient (On Account)

Reason for Return: Changed Frame

Patient Refund Method

☑ On Account

Amount: 0.00

Check #:

Bank #:

Total Refund:

Comments

Patient decided the frame pinched her nose too much.

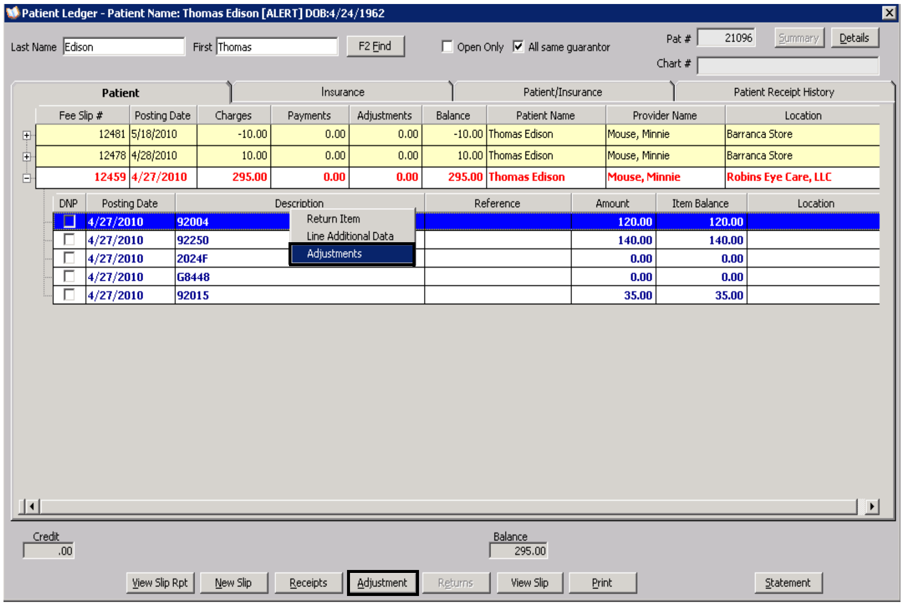
☑ RX Order Status mark as 'CANCELLED'. (You may need to notify the Lab of this cancellation.)

10. 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.

1. Open a patient’s ledger. For more information on opening a patient’s ledger, go to Opening a Patient’s Ledger on page 407.
2. Click **Details**.
3. 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**.


F2 Find
Summary
Details
Patient
Insurance
Patient/Insurance
Patient Receipt History
Return Item
Line Additional Data
Adjustments
View Slip Rpt
New Slip
Receipts
Adjustment
Returns
View Slip
Print
Statement

Patient Ledger - Patient Name: Thomas Edison [ALERT] DOB:4/24/1962

Last Name: Edison

First: Thomas

☐ Open Only ☑ All same guarantor

Pat #: 21096

Chart #:

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
☐	4/27/2010	92004		120.00	120.00	
☐	4/27/2010	92250		140.00	140.00	
☐	4/27/2010	2024F		0.00	0.00	
☐	4/27/2010	G8448		0.00	0.00	
☐	4/27/2010	92015		35.00	35.00	

Credit: .00

Balance: 295.00

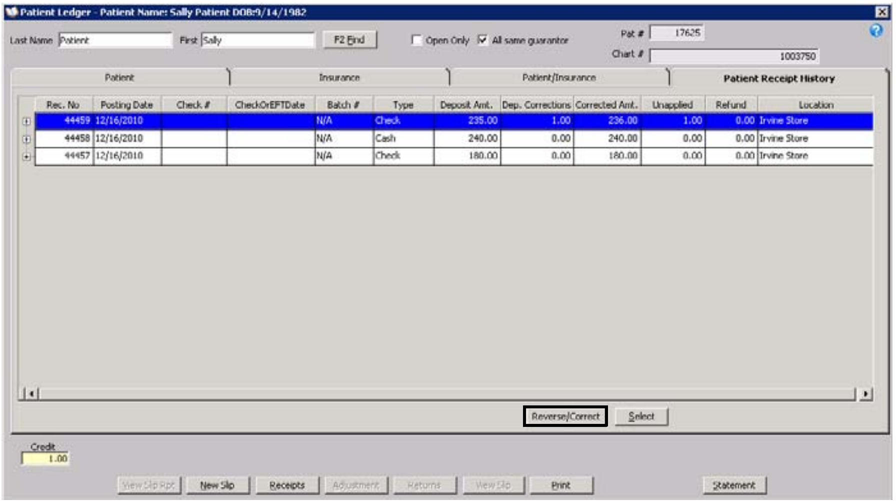
The Fee Slip Item Adjustment window opens.

4. Adjust the charges using the instructions in Adjusting Charges on page 385.

Adjusting Deposits

NOTE You can only adjust deposits at the same location where the payments were originally recorded.

1. Open a patient's ledger. For more information on opening a patient's ledger, go to Opening a Patient's Ledger on page 407.
2. Click the **Patient Receipt History** tab.
3. Select a deposit and click **Reverse/Correct**.


Patient Ledger - Patient Name: Sally Patient DOB:9/14/1982
F2 Find
Patient
Insurance
Patient/Insurance
Patient Receipt History
Reverse/Correct
Select
View Slip Rpt
New Slip
Receipts
Adjustment
Returns
View Slip
Print
Statement

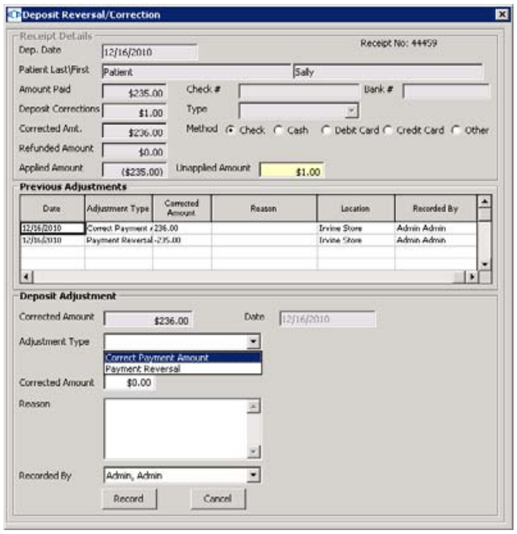
Last Name: Patient
First: Sally
☐ Open Only ☑ All same guarantor
Pat #: 17625
Chart #: 1003750

Rec. No	Posting Date	Check #	CheckOrEFTDate	Batch #	Type	Deposit Amt.	Dep. Corrections	Corrected Amt.	Unapplied	Refund	Location
44459	12/16/2010			N/A	Check	235.00	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

Credit: 1.00

The Deposit Reversal/Correction window opens.

4. Select an adjustment type (**Correct Payment Amount** or **Payment Reversal**) from the **Adjustment Type** drop-down menu.
5. Select a recorded by user from the **Recorded By** drop-down menu.
6. Click **Record**.


Deposit Reversal/Correction
Receipt Details
Previous Adjustments
Deposit Adjustment
Correct Payment Amount
Payment Reversal
Record
Cancel

Receipt No: 44459
Dep. Date: 12/16/2010
Patient Last\First: Patient Sally
Amount Paid: $235.00
Check #:
Bank #:
Deposit Corrections: $1.00
Type:
Corrected Amt.: $236.00
Method: ● Check ○ Cash ○ Debit Card ○ Credit Card ○ Other
Refunded Amount: $0.00
Applied Amount: ($235.00)
Unapplied Amount: $1.00

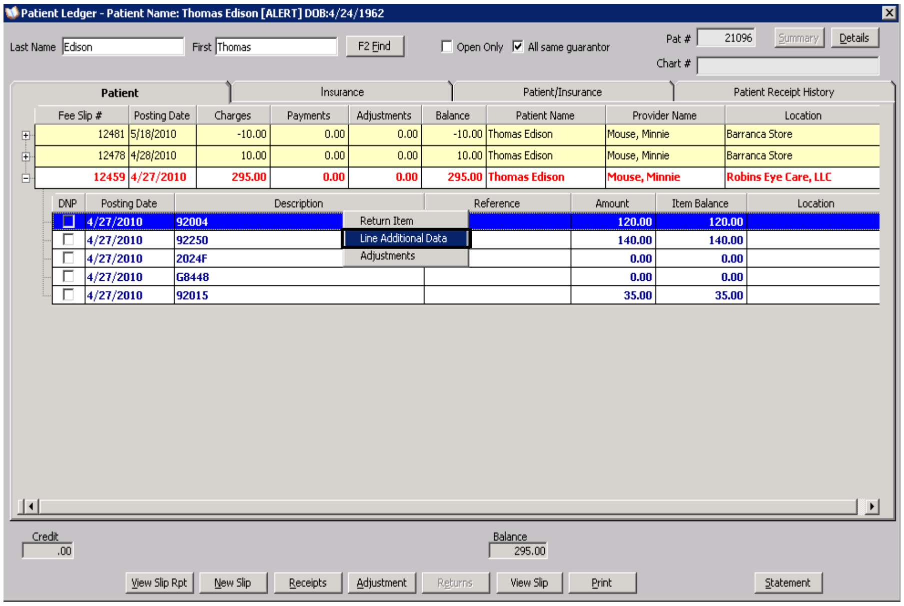
Date	Adjustment Type	Corrected Amount	Reason	Location	Recorded By
12/16/2010	Correct Payment A	236.00		Irvine Store	Admin Admin
12/16/2010	Payment Reversal	-235.00		Irvine Store	Admin Admin

Corrected Amount: $236.00
Date: 12/16/2010
Adjustment Type:
Corrected Amount: $0.00
Reason:
Recorded By: 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 407.
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 ☐ Open Only ☑ All same guarantor Pat # 21096 Chart #

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
☐	4/27/2010	92004		120.00	120.00	
☐	4/27/2010	92250		140.00	140.00	
☐	4/27/2010	2024F		0.00	0.00	
☐	4/27/2010	G8448		0.00	0.00	
☐	4/27/2010	92015		35.00	35.00	

Credit .00 Balance 295.00

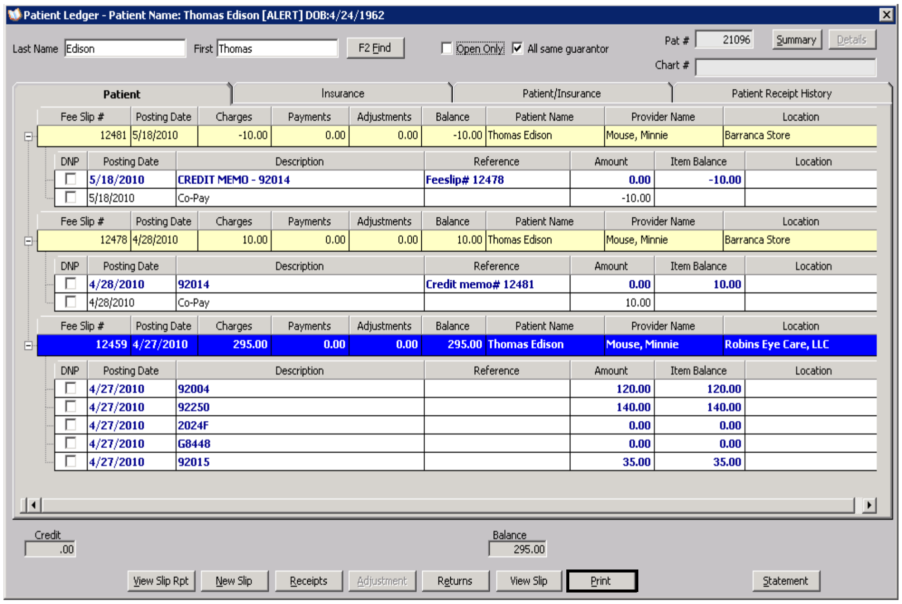
F2 Find
Summary
Details
Patient
Insurance
Patient/Insurance
Patient Receipt History
Return Item
Line Additional Data
Adjustments
View Slip Rpt
New Slip
Receipts
Adjustment
Returns
View Slip
Print
Statement

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 407.
2. Click **Print**.


Patient Ledger - Patient Name: Thomas Edison [ALERT] DOB:4/24/1962
F2 Find
Summary
Details
Patient
Insurance
Patient/Insurance
Patient Receipt History
View Slip Rpt
New Slip
Receipts
Adjustment
Returns
View Slip
Print
Statement

Last Name Edison
First Thomas
☐ Open Only
☑ All same guarantor
Pat # 21096
Chart #

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
☐	5/18/2010	CREDIT MEMO - 92014	Feeslip# 12478	0.00	-10.00	
☐	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	Posting Date	Description	Reference	Amount	Item Balance	Location
☐	4/28/2010	92014	Credit memo# 12481	0.00	10.00	
☐	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	Posting Date	Description	Reference	Amount	Item Balance	Location
☐	4/27/2010	92004		120.00	120.00	
☐	4/27/2010	92250		140.00	140.00	
☐	4/27/2010	2024F		0.00	0.00	
☐	4/27/2010	G8448		0.00	0.00	
☐	4/27/2010	92015		35.00	35.00	

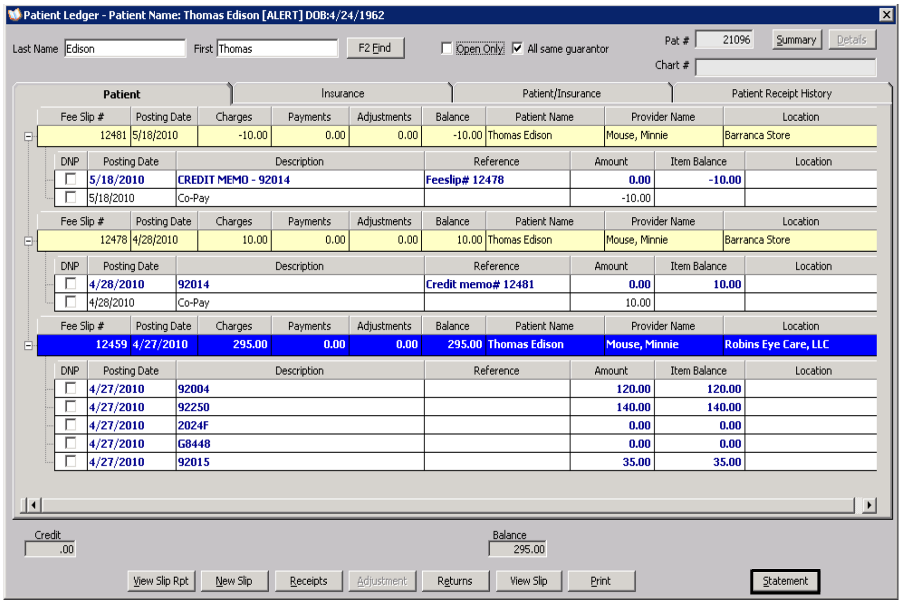
Credit .00
Balance 295.00

Viewing & Printing Statements

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 206 and To record financial information on page 223.
- 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 561.

1. Open a patient's ledger. For more information on opening a patient's ledger, go to Opening a Patient's Ledger on page 407.
2. Click **Statement**.



Patient Ledger - Patient Name: Thomas Edison [ALERT] DOB:4/24/1962

Last Name Edison
First Thomas
☐ Open Only ☑ All same guarantor
Pat # 21096
Chart #

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
☐	5/18/2010	CREDIT MEMO - 92014	Feeslip# 12478	0.00	-10.00	
☐	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	Posting Date	Description	Reference	Amount	Item Balance	Location
☐	4/28/2010	92014	Credit memo# 12481	0.00	10.00	
☐	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	Posting Date	Description	Reference	Amount	Item Balance	Location
☐	4/27/2010	92004		120.00	120.00	
☐	4/27/2010	92250		140.00	140.00	
☐	4/27/2010	2024F		0.00	0.00	
☐	4/27/2010	G8448		0.00	0.00	
☐	4/27/2010	92015		35.00	35.00	

Credit .00
Balance 295.00

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.

Using FrameMate

9

In this chapter:

- Opening FrameMate, 419
- Using the FRAMES SPEX UPC CD-ROM & On Demand Electronic Download, 419
- Using the FRAMES Quarterly CD-ROM, 422
- Using the Marchon Diskette, CD-ROM, & Electronic Download, 423
- Transferring & Loading Frames into the OfficeMate Products Database, 425
- Viewing Frame Information, 429
- Deleting Manufacturers, 430

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

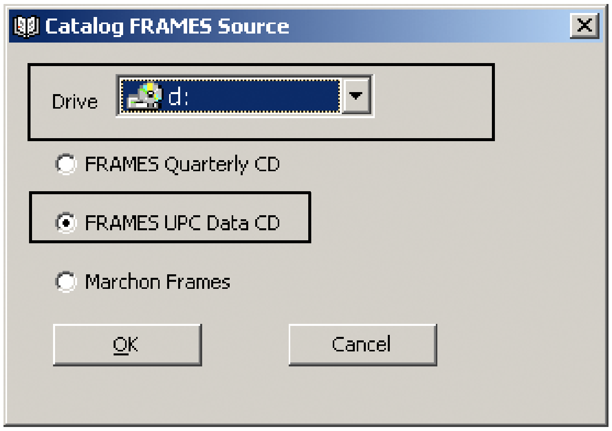
- To open the FRAMES SPEX UPC CD-ROM & On Demand electronic download files in FrameMate, 420
- To import manufacturers into FrameMate, 420

NOTE	If you are looking for information on using the FRAMES Quarterly CD-ROM, go to Using the FRAMES Quarterly CD-ROM on page 422.

▶ 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 419.
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.



Catalog FRAMES Source

Drive: d:

○ FRAMES Quarterly CD

● FRAMES UPC Data CD

○ Marchon Frames

6. Click **OK**.
7. Import manufacturers into FrameMate. For information on importing manufacturers, go to To import manufacturers into FrameMate on page 420.

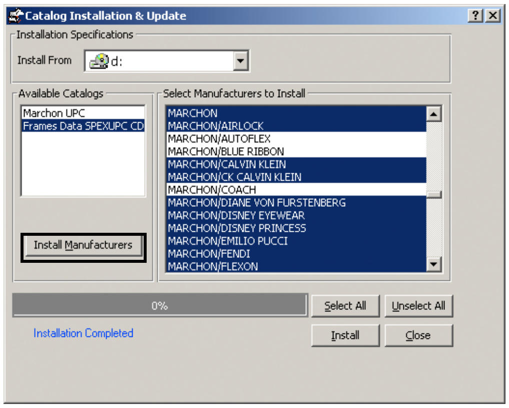
▶ To import manufacturers into FrameMate

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 420.
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**.


Catalog Installation & Update
Installation Specifications
Available Catalogs
Select Manufacturers to Install
Install Manufacturers
Select All
Unselect All
Install
Close

Install From: d:

Marchon UPC
Frames Data SPEXUPC CD

MARCHON
MARCHON/AIRLOCK
MARCHON/AUTOFLEX
MARCHON/BLUE RIBBON
MARCHON/CALVIN KLEIN
MARCHON/CK CALVIN KLEIN
MARCHON/COACH
MARCHON/DIANE VON FURSTENBERG
MARCHON/DISNEY EYEWEAR
MARCHON/DISNEY PRINCESS
MARCHON/EMILIO PUCCI
MARCHON/FENDI
MARCHON/FLEXON

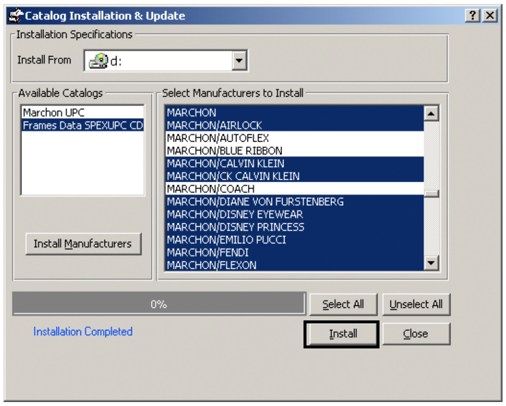
0%

Installation Completed

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**.


Catalog Installation & Update
Installation Specifications
Available Catalogs
Select Manufacturers to Install
Install Manufacturers
Select All
Unselect All
Install
Close

Install From: d:

Marchon UPC
Frames Data SPEXUPC CD

MARCHON
MARCHON/AIRLOCK
MARCHON/AUTOFLEX
MARCHON/BLUE RIBBON
MARCHON/CALVIN KLEIN
MARCHON/CK CALVIN KLEIN
MARCHON/COACH
MARCHON/DIANE VON FURSTENBERG
MARCHON/DISNEY EYEWEAR
MARCHON/DISNEY PRINCESS
MARCHON/EMILIO PUCCI
MARCHON/FENDI
MARCHON/FLEXON

0%

Installation Completed

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 425.

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, 422

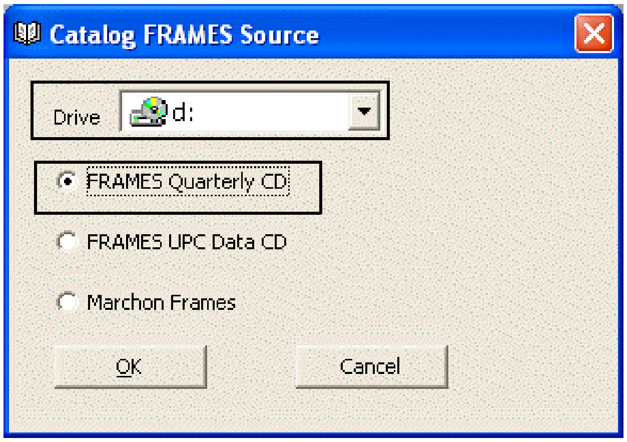
NOTES

- 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 419.
- 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 419.
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.



Catalog FRAMES Source

Drive: d:

● FRAMES Quarterly CD
○ FRAMES UPC Data CD
○ Marchon Frames

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 425.

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, 423
- To import manufacturers into FrameMate, 424

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

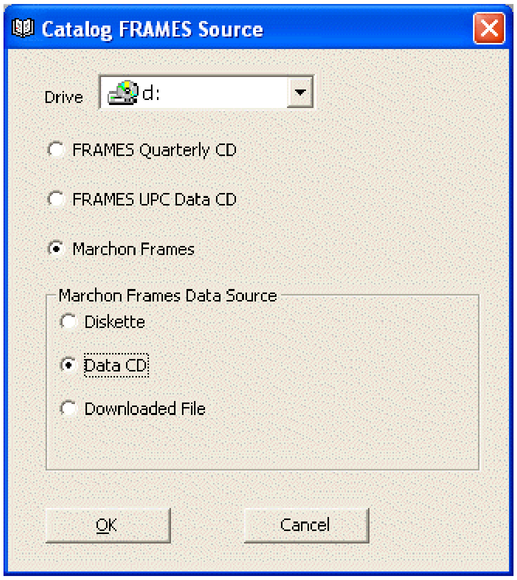
1. Open FrameMate. For more information on opening FrameMate, go to Opening FrameMate on page 419.
2. Click **Tasks** and select **Select FRAMES Source**.

   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.



Catalog FRAMES Source

Drive: d:

○ FRAMES Quarterly CD

○ FRAMES UPC Data CD

● Marchon Frames

Marchon Frames Data Source

○ Diskette

● Data CD

○ Downloaded File

6. Click **OK**.
7. Import manufacturers into FrameMate. For information on importing manufacturers, go to To import manufacturers into FrameMate on page 424.

▶ To import manufacturers into FrameMate

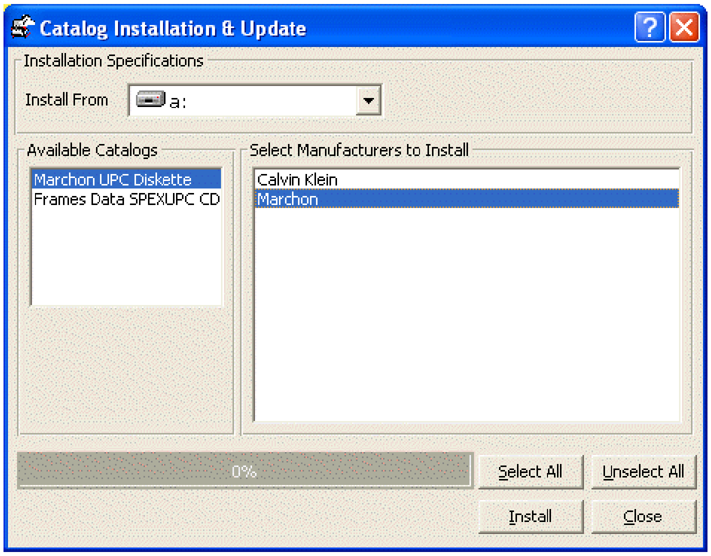
NOTE	You must install manufacturers *every time* you receive and install a new Marchon diskette, CD, or electronic download. If you do not install manufacturers every time you install a new Marchon Diskette, CD, or electronic download, you will not see updated manufacturer information in FrameMate and 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 423.
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.

5. 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.



Install From: a:

Catalog Installation & Update
Installation Specifications
Install From
a:
Available Catalogs
Marchon UPC Diskette
Frames Data SPEXUPC CD
Select Manufacturers to Install
Calvin Klein
Marchon
0%
Select All
Unselect All
Install
Close

6. Click **Install**.
7. Click **Yes** on the Installation Warning window.

   The installation begins.
8. Click **OK** on the Installation Completed window.
9. 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 425.

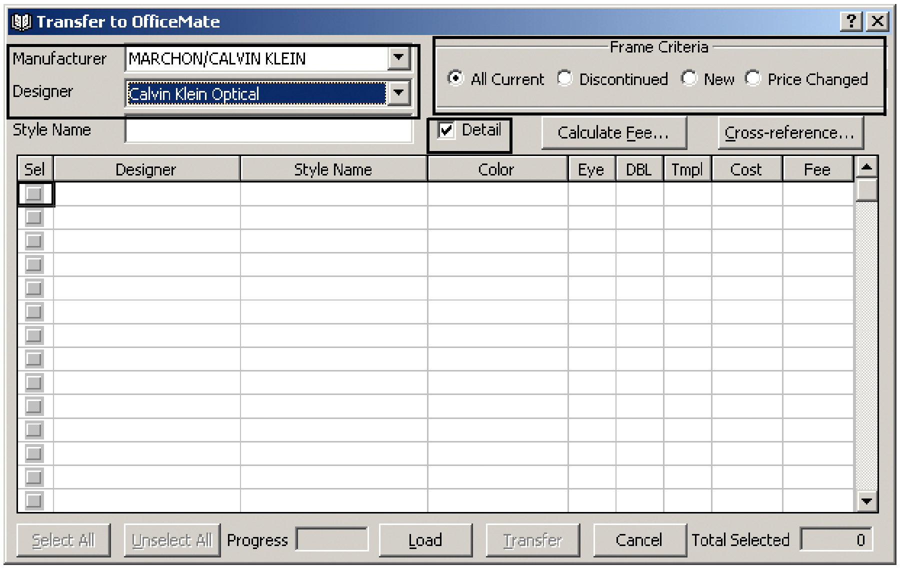
Transferring & Loading Frames into the OfficeMate Products Database

1. Open FrameMate. For more information on opening FrameMate, go to Opening FrameMate on page 419.
2. Click **Tasks** and select **Transfer Into OfficeMate**.

   The Transfer to OfficeMate window opens.
3. Select a manufacturer from the **Manufacturer** drop-down menu.
4. Select a designer from the **Designer** drop-down menu, if desired.
5. Select a **Frame Criteria** radio button.

NOTE You cannot transfer discontinued frames into OfficeMate.

6. Select the **Detail** check box if you want to include eye sizes, colors, and product codes in the transfer.

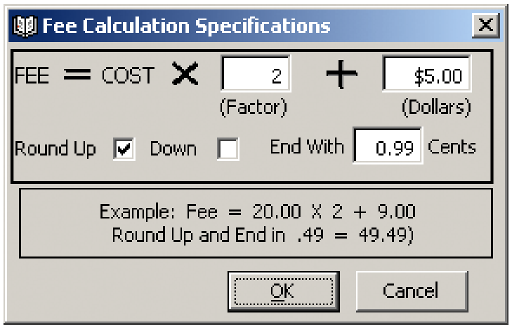

Transfer to OfficeMate
Frame Criteria
Calculate Fee...
Cross-reference...
Sel
Designer
Style Name
Color
Eye
DBL
Tmpl
Cost
Fee
Select All
Unselect All
Progress
Load
Transfer
Cancel

Manufacturer MARCHON/CALVIN KLEIN
Designer Calvin Klein Optical
Style Name
● All Current ○ Discontinued ○ New ○ Price Changed
☑ Detail
Total Selected 0

7. Click **Calculate Fee**.

   The Fee Calculation Specifications window opens.

8. Type the markup in the **Factor** text box.
9. Type additional markup dollars in the **Dollars** text box.
10. Select the **Round Up** or **Down** check box.
11. Type the value in the **Cents** text box with which you want the price to end.


Fee Calculation Specifications
OK
Cancel

FEE = COST × 2 (Factor) + $5.00 (Dollars)
Round Up ☑ Down ☐ End With 0.99 Cents

Example: Fee = 20.00 X 2 + 9.00
Round Up and End in .49 = 49.49)

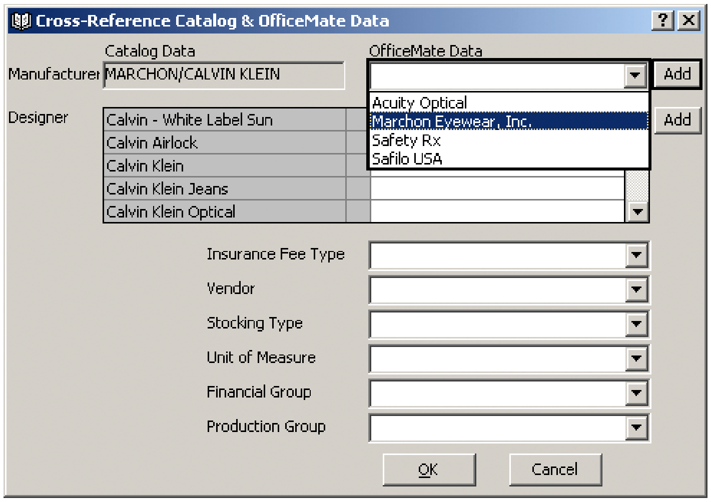
12. Click **OK**.
13. Click **Cross-reference**.

    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**.


Cross-Reference Catalog & OfficeMate Data

Catalog Data

Manufacturer MARCHON/CALVIN KLEIN

Designer
- Calvin - White Label Sun
- Calvin Airlock
- Calvin Klein
- Calvin Klein Jeans
- Calvin Klein Optical

OfficeMate Data
- Acuity Optical
- Marchon Eyewear, Inc.
- Safety Rx
- Safilo USA

NOTES

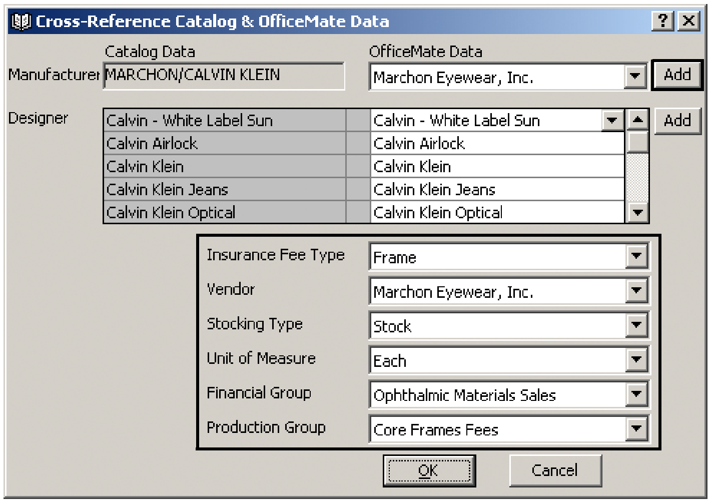
- Use the Cross Reference Catalog & OfficeMate Data window to create new manufacturers in the OfficeMate database, select an existing manufacturer that corresponds to the one you are importing from the FRAMES Data catalog, and assign OfficeMate-specific details to the products you are importing.
- The 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.



Cross-Reference Catalog & OfficeMate Data

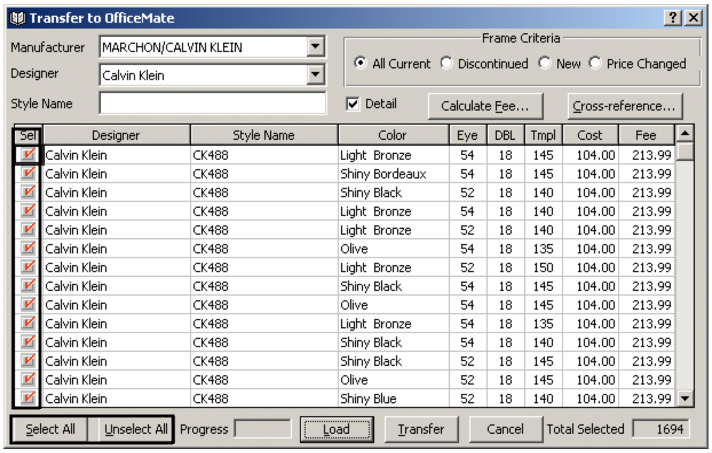
	Catalog Data	OfficeMate Data
Manufacturer	MARCHON/CALVIN KLEIN	Marchon Eyewear, Inc.
Designer	Calvin - White Label Sun	Calvin - White Label Sun
	Calvin Airlock	Calvin Airlock
	Calvin Klein	Calvin Klein
	Calvin Klein Jeans	Calvin Klein Jeans
	Calvin Klein Optical	Calvin Klein Optical

Insurance Fee Type: Frame
Vendor: Marchon Eyewear, Inc.
Stocking Type: Stock
Unit of Measure: Each
Financial Group: Ophthalmic Materials Sales
Production Group: Core Frames Fees

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.



Transfer to OfficeMate

Manufacturer: MARCHON/CALVIN KLEIN
Designer: Calvin Klein
Style Name:
Frame Criteria: ● All Current ○ Discontinued ○ New ○ Price Changed
☑ Detail

Sel	Designer	Style Name	Color	Eye	DBL	Tmpl	Cost	Fee
☑	Calvin Klein	CK488	Light Bronze	54	18	145	104.00	213.99
☑	Calvin Klein	CK488	Shiny Bordeaux	54	18	145	104.00	213.99
☑	Calvin Klein	CK488	Shiny Black	52	18	140	104.00	213.99
☑	Calvin Klein	CK488	Light Bronze	54	18	140	104.00	213.99
☑	Calvin Klein	CK488	Light Bronze	52	18	140	104.00	213.99
☑	Calvin Klein	CK488	Olive	54	18	135	104.00	213.99
☑	Calvin Klein	CK488	Light Bronze	52	18	150	104.00	213.99
☑	Calvin Klein	CK488	Shiny Black	54	18	145	104.00	213.99
☑	Calvin Klein	CK488	Olive	54	18	145	104.00	213.99
☑	Calvin Klein	CK488	Light Bronze	54	18	135	104.00	213.99
☑	Calvin Klein	CK488	Shiny Black	54	18	140	104.00	213.99
☑	Calvin Klein	CK488	Shiny Black	52	18	145	104.00	213.99
☑	Calvin Klein	CK488	Olive	52	18	145	104.00	213.99
☑	Calvin Klein	CK488	Shiny Blue	52	18	140	104.00	213.99

Progress:
Total Selected: 1694

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.

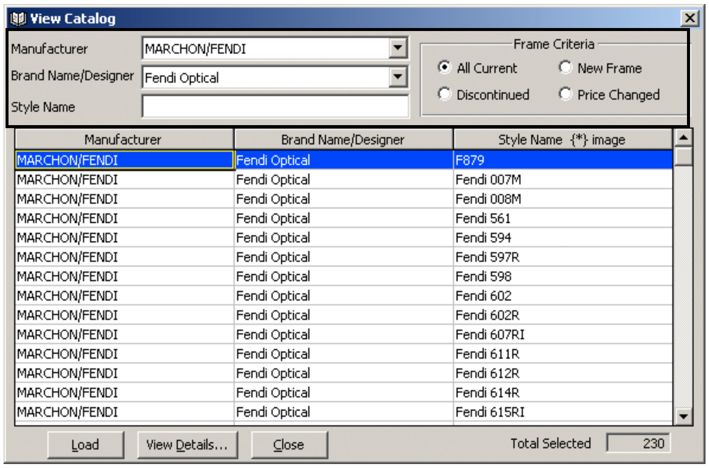
24. Click **OK** when the transfer is complete.

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 525.
> - If you use the VSP interface, ensure that each frame includes mount information.

Viewing Frame Information

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**.



Manufacturer: MARCHON/FENDI
Brand Name/Designer: Fendi Optical
Style Name:

Frame Criteria
● All Current ○ New Frame
○ Discontinued ○ Price Changed

Manufacturer	Brand Name/Designer	Style Name {*} image
MARCHON/FENDI	Fendi Optical	F879
MARCHON/FENDI	Fendi Optical	Fendi 007M
MARCHON/FENDI	Fendi Optical	Fendi 008M
MARCHON/FENDI	Fendi Optical	Fendi 561
MARCHON/FENDI	Fendi Optical	Fendi 594
MARCHON/FENDI	Fendi Optical	Fendi 597R
MARCHON/FENDI	Fendi Optical	Fendi 598
MARCHON/FENDI	Fendi Optical	Fendi 602
MARCHON/FENDI	Fendi Optical	Fendi 602R
MARCHON/FENDI	Fendi Optical	Fendi 607RI
MARCHON/FENDI	Fendi Optical	Fendi 611R
MARCHON/FENDI	Fendi Optical	Fendi 612R
MARCHON/FENDI	Fendi Optical	Fendi 614R
MARCHON/FENDI	Fendi Optical	Fendi 615RI

Total Selected 230

6. Double-click on a frame.

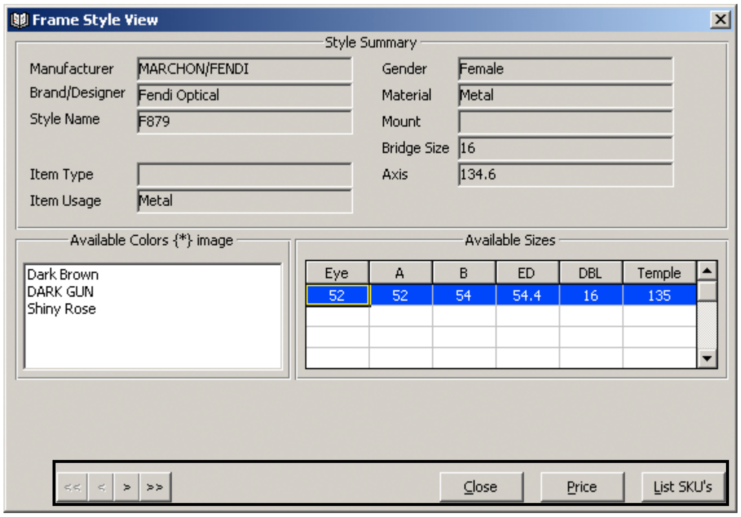
   OR

   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.



Manufacturer	MARCHON/FENDI
Brand/Designer	Fendi Optical
Style Name	F879
Item Type	
Item Usage	Metal
Gender	Female
Material	Metal
Mount	
Bridge Size	16
Axis	134.6

Dark Brown
DARK GUN
Shiny Rose

Eye	A	B	ED	DBL	Temple
52	52	54	54.4	16	135

8. Click **Close** to close the Frame Style View window.
9. Click **Close** to close the View Catalog window.

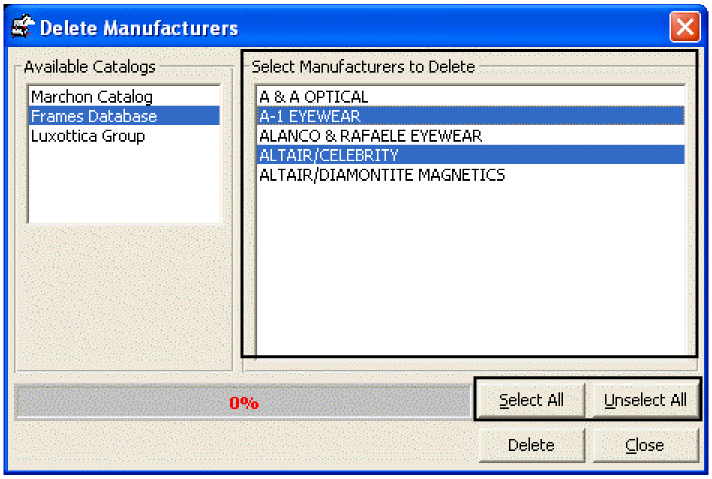
Deleting Manufacturers

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.


Delete Manufacturers
Available Catalogs
Marchon Catalog
Frames Database
Luxottica Group
Select Manufacturers to Delete
A & A OPTICAL
A-1 EYEWEAR
ALANCO & RAFAELE EYEWEAR
ALTAIR/CELEBRITY
ALTAIR/DIAMONTITE MAGNETICS
0%
Select All
Unselect All
Delete
Close

4. Click **Delete**.
5. Click **OK** on the Deletion Completed window.

Maintaining Inventory Information

10

In this chapter:

- Setting Up Inventory, 433
- Recording Product Inventory Details, 437
- Maintaining Inventory Information, 441

For more information on maintaining inventory information, watch the "OfficeMate Back Office" videos.

Maintaining inventory information in OfficeMate allows you to track and valuate 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 433.

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, 433
- To set up inventory preferences, 435
- To set up system preferences for perpetual inventory, 436

▶ 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**.

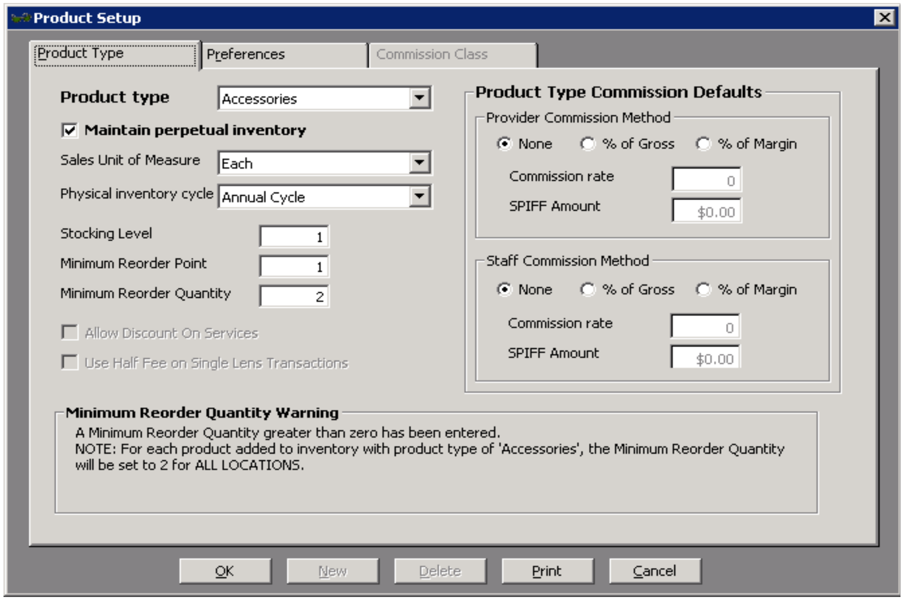
   The **Product Setup** window opens.

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 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.

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

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

   The **Product Setup** window opens.
2. Click the **Preferences** tab.

3. Type or select the start date of the first period in your inventory calendar in the **Start date of first periods** text box.

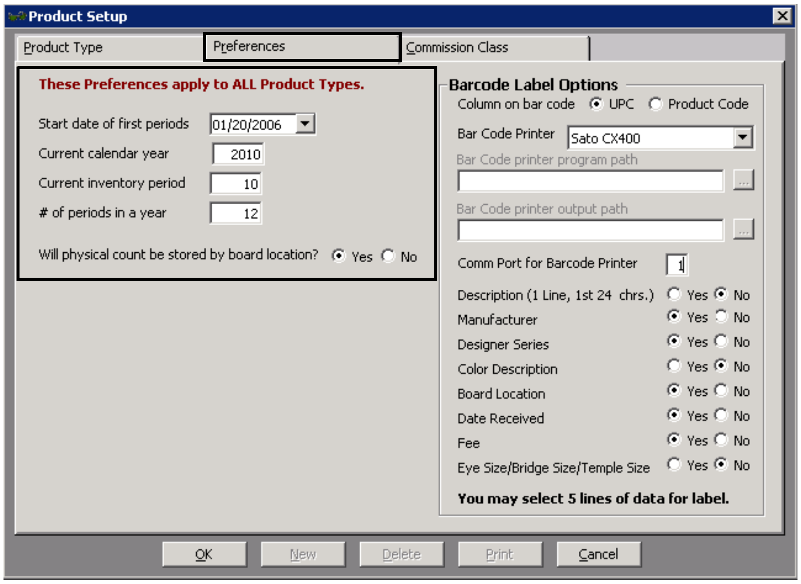
NOTE	Typically, the start date is the date your fiscal year begins; check with your accountant to confirm the start date of the first period in your inventory calendar.

4. Type the current calendar year in the **Current calendar year** text box.
5. 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.

6. Type the number of periods in a year in the **# of periods in a year** text box.
7. 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.



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.

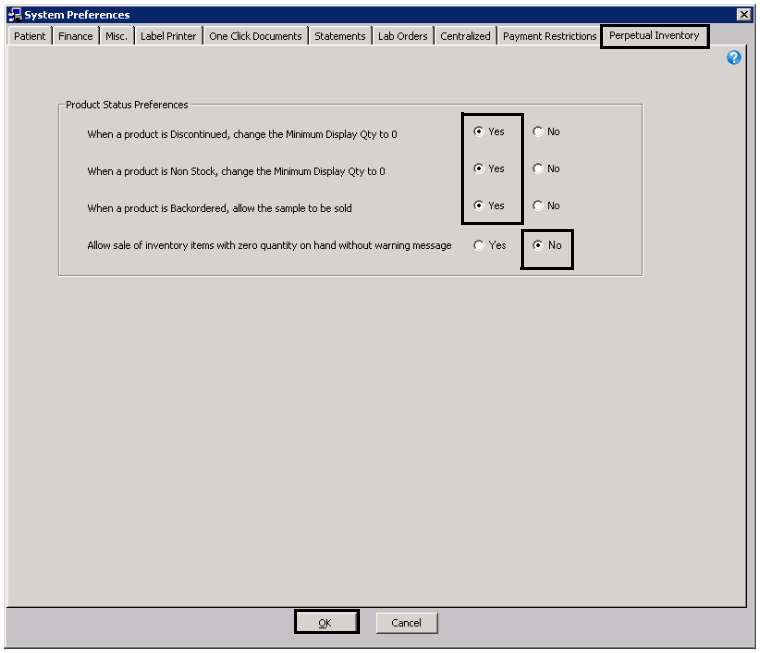
8. Click **OK** to close the Product Setup window or go to To set up product preferences on page 250 if you use a barcode printer to print barcode labels.

▶ To set up system preferences for perpetual inventory

1. 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**.


System Preferences
Patient
Finance
Misc.
Label Printer
One Click Documents
Statements
Lab Orders
Centralized
Payment Restrictions
Perpetual Inventory
OK
Cancel

Product Status Preferences

When a product is Discontinued, change the Minimum Display Qty to 0 ● Yes ○ No

When a product is Non Stock, change the Minimum Display Qty to 0 ● Yes ○ No

When a product is Backordered, allow the sample to be sold ● Yes ○ No

Allow sale of inventory items with zero quantity on hand without warning message ○ Yes ● No

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 261 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 419 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 247.
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.

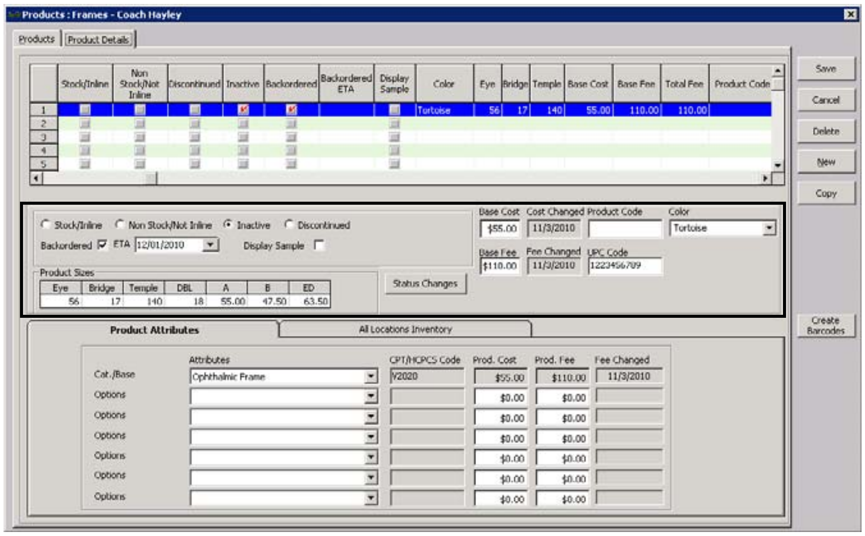
10. If you are recording information for any product except lens treatments or accessories, type the product size information in the **Product Sizes** fields.
11. Type the base cost of the product in the **Base Cost** text box.
12. Type the base fee of the product in the **Base Fee** text box.
13. Type 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 425.

14. Type or select a color from the **Color** drop-down menu, if applicable.



	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	☐	☐	☐	☐	☐		☐								

○ Stock/Inline ○ Non Stock/Not Inline ● Inactive ○ Discontinued
Backordered ☑ ETA 12/01/2010 Display Sample ☐
Base Cost $55.00 Cost Changed 11/3/2010 Product Code Color Tortoise
Base Fee $110.00 Fee Changed 11/3/2010 UPC Code 1223456709

Product Sizes

Eye	Bridge	Temple	DBL	A	B	ED
56	17	140	18	55.00	47.50	63.50

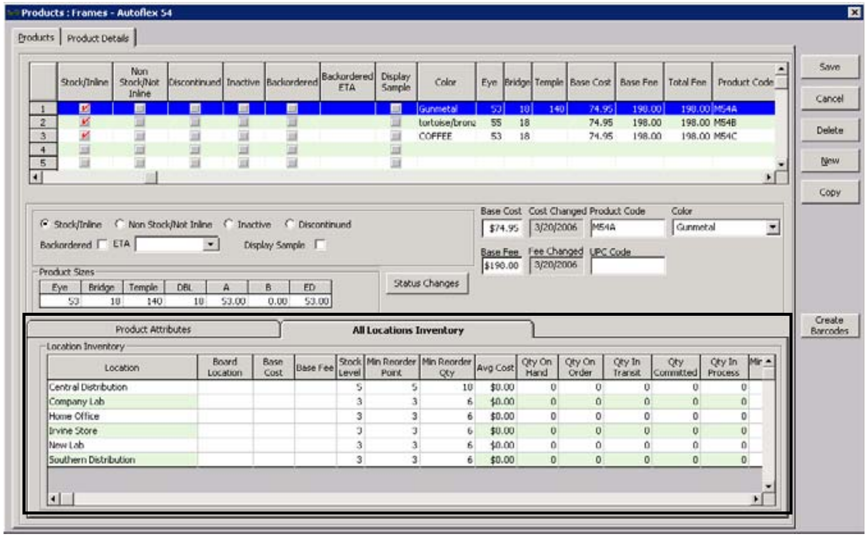
	Attributes	CPT/HCPCS Code	Prod. Cost	Prod. Fee	Fee Changed
Cat./Base	Ophthalmic Frame	V2020	$55.00	$110.00	11/3/2010
Options			$0.00	$0.00	
Options			$0.00	$0.00	
Options			$0.00	$0.00	
Options			$0.00	$0.00	
Options			$0.00	$0.00	
Options			$0.00	$0.00	

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 447.
- 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.



	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	☑	☐	☐	☐	☐		☐	Gunmetal	53	18	140	74.95	198.00	198.00	M54A
2	☑	☐	☐	☐	☐		☐	tortoise/bronz	55	18		74.95	198.00	198.00	M54B
3	☑	☐	☐	☐	☐		☐	COFFEE	53	18		74.95	198.00	198.00	M54C
4	☐	☐	☐	☐	☐		☐								
5	☐	☐	☐	☐	☐		☐								

● Stock/Inline ○ Non Stock/Not Inline ○ Inactive ○ Discontinued
Backordered ☐ ETA
Display Sample ☐

Base Cost: $74.95
Cost Changed: 3/20/2006
Product Code: M54A
Color: Gunmetal
Base Fee: $198.00
Fee Changed: 3/20/2006
UPC Code:

Product Sizes

Eye	Bridge	Temple	DBL	A	B	ED
53	18	140	18	53.00	0.00	53.00

Location 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	Mir
Central Distribution				5	5	10	$0.00	0	0	0	0	0	
Company Lab				3	3	6	$0.00	0	0	0	0	0	
Home Office				3	3	6	$0.00	0	0	0	0	0	
Irvine Store				3	3	6	$0.00	0	0	0	0	0	
New Lab				3	3	6	$0.00	0	0	0	0	0	
Southern Distribution				3	3	6	$0.00	0	0	0	0	0	

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.

Maintaining Inventory Information

This section tells you how to record inventory adjustments, purchase orders, physical counts, and period closes, including how

- To adjust your inventory, 441
- To create & maintain purchase orders, 443
- To manually count & record your physical inventory, 447
- To scan & record your physical inventory, 449
- To close inventory periods, 451

▶ To adjust your inventory

For more information on adjusting your inventory, watch the "Inventory Adjustments" video.

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	
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.

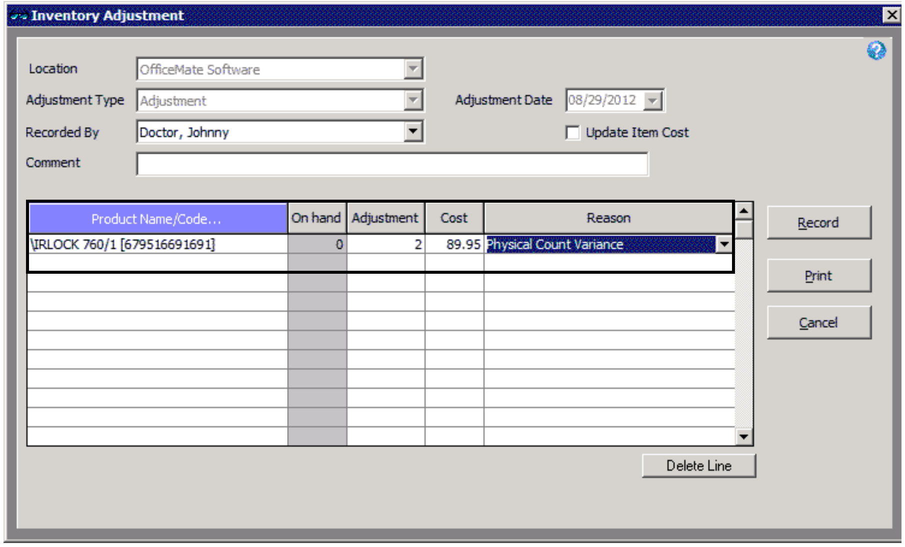
3. Type comments in the **Comment** text box, if applicable.
4. Select a product to adjust using one of the following methods:
   - Type a product name or code into a **Product Name/Code** text box.
   - Click on the **Product Name/Code** column heading to search for a product. For more information on searching for products, go to Finding Products & Services on page 259.

5. 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 437. For more information on the Products window, go to To add or modify products on page 262.
- 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.

6. Type a new product cost in the **Cost** text box, if applicable, and select the **Update Item Cost** check box.
7. Select a reason for the adjustment from the **Reason** drop-down menu.



Location: OfficeMate Software
Adjustment Type: Adjustment
Adjustment Date: 08/29/2012
Recorded By: Doctor, Johnny
☐ Update Item Cost
Comment:

Product Name/Code...	On hand	Adjustment	Cost	Reason
\IRLOCK 760/1 [679516691691]	0	2	89.95	Physical Count Variance

8. Click **Record**.

   The **Qty on Hand** text box in the Product Detail Maintenance window is updated.

9. Optionally, click **Print** to print a record of the adjustment.

▶ To transfer inventory to another location

For more information on transferring inventory, watch the “Transfers” video.

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 259.
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:

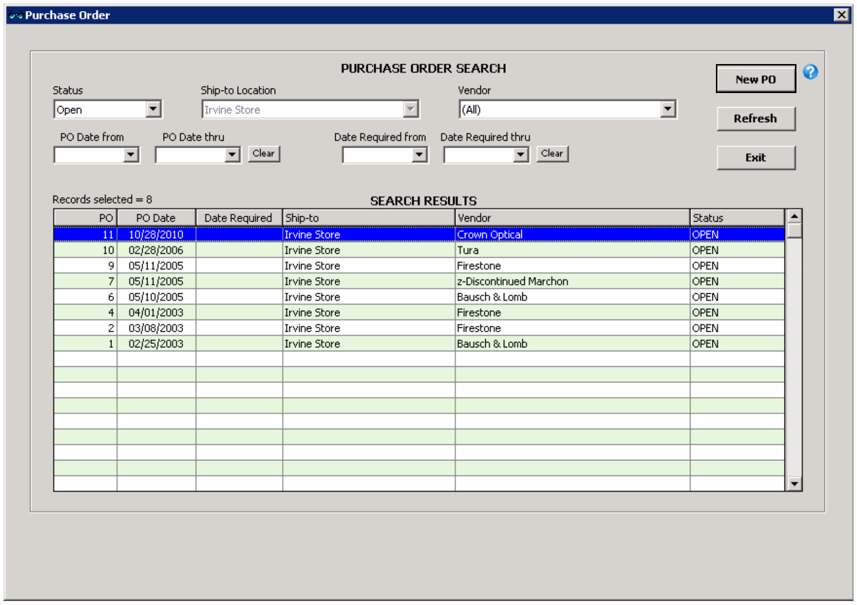
- Select a status from the **Status** drop-down menu as needed.
- Select a vendor from the **Vendor** drop-down as needed.
- Narrow the time frame you are searching by entering a beginning date the product is required in the **Date Required from** field and an ending date the product is required in the **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.

2. To create a new purchase order, click **New PO**.

   The Purchase Order window opens.



Status: Open
Ship-to Location: Irvine Store
Vendor: (All)
PO Date from
PO Date thru
Date Required from
Date Required thru

Records selected = 8

SEARCH RESULTS

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

3. Type the date by which the product is needed in the **Date Required** field.
4. Type the reference or tracking information in the **Reference** text box, if available.
5. Type the name of the freight carrier in the **Ship Via** text box, if known.
6. Type the freight-on-board code or information in the **FOB** text box, as needed.
7. Type notes in the **Notes** text box, as needed.
8. Click **Find Vendor** to add the vendor information.

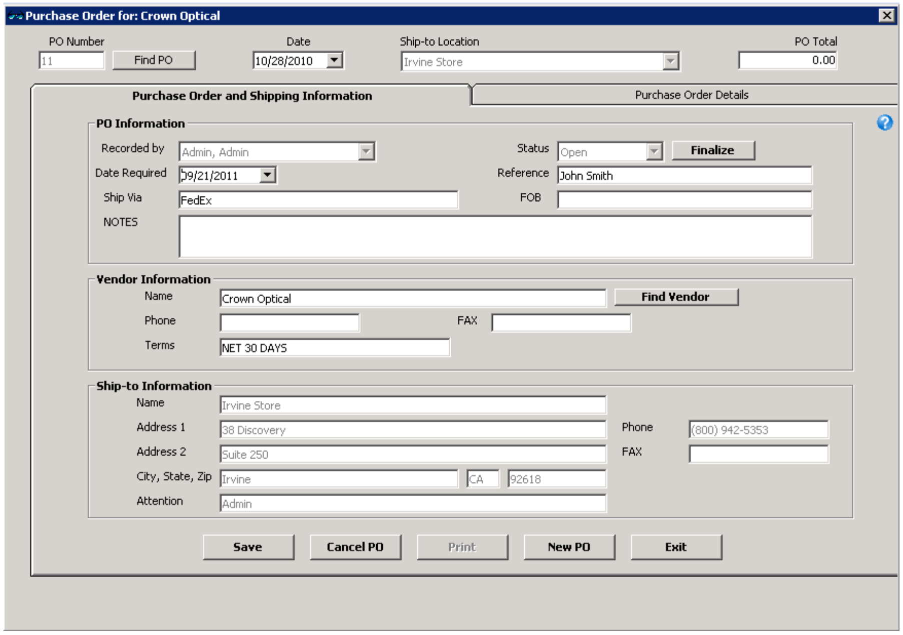
   The Vendor Select window opens.

9. Select the vendor from the list and click **Select**.

   The vendor information populates the Name, Phone, Fax, and Terms fields.

10. 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**.



Purchase Order for: Crown Optical

PO Number: 11
Date: 10/28/2010
Ship-to Location: Irvine Store
PO Total: 0.00

Purchase Order and Shipping Information

PO Information
Recorded by: Admin, Admin
Status: Open
Date Required: 09/21/2011
Reference: John Smith
Ship Via: FedEx
FOB:
NOTES:

Vendor Information
Name: Crown Optical
Phone:
FAX:
Terms: NET 30 DAYS

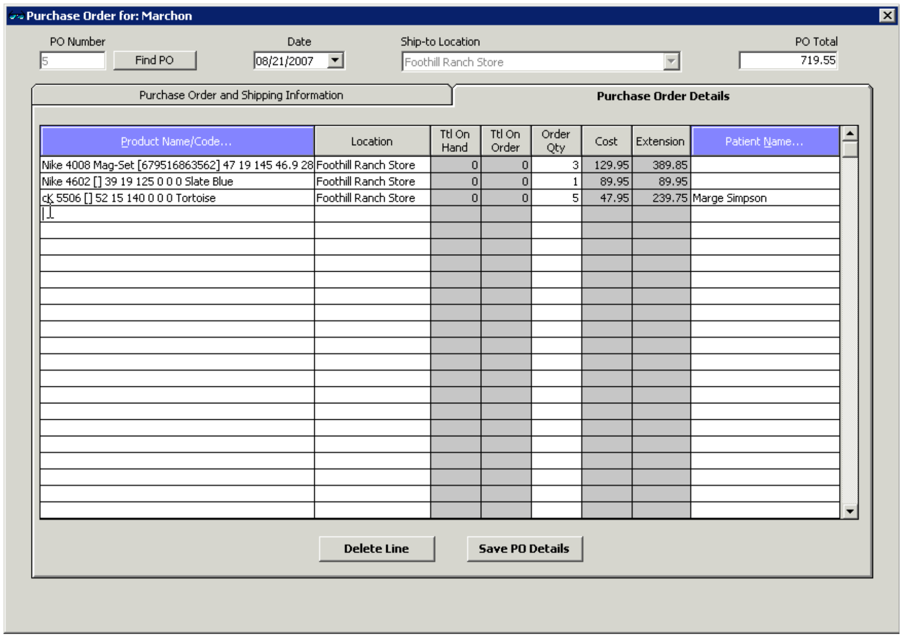
Ship-to Information
Name: Irvine Store
Address 1: 38 Discovery
Phone: (800) 942-5353
Address 2: Suite 250
FAX:
City, State, Zip: Irvine, CA, 92618
Attention: Admin

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 259.

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**.


Purchase Order for: Marchon
Find PO
Purchase Order and Shipping Information
Purchase Order Details
Delete Line
Save PO Details

PO Number: 5
Date: 08/21/2007
Ship-to Location: Foothill Ranch Store
PO Total: 719.55

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	
cK 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:
    a. Click the **Purchase Order and Shipping Information** tab.
    b. Click **Finalize**.
    c. Click **Print**, if needed.
    d. 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.

1. 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.
2. Select a location from the **Location** drop-down menu.
3. Select the **Yes** radio button to indicate that this is a new inventory cycle.
4. Select a manufacturer from the **Manufacturer** drop-down menu, if you are recording your inventory by manufacturer.
5. 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 437.
6. 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 97.
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**.

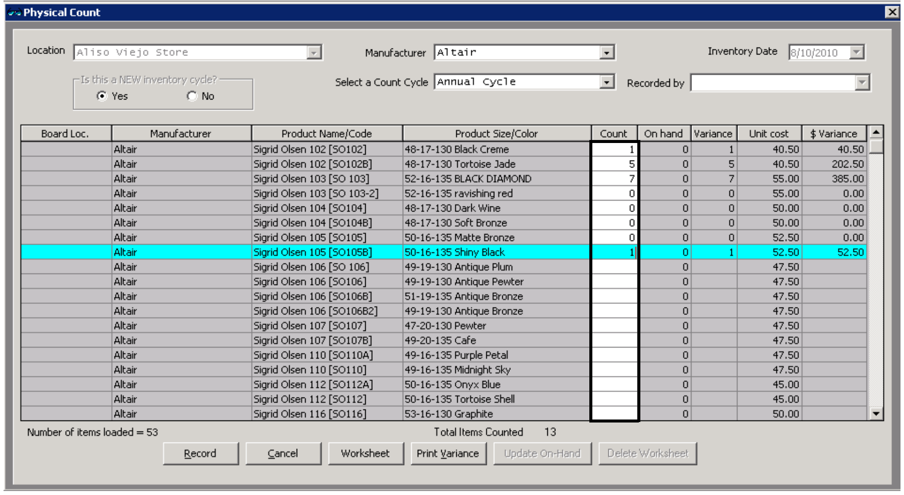
    The **Physical Count** window opens.
13. Select the **No** radio button to indicate that this is not a new inventory cycle.
14. Select an inventory count cycle from the **Select a Previous Cycle** drop-down menu.

    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.**



Location: Aliso Viejo Store
Manufacturer: Altair
Inventory Date: 8/10/2010
Is this a NEW inventory cycle? ● Yes ○ No
Select a Count Cycle: Annual Cycle
Recorded by:

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 [SO104B]	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 [SO105B]	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 Sky		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

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**.

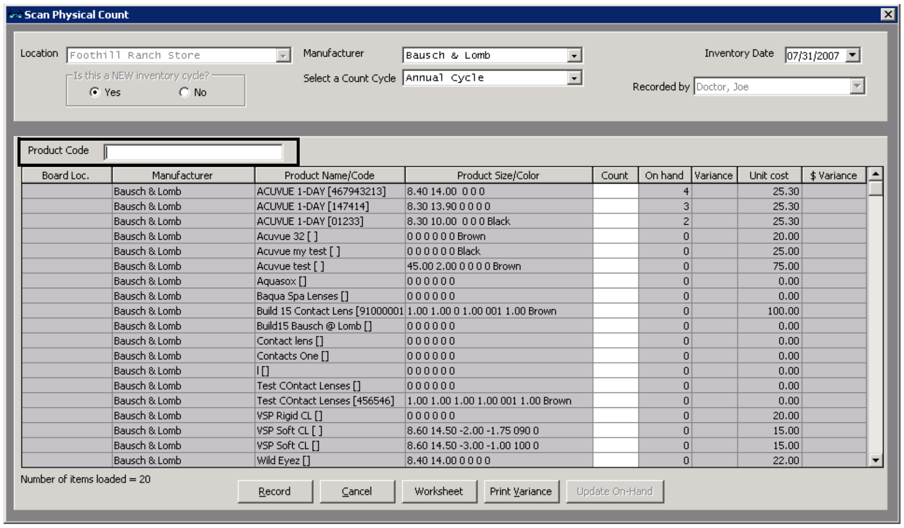
   OR

   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.



Location: Foothill Ranch Store
Is this a NEW inventory cycle? ● Yes ○ No
Manufacturer: Bausch & Lomb
Select a Count Cycle: Annual Cycle
Inventory Date: 07/31/2007
Recorded by: Doctor, Joe
Product Code:

Board Loc.	Manufacturer	Product Name/Code	Product Size/Color	Count	On hand	Variance	Unit cost	$ Variance
	Bausch & Lomb	ACUVUE 1-DAY [467943213]	8.40 14.00 0 0 0		4		25.30	
	Bausch & Lomb	ACUVUE 1-DAY [147414]	8.30 13.90 0 0 0 0		3		25.30	
	Bausch & Lomb	ACUVUE 1-DAY [01233]	8.30 10.00 0 0 0 Black		2		25.30	
	Bausch & Lomb	Acuvue 32 [ ]	0 0 0 0 0 0 Brown		0		20.00	
	Bausch & Lomb	Acuvue my test [ ]	0 0 0 0 0 0 Black		0		25.00	
	Bausch & Lomb	Acuvue test [ ]	45.00 2.00 0 0 0 0 Brown		0		75.00	
	Bausch & Lomb	Aquasox []	0 0 0 0 0 0		0		0.00	
	Bausch & Lomb	Baqua Spa Lenses []	0 0 0 0 0 0		0		0.00	
	Bausch & Lomb	Build 15 Contact Lens [91000001	1.00 1.00 0 1.00 001 1.00 Brown		0		100.00	
	Bausch & Lomb	Build15 Bausch @ Lomb []	0 0 0 0 0 0		0		0.00	
	Bausch & Lomb	Contact lens []	0 0 0 0 0 0		0		0.00	
	Bausch & Lomb	Contacts One []	0 0 0 0 0 0		0		0.00	
	Bausch & Lomb	I []	0 0 0 0 0 0		0		0.00	
	Bausch & Lomb	Test COntact Lenses []	0 0 0 0 0 0		0		0.00	
	Bausch & Lomb	Test COntact Lenses [456546]	1.00 1.00 1.00 1.00 001 1.00 Brown		0		0.00	
	Bausch & Lomb	VSP Rigid CL []	0 0 0 0 0 0		0		20.00	
	Bausch & Lomb	VSP Soft CL [ ]	8.60 14.50 -2.00 -1.75 090 0		0		15.00	
	Bausch & Lomb	VSP Soft CL []	8.60 14.50 -3.00 -1.00 100 0		0		15.00	
	Bausch & Lomb	Wild Eyez []	8.40 14.00 0 0 0 0		0		22.00	

Number of items loaded = 20

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

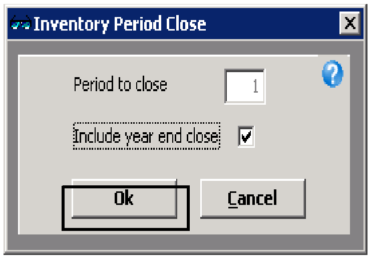
An inventory period accumulates until you specifically close it. Close your inventory periods according to your normal accounting practices.

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**.



Period to close 1

Include year end close ☑

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.

Processing Insurance Claims

11

In this chapter:

- Processing CMS 1500 Claims, 453
- Processing UB-04 Claims, 482

Processing CMS 1500 Claims

For more information on processing claims, watch the "OfficeMate Biller 'Go'" 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 455.
2. Select insurance claims. For more information on selecting claims, go to Searching for Insurance Claims on page 456.
3. Correct errors in insurance claims. For more information on correcting errors, go to Correcting Errors in Insurance Claims on page 457.
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 460.
5. Print or export electronic insurance claims. For more information on exporting insurance claims, go to Exporting Insurance Claims on page 472.
6. Preview and print insurance claims. For more information on previewing and printing insurance claims, go to Printing Insurance Claims on page 477.

7. View insurance claim billing histories. For more information on viewing billing histories, go to Using the Batch History on page 478.

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 213.
- 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 261.
- 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, 455
- Maintaining Third-Party Receiver Information, 455
- Searching for Insurance Claims, 456
- Correcting Errors in Insurance Claims, 457
- Recording Additional Information on the CMS 1500 Form & ANSI File, 460
- Exporting Insurance Claims, 472
- Sending Claims to and Receiving Reports from McKesson, 474
- Printing Insurance Claims, 477
- Adjusting CMS 1500 Form Margins, 478
- Using the Batch History, 478
- Releasing & Closing Claims on Hold, 481

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

For more information on maintaining third-party receiver information, watch the "Maintenance Options for Creating Claims" video.

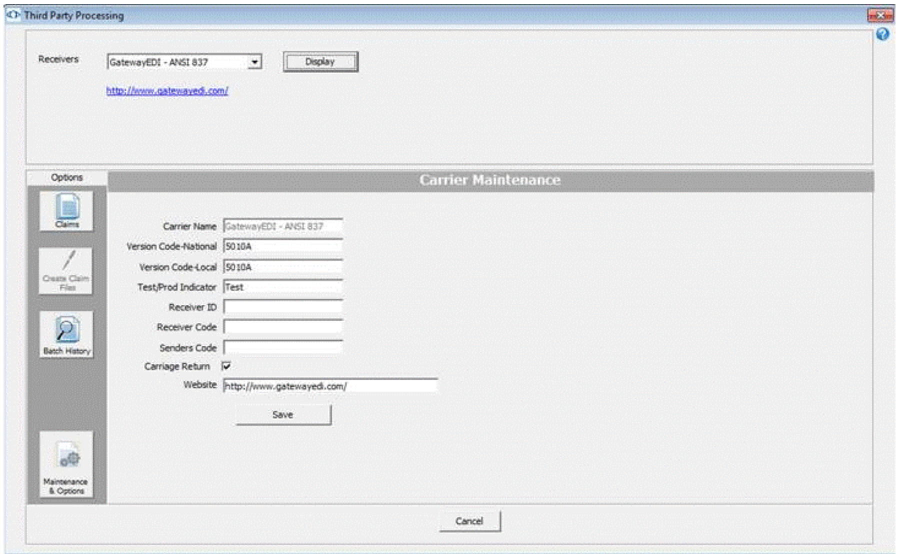
1. Open the Third Party Processing window. For more information on opening this window, go to Opening the Third Party Processing Window on page 455.
2. Click the **Maintenance & Options** icon.
3. Select a third-party receiver from the **Receiver** drop-down menu.
4. Click **Display**.

   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.

9. Type the third-party receiver’s Web address in the **Website** text box.



Receivers: GatewayEDI - ANSI 837
http://www.gatewayedi.com/

Carrier Name: GatewayEDI - ANSI 837
Version Code-National: 5010A
Version Code-Local: 5010A
Test/Prod Indicator: Test
Receiver ID:
Receiver Code:
Senders Code:
Carriage Return: ☑
Website: http://www.gatewayedi.com/

10. Click **Save**.

Searching for Insurance Claims

This section tells you how to search for claims.

For more information on searching for insurance claims, watch the “Searching & Viewing Claims” video.

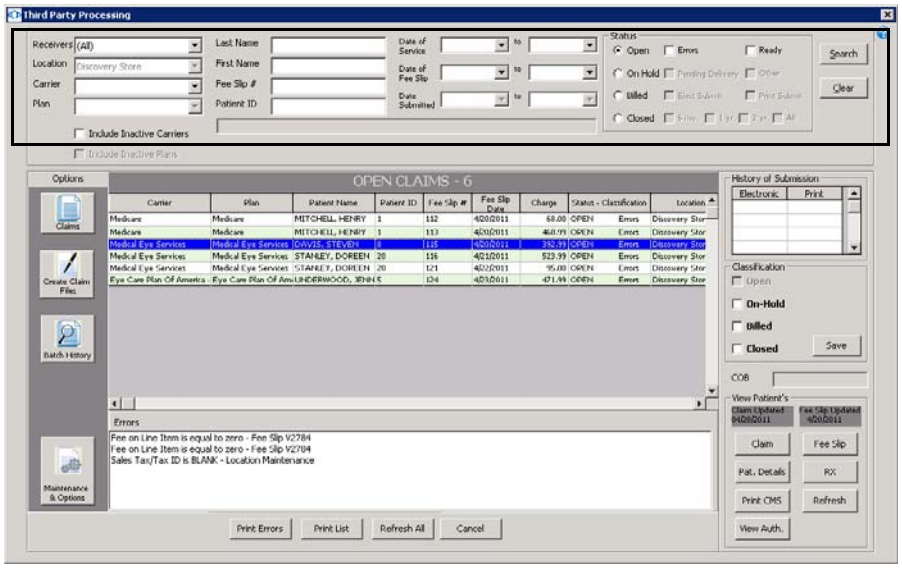
1. Open the Third Party Processing window. For more information on opening this window, go to Opening the Third Party Processing Window on page 455.
2. Select a format or clearinghouse from the **Receivers** drop-down menu.
3. Select a location from the **Location** drop-down menu, as needed.
4. Select an insurance carrier from the **Carrier** drop-down menu, as needed.
5. Select an insurance plan from the **Plan** drop-down menu, as needed.
6. Select the **Include Inactive Carriers** check box to include inactive insurance carriers in your search results, as needed.
7. Select the **Include Inactive Plans** check box to include inactive insurance plans in your search results, as needed.
8. 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.
9. 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.
10. 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 157.

- 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.


Third Party Processing
Receivers
Location
Carrier
Plan
Last Name
First Name
Fee Slip #
Patient ID
Date of Service
Date of Fee Slip
Date Submitted
to
Status
Open
Errors
Ready
On Hold
Pending Delivery
Other
Billed
Elect Submit
Print Submit
Closed
6 mo.
1 yr.
2 yr.
All
Search
Clear
Include Inactive Carriers
Include Inactive Plans
Options
Claims
Create Claim Files
Batch History
Maintenance & Options
History of Submission
Electronic
Print
Classification
Open
On-Hold
Billed
Closed
Save
COB
View Patient's
Claim Updated 04/20/2011
Fee Slip Updated 4/20/2011
Claim
Fee Slip
Pat. Details
RX
Print CMS
Refresh
View Auth.
Print Errors
Print List
Refresh All
Cancel

Receivers: (All)
Location: Discovery Store

OPEN CLAIMS - 6

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 Errors	Discovery Stor
Medicare	Medicare	MITCHELL, HENRY	1	113	4/20/2011	460.99	OPEN Errors	Discovery Stor
Medical Eye Services	Medical Eye Services	DAVIS, STEVEN	8	115	4/20/2011	392.99	OPEN Errors	Discovery Stor
Medical Eye Services	Medical Eye Services	STANLEY, DOREEN	20	116	4/21/2011	523.99	OPEN Errors	Discovery Stor
Medical Eye Services	Medical Eye Services	STANLEY, DOREEN	20	121	4/22/2011	95.00	OPEN Errors	Discovery Stor
Eye Care Plan Of America	Eye Care Plan Of Am	UNDERWOOD, JENN	5	124	4/23/2011	471.99	OPEN Errors	Discovery Stor

Errors

```
Fee on Line Item is equal to zero - Fee Slip V2784
Fee on Line Item is equal to zero - Fee Slip V2704
Sales Tax/Tax ID is BLANK - Location Maintenance
```

Correcting Errors in Insurance Claims

For more information on correcting errors in insurance claims, watch the "Correcting Third Party Processing 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.

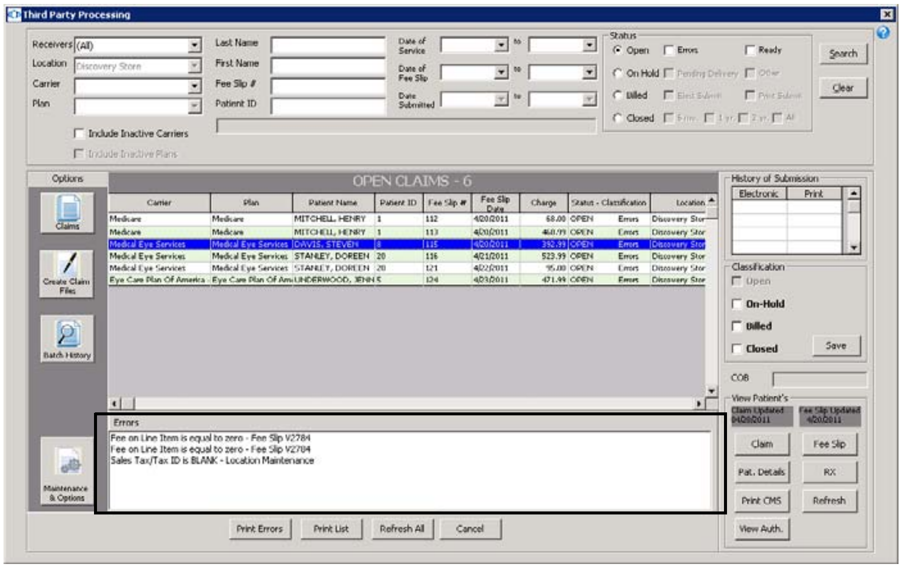
> **NOTE** Some errors in insurance claims may be caused by using improper short dates. Ensure that your computer is using the MM/DD/YYYY short date format.

1. Open the Third Party Processing window. For more information on opening this window, go to Opening the Third Party Processing Window on page 455.
2. Search for insurance claims. For more information on searching for insurance claims, go to Searching for Insurance Claims on page 456.

   > **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 456.

3. Select a claim from the results list.

   The claim errors are displayed in the Errors box that appears below the search results.


Third Party Processing
Receivers
(All)
Location
Discovery Store
Carrier
Plan
Last Name
First Name
Fee Slip #
Patient ID
Date of Service
Date of Fee Slip
Date Submitted
to
Include Inactive Carriers
Include Inactive Plans
Status
Open
Errors
Ready
On Hold
Pending Delivery
Other
Billed
Elect Submit
Print Submit
Closed
6 mo.
1 yr.
2 yr.
All
Search
Clear
Options
Claims
Create Claim Files
Batch History
Maintenance & Options
History of Submission
Electronic
Print
Classification
Open
On-Hold
Billed
Closed
Save
COB
View Patient's
Claim Updated
Fee Slip Updated
Claim
Fee Slip
Pat. Details
RX
Print CMS
Refresh
View Auth.
Print Errors
Print List
Refresh All
Cancel

OPEN CLAIMS - 6

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	Errors	Discovery Stor
Medicare	Medicare	MITCHELL, HENRY	1	113	4/20/2011	460.99	OPEN	Errors	Discovery Stor
Medical Eye Services	Medical Eye Services	DAVIS, STEVEN	8	115	4/20/2011	392.99	OPEN	Errors	Discovery Stor
Medical Eye Services	Medical Eye Services	STANLEY, DOREEN	20	116	4/21/2011	523.99	OPEN	Errors	Discovery Stor
Medical Eye Services	Medical Eye Services	STANLEY, DOREEN	20	121	4/22/2011	95.00	OPEN	Errors	Discovery Stor
Eye Care Plan Of America	Eye Care Plan Of Am	UNDERWOOD, JENN	5	124	4/23/2011	471.99	OPEN	Errors	Discovery Stor

Errors

```
Fee on Line Item is equal to zero - Fee Slip V2784
Fee on Line Item is equal to zero - Fee Slip V2704
Sales Tax/Tax ID is BLANK - Location Maintenance
```

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 206. For more information on

recording insurance information, go to To record insurance information on page 213.

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 481.
- Select the **Billed** check box to indicate that this claim has been billed and click **Save**.

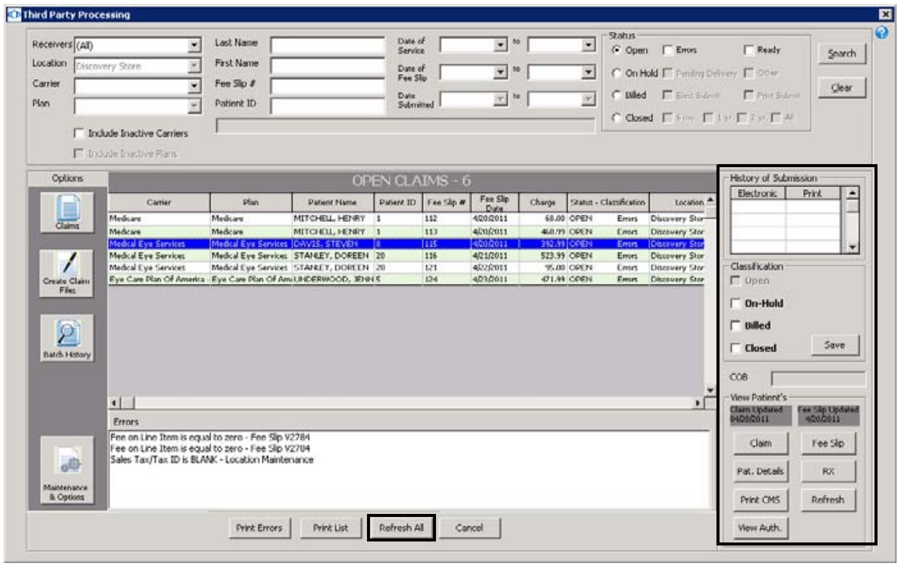
NOTE	OfficeMate automatically selects the Billed check box when the claim is included in an electronic file. You will only manually select the Billed check box if the claim is individually printed or generated and submitted outside of OfficeMate.

- 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.

6. 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.


Third Party Processing
Receivers
Location
Carrier
Plan
Last Name
First Name
Fee Slip #
Patient ID
Date of Service
Date of Fee Slip
Date Submitted
to
Include Inactive Carriers
Include Inactive Plans
Status
Open
Errors
Ready
On Hold
Pending Delivery
Other
Billed
Elect Submit
Print Submit
Closed
Fr/m
1 yr.
2 yr.
All
Search
Clear
Options
Claims
Create Claim Files
Batch History
Maintenance & Options
History of Submission
Electronic
Print
Classification
Open
On-Hold
Billed
Closed
Save
COB
View Patient's
Claim
Fee Slip
Pat. Details
RX
Print CMS
Refresh
View Auth.
Print Errors
Print List
Refresh All
Cancel

Receivers: (All)

Location: Discovery Store

● Open

OPEN CLAIMS - 6

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 Errors	Discovery Stor
Medicare	Medicare	MITCHELL, HENRY	1	113	4/20/2011	460.99	OPEN Errors	Discovery Stor
Medical Eye Services	Medical Eye Services	DAVIS, STEVEN	8	115	4/20/2011	392.99	OPEN Errors	Discovery Stor
Medical Eye Services	Medical Eye Services	STANLEY, DOREEN	20	116	4/21/2011	523.99	OPEN Errors	Discovery Stor
Medical Eye Services	Medical Eye Services	STANLEY, DOREEN	20	121	4/22/2011	95.00	OPEN Errors	Discovery Stor
Eye Care Plan Of America	Eye Care Plan Of Am	UNDERWOOD, JENN	5	124	4/23/2011	471.99	OPEN Errors	Discovery Stor

Errors

Fee on Line Item is equal to zero - Fee Slip V2784
Fee on Line Item is equal to zero - Fee Slip V2784
Sales Tax/Tax ID is BLANK - Location Maintenance

Claim Updated 04/20/2011
Fee Slip Updated 4/20/2011

7. 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 460; otherwise, go to Printing Insurance Claims on page 477 or Exporting Insurance Claims on page 472.

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

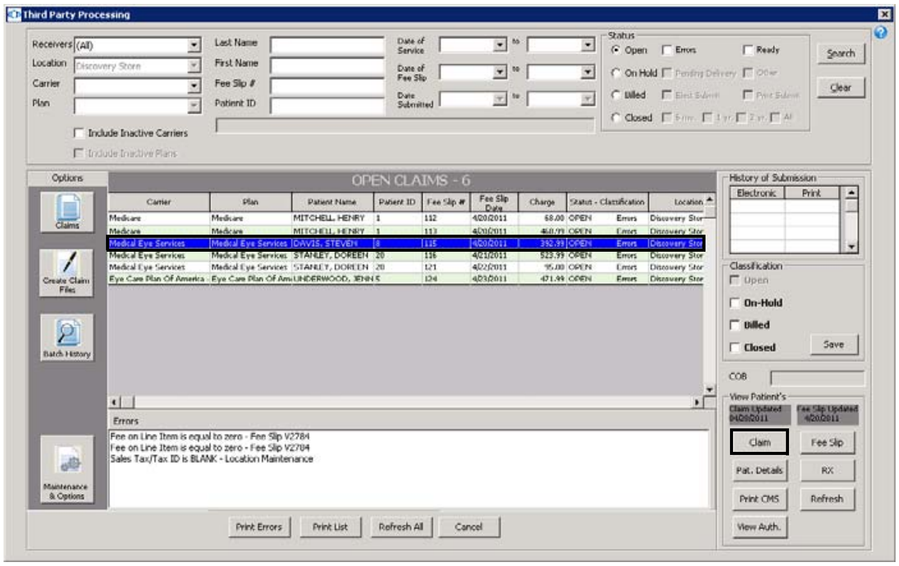
- To record additional information on the CMS 1500 form, 461
- To add additional information to the ANSI file, 470
- To reprocess individual claims, 472

▶ 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 455.
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 456.
3. Correct any errors in the insurance claims. For more information on correcting errors, go to Correcting Errors in Insurance Claims on page 457.

4. Select an insurance claim and click **Claim**.


Third Party Processing
Receivers
Location
Carrier
Plan
Last Name
First Name
Fee Slip #
Patient ID
Date of Service
Date of Fee Slip
Date Submitted
to
Status
Open
On Hold
Billed
Closed
Errors
Ready
Pending Delivery
Other
Elect Submit
Print Submit
Search
Clear
Include Inactive Carriers
Include Inactive Plans
Options
Claims
Create Claim Files
Batch History
Maintenance & Options
History of Submission
Electronic
Print
Classification
Open
On-Hold
Billed
Closed
Save
COB
View Patient's
Claim
Fee Slip
Pat. Details
RX
Print CMS
Refresh
View Auth.
Print Errors
Print List
Refresh All
Cancel

Receivers (All)
Location Discovery Store
Status: ● Open
Claim Updated 04/20/2011
Fee Slip Updated 4/20/2011

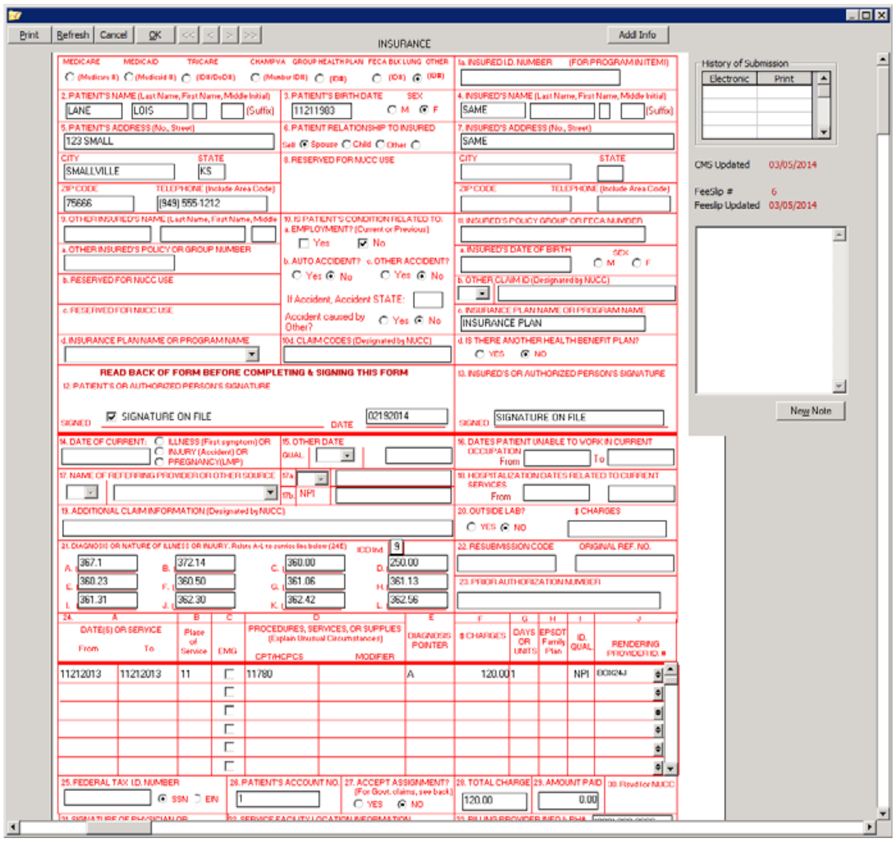
OPEN CLAIMS - 6

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 Errors	Discovery Stor
Medicare	Medicare	MITCHELL, HENRY	1	113	4/20/2011	468.99	OPEN Errors	Discovery Stor
Medical Eye Services	Medical Eye Services	DAVIS, STEVEN	8	115	4/20/2011	392.99	OPEN Errors	Discovery Stor
Medical Eye Services	Medical Eye Services	STANLEY, DOREEN	20	116	4/21/2011	523.99	OPEN Errors	Discovery Stor
Medical Eye Services	Medical Eye Services	STANLEY, DOREEN	20	121	4/22/2011	95.00	OPEN Errors	Discovery Stor
Eye Care Plan Of America	Eye Care Plan Of Am	UNDERWOOD, JENN	5	124	4/23/2011	471.99	OPEN Errors	Discovery Stor

Errors

Fee on Line Item is equal to zero - Fee Slip V2784
Fee on Line Item is equal to zero - Fee Slip V2704
Sales Tax/Tax ID is BLANK - Location Maintenance

The CMS 1500 form opens.


Print
Refresh
Cancel
OK
<<
<
>
>>
Add Info
INSURANCE
MEDICARE
MEDICAID
TRICARE
CHAMPVA
GROUP HEALTH PLAN
FECA BLK LUNG
OTHER
History of Submission
Electronic
Print
New Note

1a. INSURED I.D. NUMBER (FOR PROGRAM IN ITEM 1)
2. PATIENT'S NAME (Last Name, First Name, Middle Initial): LANE LOIS
3. PATIENT'S BIRTH DATE: 11211983 SEX: ○ M ● F
4. INSURED'S NAME (Last Name, First Name, Middle Initial): SAME
5. PATIENT'S ADDRESS (No., Street): 123 SMALL
CITY: SMALLVILLE STATE: KS
ZIP CODE: 75666 TELEPHONE (Include Area Code): (949) 555-1212
6. PATIENT RELATIONSHIP TO INSURED: Self ● Spouse ○ Child ○ Other ○
7. INSURED'S ADDRESS (No., Street): SAME
10. IS PATIENT'S CONDITION RELATED TO:
a. EMPLOYMENT? (Current or Previous) ☐ Yes ☑ No
b. AUTO ACCIDENT? ○ Yes ● No
c. OTHER ACCIDENT? ○ Yes ● No
Accident caused by Other? ○ Yes ● No
c. INSURANCE PLAN NAME OR PROGRAM NAME: INSURANCE PLAN
d. IS THERE ANOTHER HEALTH BENEFIT PLAN? ○ YES ● NO
READ BACK OF FORM BEFORE COMPLETING & SIGNING THIS FORM
12. PATIENT'S OR AUTHORIZED PERSON'S SIGNATURE
SIGNED ☑ SIGNATURE ON FILE DATE 02192014
13. INSURED'S OR AUTHORIZED PERSON'S SIGNATURE
SIGNED SIGNATURE ON FILE
20. OUTSIDE LAB? ○ YES ● NO
21. DIAGNOSIS OR NATURE OF ILLNESS OR INJURY. Relate A-L to service line below (24E) ICD Ind. 9
A. 367.1 B. 372.14 C. 360.00 D. 250.00
E. 360.23 F. 360.50 G. 361.06 H. 361.13
I. 361.31 J. 362.30 K. 362.42 L. 362.56

24. A DATE(S) OF SERVICE From	To	B Place of Service	C EMG	D PROCEDURES, SERVICES, OR SUPPLIES CPT/HCPCS	MODIFIER	E DIAGNOSIS POINTER	F $ CHARGES	G DAYS OR UNITS	H EPSDT Family Plan	I ID. QUAL	J RENDERING PROVIDER ID. #
11212013	11212013	11	☐	11780		A	120.00	1		NPI	[illegible]

25. FEDERAL TAX I.D. NUMBER ● SSN ○ EIN
26. PATIENT'S ACCOUNT NO.: 1
27. ACCEPT ASSIGNMENT? (For Govt. claims, see back) ○ YES ● NO
28. TOTAL CHARGE: 120.00
29. AMOUNT PAID: 0.00

CMS Updated 03/05/2014
FeeSlip # 6
Feeslip Updated 03/05/2014

5. 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 **EPSDT Codes** drop-down menu (AV=Available; S2=Under Treatment; ST=New Service Requested; NU=Not Used; Y=Yes; N=No).

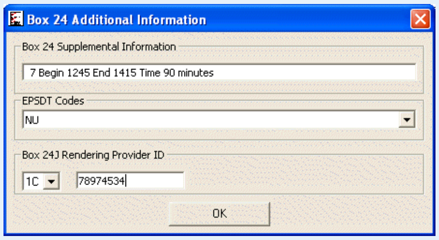
NOTE, CONT.

- **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 24 Supplemental Information: 7 Begin 1245 End 1415 Time 90 minutes

EPSDT Codes: NU

Box 24J Rendering Provider ID: 1C 78974534

- **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 **Addl Info** to open the CMS - Additional Information window and follow the instructions below:

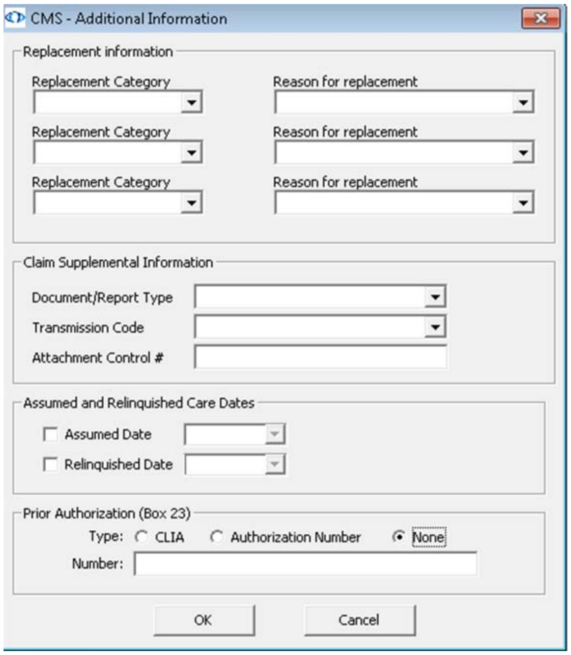
a. Select a replacement category and reason from the **Replacement information** drop-down menus.

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.

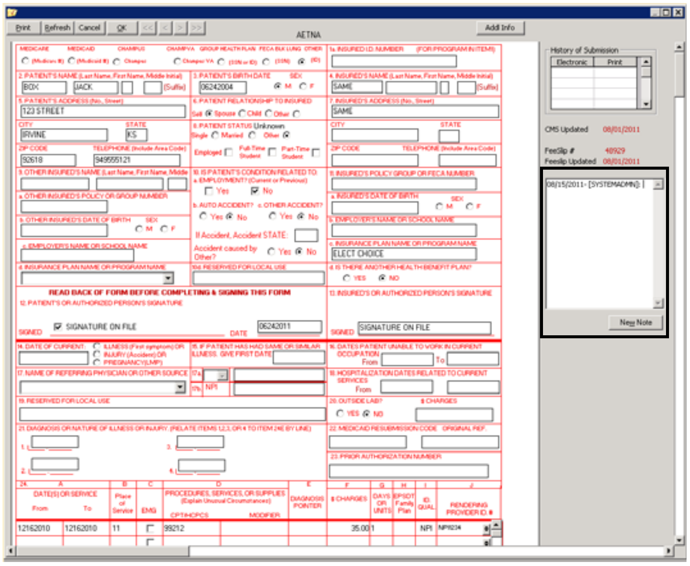
d. If you are processing a CLIA (Clinical Laboratory Improvement Amendment) insurance claim, select the **CLIA** radio button in the Prior Authorization (Box 23) box and type the CLIA number in the **Number** text box. This number will appear in box 23 on the CMS 1500 form and the X4 qualifier will be 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.


CMS - Additional Information
Replacement information
Replacement Category
Reason for replacement
Replacement Category
Reason for replacement
Replacement Category
Reason for replacement
Claim Supplemental Information
Document/Report Type
Transmission Code
Attachment Control #
Assumed and Relinquished Care Dates
☐ Assumed Date
☐ Relinquished Date
Prior Authorization (Box 23)
Type: ○ CLIA ○ Authorization Number ● None
Number:
OK
Cancel

f. Click **OK**.

g. Click **New Note** and type any notes about the claim in the text box, as needed.



2. PATIENT'S NAME: BOX JACK
3. PATIENT'S BIRTH DATE: 06242004 ● M ○ F
4. INSURED'S NAME: SAME
5. PATIENT'S ADDRESS: 123 STREET
CITY: IRVINE STATE: KS
ZIP CODE: 92618 TELEPHONE: 9495551121
7. INSURED'S ADDRESS: SAME
c. INSURANCE PLAN NAME OR PROGRAM NAME: ELECT CHOICE
d. IS THERE ANOTHER HEALTH BENEFIT PLAN? ○ YES ● NO
12. PATIENT'S OR AUTHORIZED PERSON'S SIGNATURE: ☑ SIGNATURE ON FILE DATE 06242011
13. INSURED'S OR AUTHORIZED PERSON'S SIGNATURE: SIGNED SIGNATURE ON FILE
24. 12162010 12162010 11 ☐ 99212 35.00 1 NPI NPI1234
CMS Updated 08/01/2011
FeeSlip # 40929
Feeslip Updated 08/01/2011
08/15/2011- [SYSTEMADMIN]:

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 477. If you want to create a batch file and export claims, go to Exporting Insurance Claims on page 472.

▶ 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 140. You can select up to four modifiers per line item. These modifiers will appear in box 24D on the CMS 1500 form.

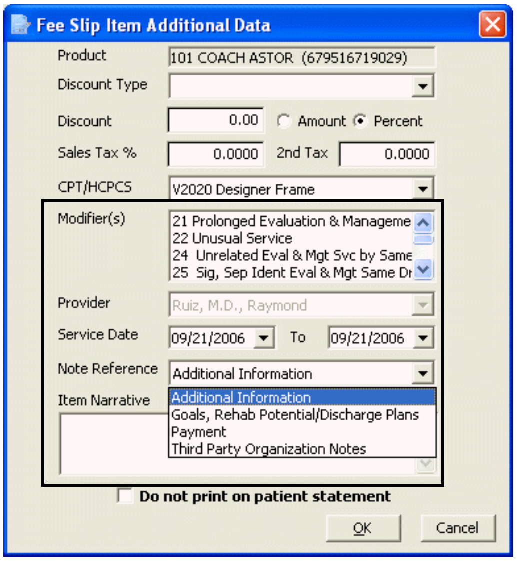
4. To change the service dates for the item so that they are different than the original fee slip date, type or select dates in the **Service Date** text boxes. These dates will appear in box 24A on the CMS 1500 form.

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.

5. 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 uses spaces, but do not use hard returns, commas, periods, dashes, etc.



Fee Slip Item Additional Data

Product: 101 COACH ASTOR (679516719029)
Discount Type:
Discount: 0.00 ○ Amount ● Percent
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:
☐ Do not print on patient statement

Additional Information
Goals, Rehab Potential/Discharge Plans
Payment
Third Party Organization Notes
OK
Cancel

6. Click **OK**.
7. Close the Fee Slip window.
8. Open the Third Party Processing window. For more information on opening this window, go to Opening the Third Party Processing Window on page 455.

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 456.
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 461.

▶ To reprocess individual claims

For more information on reprocessing insurance claims, watch the "Reopening & Resubmitting Claims" video.

NOTE For information on reprocessing an entire batch of claim files, go to To reprocess insurance claim batches on page 480.

1. Search for insurance claims. For more information on searching for insurance claims, go to Searching for Insurance Claims on page 456.
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 457.

   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 147.

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 455.
2. Search for insurance claims. For more information on searching insurance claims, go to Searching for Insurance Claims on page 456.
3. Correct any errors in the insurance claims. For more information on correcting errors, go to Correcting Errors in Insurance Claims on page 457.
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 460.
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 OMATE32\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 478.
10. To view the billing history of an insurance claim, go to Using the Batch History on page 478.

Sending Claims to and Receiving Reports from McKesson

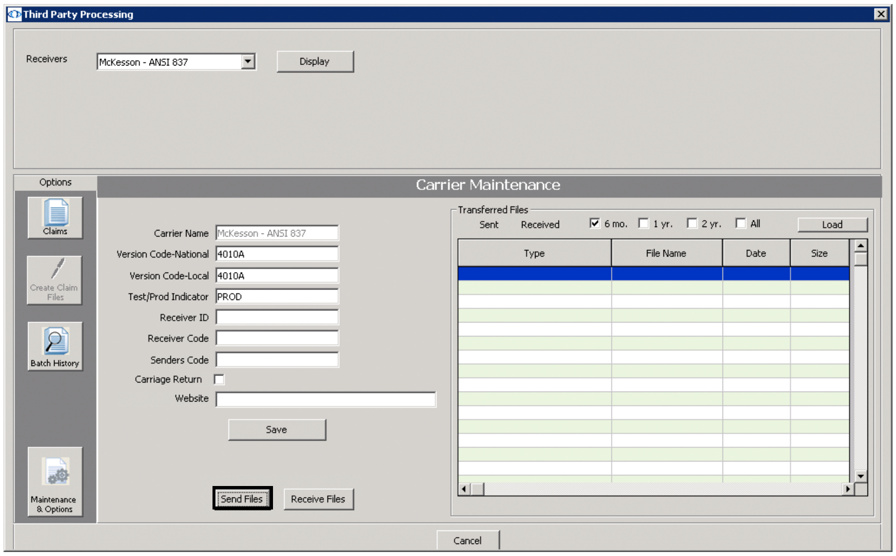
OfficeMate allows you to send claims directly to and receive files from McKesson without having to go to the McKesson website. This section tells you how to send claims and receive reports, including how

- To send insurance claims to McKesson, 474
- To receive insurance claim reports from McKesson, 475
- To view McKesson transferred files, 476

▶ 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 455.
2. Search for insurance claims. For more information on searching insurance claims, go to Searching for Insurance Claims on page 456.
3. Correct any errors in the insurance claims. For more information on correcting errors, go to Correcting Errors in Insurance Claims on page 457.
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 460.
5. Export the insurance claims files. For more information on exporting insurance claim files, go to Exporting Insurance Claims on page 472
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.


Third Party Processing
Display
Options
Claims
Create Claim Files
Batch History
Maintenance & Options
Carrier Maintenance
Transferred Files
Sent
Received
Load
Type
File Name
Date
Size
Save
Send Files
Receive Files
Cancel

Receivers: McKesson - ANSI 837
Carrier Name: McKesson - ANSI 837
Version Code-National: 4010A
Version Code-Local: 4010A
Test/Prod Indicator: PROD
Receiver ID:
Receiver Code:
Senders Code:
Carriage Return ☐
Website:
☑ 6 mo. ☐ 1 yr. ☐ 2 yr. ☐ All

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.

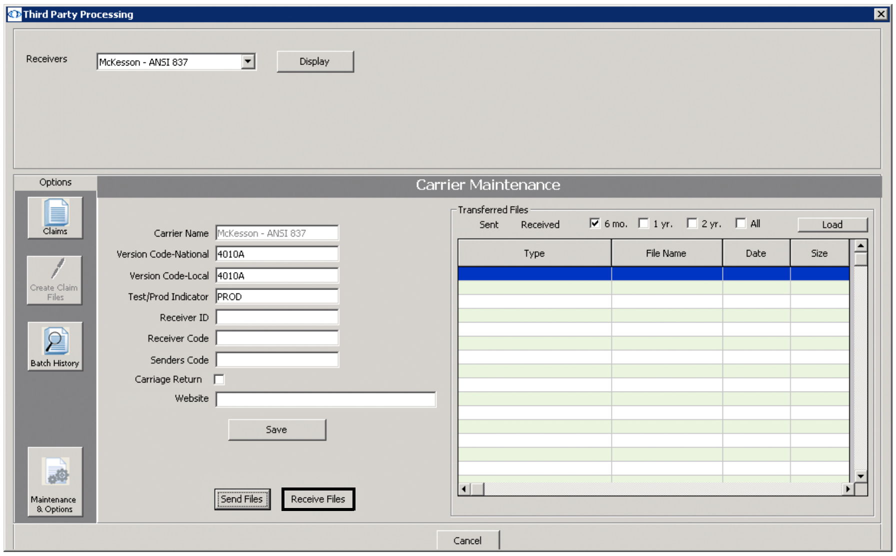
10. Click **OK**.
11. Go to To receive insurance claim reports from McKesson on page 475 to receive insurance claim reports from McKesson. Go to To view McKesson transferred files on page 476 to view the ANSI files transferred to McKesson and the insurance claim reports you received from McKesson.

▶ 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 455.
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.


Third Party Processing
Display
Options
Claims
Create Claim Files
Batch History
Maintenance & Options
Carrier Maintenance
Transferred Files
Sent
Received
Load
Type
File Name
Date
Size
Save
Send Files
Receive Files
Cancel

Receivers: McKesson - ANSI 837

Carrier Name: McKesson - ANSI 837
Version Code-National: 4010A
Version Code-Local: 4010A
Test/Prod Indicator: PROD
Receiver ID:
Receiver Code:
Senders Code:
Carriage Return ☐
Website:

☑ 6 mo. ☐ 1 yr. ☐ 2 yr. ☐ All

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 476 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:

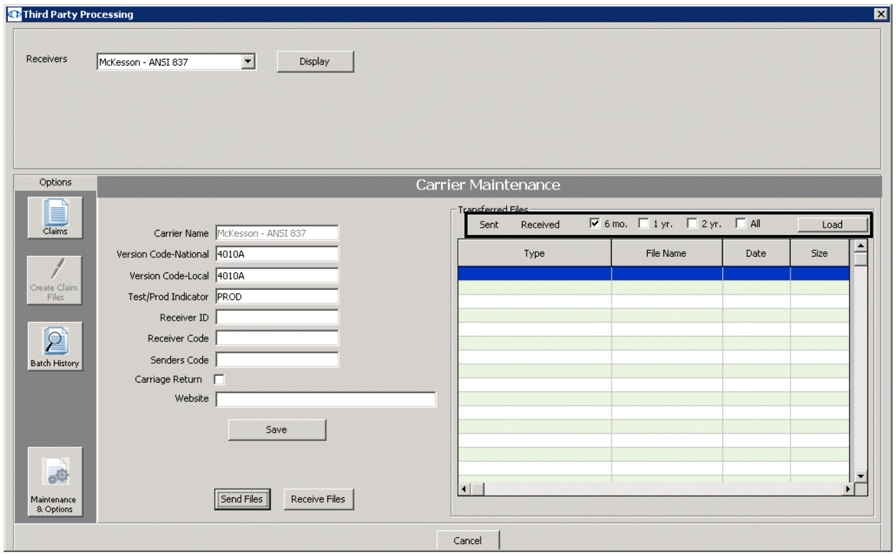
1. Open the Third Party Processing window. For more information on opening this window, go to Opening the Third Party Processing Window on page 455.
2. Click the **Maintenance & Options** icon.
3. Select **McKesson - ANSI 837** from the Receiver drop-down menu.
4. Click **Display**.

   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.


Third Party Processing
Display
Options
Claims
Create Claim Files
Batch History
Maintenance & Options
Carrier Maintenance
Transferred Files
Sent
Received
Load
Type
File Name
Date
Size
Save
Send Files
Receive Files
Cancel

Receivers: McKesson - ANSI 837
Carrier Name: McKesson - ANSI 837
Version Code-National: 4010A
Version Code-Local: 4010A
Test/Prod Indicator: PROD
Receiver ID:
Receiver Code:
Senders Code:
Carriage Return ☐
Website:
☑ 6 mo. ☐ 1 yr. ☐ 2 yr. ☐ All

NOTE The insurance claim report types and associated filenames are listed below. For more detailed information on these reports, go to article #000008041 in the Eyefinity Support Community.

- **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 Acknowledgment 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” 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 455.
2. Search for insurance claims. For more information on searching for insurance claims, go to Searching for Insurance Claims on page 456.
3. Correct any errors in the insurance claims. For more information on correcting errors, go to Correcting Errors in Insurance Claims on page 457.
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 460.
5. Click **Print CMS**.
6. If you want to create a batch file and export claims electronically, go to Exporting Insurance Claims on page 472.

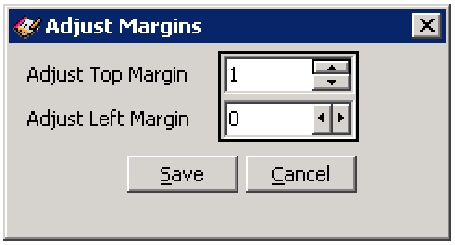
NOTE To print multiple claims for a specific insurance carrier, the administrative location must designate the E-Claims Processor as **Print to Paper** in the Insurance Billing Initial Setup window. For more information, go to To add & modify insurance carriers on page 148.

7. to To record additional information on the CMS 1500 form on page 461.

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 455.
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.



Adjust Top Margin: 1
Adjust Left Margin: 0

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 456. This section tells you how to use the batch history function, including how

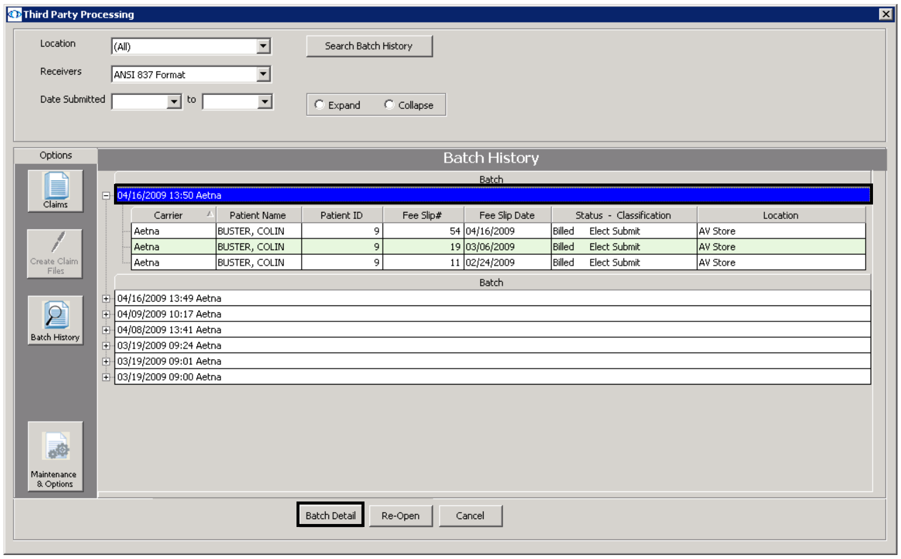
- To view insurance claim histories, 478
- To reprocess insurance claim batches, 480

▶ 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 455.
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.

9. Select a batch from the list and click **Batch Detail**.


Third Party Processing
Search Batch History
Expand
Collapse
Options
Claims
Create Claim Files
Batch History
Maintenance & Options
Batch Detail
Re-Open
Cancel

Location: (All)

Receivers: ANSI 837 Format

Date Submitted: to

Batch History

Batch

04/16/2009 13:50 Aetna

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

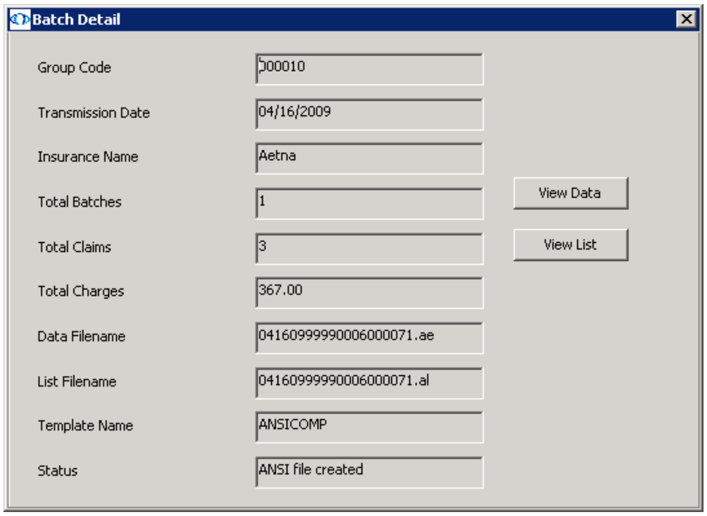
04/16/2009 13:49 Aetna
04/09/2009 10:17 Aetna
04/08/2009 13:41 Aetna
03/19/2009 09:24 Aetna
03/19/2009 09:01 Aetna
03/19/2009 09:00 Aetna

The Batch Detail window opens and displays information about the batch of claims.

10. 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.


Batch Detail
View Data
View List

Group Code	000010
Transmission Date	04/16/2009
Insurance Name	Aetna
Total Batches	1
Total Claims	3
Total Charges	367.00
Data Filename	04160999990006000071.ae
List Filename	04160999990006000071.al
Template Name	ANSICOMP
Status	ANSI file created

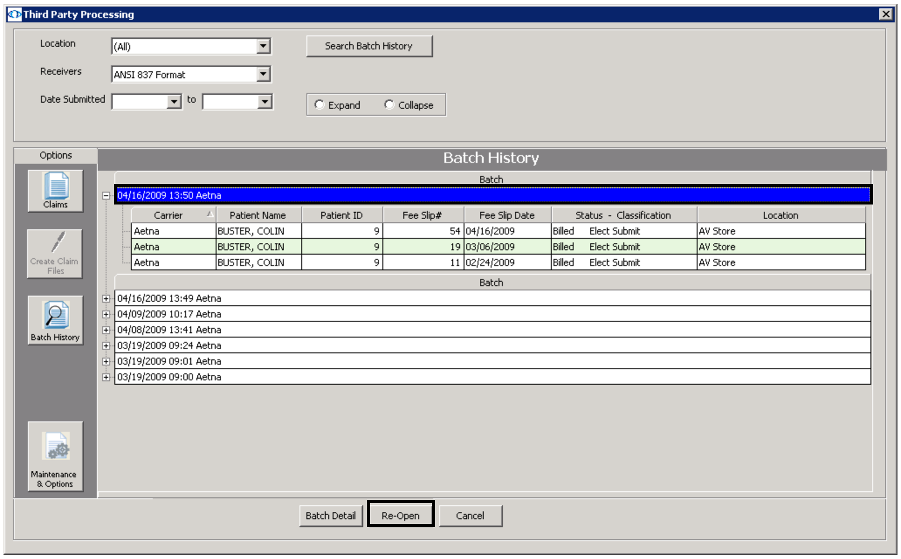
For more information on reprocessing insurance claims, watch the "Reopening & Resubmitting Claims" video.

▶ To reprocess insurance claim batches

NOTE For information on reprocessing individual claims, go to To reprocess individual claims on page 472.

1. Open the Third Party Processing window. For more information on opening this window, go to Opening the Third Party Processing Window on page 455.
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.
9. Select a batch from the list and click **Re-Open**.



Location (All)
Receivers ANSI 837 Format
Date Submitted to

Batch
04/16/2009 13:50 Aetna

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
04/16/2009 13:49 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

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 457.

    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

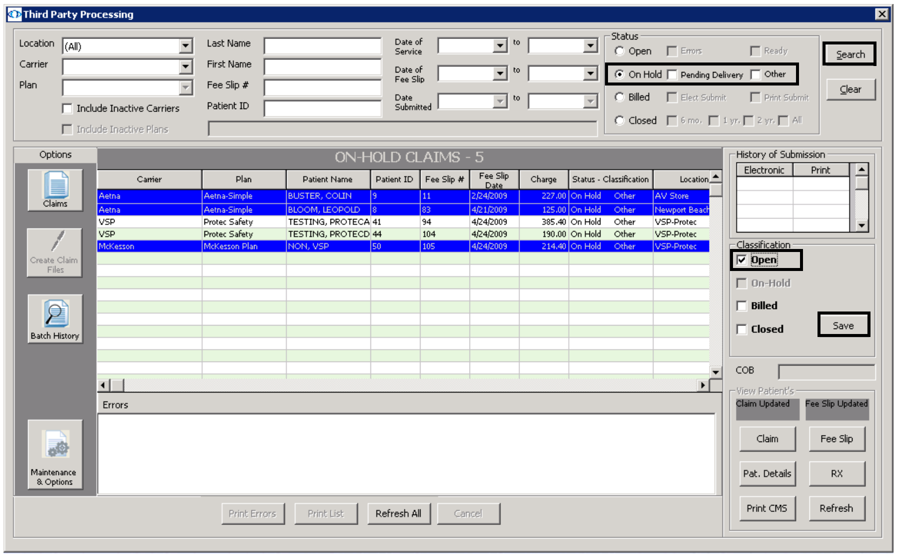
- To release claims on hold, 481
- To close claims on hold, 481

▶ 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 455.
2. Search for insurance claims on hold. For more information on searching for insurance claims, go to Searching for Insurance Claims on page 456.
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**.


Third Party Processing
Location (All)
Carrier
Plan
Include Inactive Carriers
Include Inactive Plans
Last Name
First Name
Fee Slip #
Patient ID
Date of Service
Date of Fee Slip
Date Submitted
to
Status
Open
Errors
Ready
On Hold
Pending Delivery
Other
Billed
Elect Submit
Print Submit
Closed
6 mo.
1 yr.
2 yr.
All
Search
Clear
Options
Claims
Create Claim Files
Batch History
Maintenance & Options
History of Submission
Electronic
Print
Classification
Open
On-Hold
Billed
Closed
Save
COB
View Patient's
Claim Updated
Fee Slip Updated
Claim
Fee Slip
Pat. Details
RX
Print CMS
Refresh
Errors
Print Errors
Print List
Refresh All
Cancel

ON-HOLD CLAIMS - 5

Carrier	Plan	Patient Name	Patient ID	Fee Slip #	Fee Slip Date	Charge	Status - Classification	Location
Aetna	Aetna-Simple	BUSTER, COLIN	9	11	2/24/2009	227.00	On Hold Other	AV Store
Aetna	Aetna-Simple	BLOOM, LEOPOLD	8	83	4/21/2009	125.00	On Hold Other	Newport Beach
VSP	Protec Safety	TESTING, PROTECA	41	94	4/24/2009	385.40	On Hold Other	VSP-Protec
VSP	Protec Safety	TESTING, PROTECD	44	104	4/24/2009	190.00	On Hold Other	VSP-Protec
McKesson	McKesson Plan	NON, VSP	50	105	4/24/2009	214.40	On Hold Other	VSP-Protec

Status: ● On Hold

Classification: ☑ Open ☐ On-Hold ☐ Billed ☐ Closed

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 457.

   As long as the claim remains open with no errors, the claim information will be exported to the electronic claim batch file.

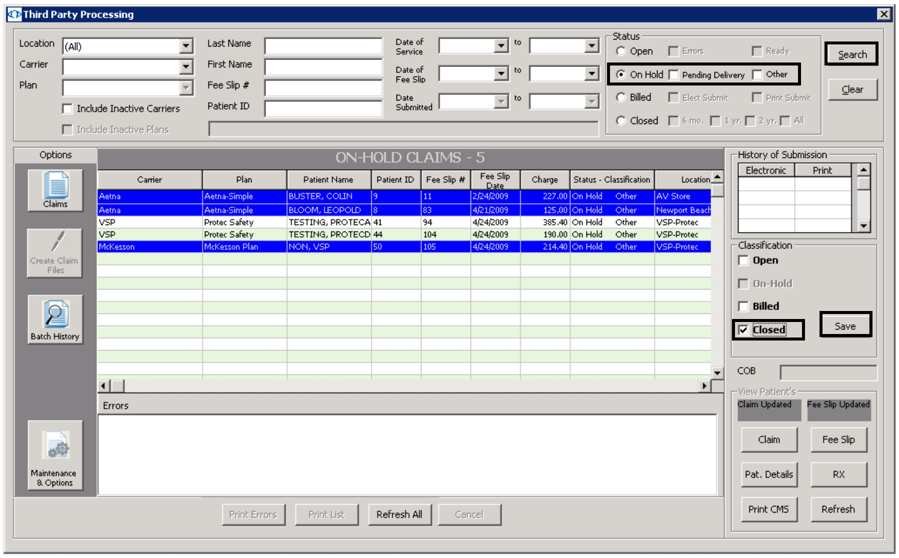
▶ To close claims on hold

1. Open the Third Party Processing window. For more information on opening this window, go to Opening the Third Party Processing Window on page 455.
2. Search for insurance claims on hold. For more information on searching for insurance claims, go to Searching for Insurance Claims on page 456.

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**.


Third Party Processing
Last Name
First Name
Fee Slip #
Patient ID
Date of Service
Date of Fee Slip
Date Submitted
to
Status
Search
Clear
Options
Claims
Create Claim Files
Batch History
Maintenance & Options
History of Submission
Electronic
Print
COB
View Patient's
Claim Updated
Fee Slip Updated
Claim
Fee Slip
Pat. Details
RX
Print CMS
Refresh
Errors
Print Errors
Print List
Refresh All
Cancel

Location (All)
Carrier
Plan
☐ Include Inactive Carriers
☐ Include Inactive Plans

○ Open ☐ Errors ☐ Ready
● On Hold ☐ Pending Delivery ☐ Other
○ Billed ☐ Elect Submit ☐ Print Submit
○ Closed ☐ 6 mo. ☐ 1 yr. ☐ 2 yr. ☐ All

ON-HOLD CLAIMS - 5

Carrier	Plan	Patient Name	Patient ID	Fee Slip #	Fee Slip Date	Charge	Status - Classification	Location
Aetna	Aetna-Simple	BUSTER, COLIN	9	11	2/24/2009	227.00	On Hold Other	AV Store
Aetna	Aetna-Simple	BLOOM, LEOPOLD	8	83	4/21/2009	125.00	On Hold Other	Newport Beach
VSP	Protec Safety	TESTING, PROTECA	41	94	4/24/2009	385.40	On Hold Other	VSP-Protec
VSP	Protec Safety	TESTING, PROTECD	44	104	4/24/2009	190.00	On Hold Other	VSP-Protec
McKesson	McKesson Plan	NON, VSP	50	105	4/24/2009	214.40	On Hold Other	VSP-Protec

Classification
☐ Open
☐ On-Hold
☐ Billed
☑ Closed
Save

Processing UB-04 Claims

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 148.

> **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 484.
2. Correct errors in insurance claims. For more information on correcting errors, go to Correcting Errors in UB-04 Claims on page 485.

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 487.
4. Print or export electronic insurance claims. For more information on exporting insurance claims, go to Exporting UB-04 Claims on page 491.
5. Preview and print insurance claims. For more information on previewing and printing insurance claims, go to Printing UB-04 Claims on page 492.
6. View insurance claim billing histories. For more information on viewing billing histories, go to Using the UB-04 Billing History on page 493.

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 213.
- 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 261.

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, 484
- Selecting UB-04 Claims, 484
- Correcting Errors in UB-04 Claims, 485
- Recording Additional Information on the UB-04 Form, 487
- Exporting UB-04 Claims, 491
- Printing UB-04 Claims, 492
- Using the UB-04 Billing History, 493
- Reopening & Closing UB-04 Claims on Hold, 495

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**.

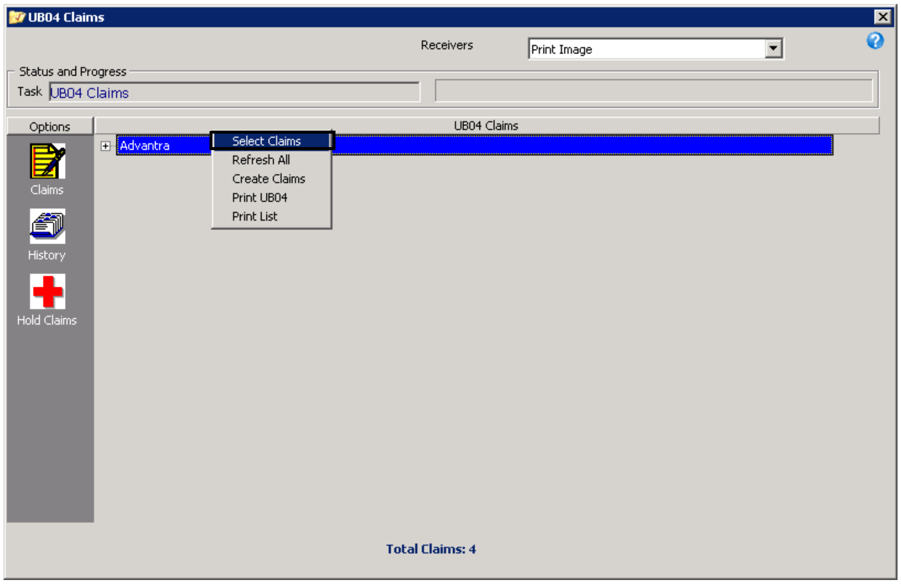
> **NOTE** The Third Party Processing options may be disabled in OfficeMate if the administrative location has selected the Centralized 3rd party billing check box in the Preferences window.

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 484.
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.


UB04 Claims
Status and Progress
Options
Claims
History
Hold Claims
UB04 Claims
Advantra
Select Claims
Refresh All
Create Claims
Print UB04
Print List

Receivers: Print Image

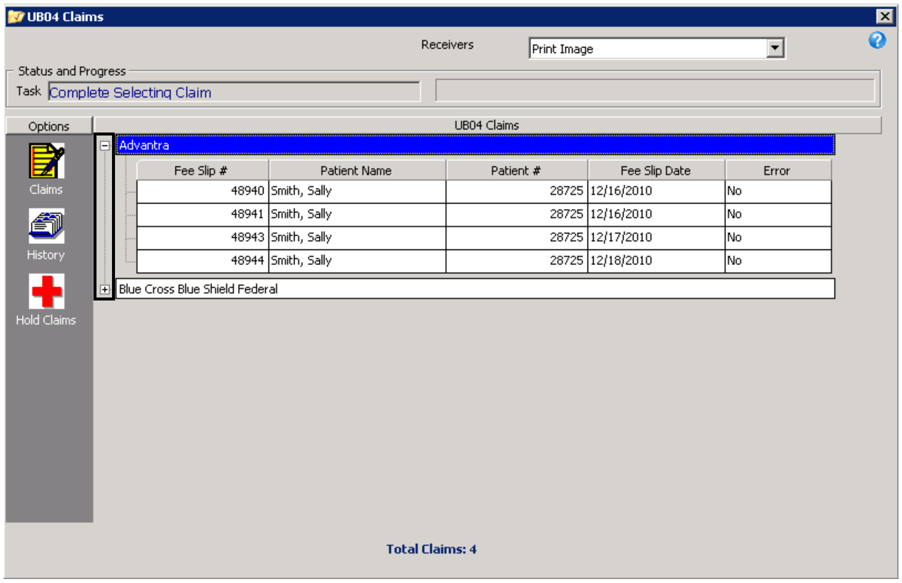
Task: UB04 Claims

Total Claims: 4

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.
7. 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.



Receivers: Print Image

Status and Progress
Task: Complete Selecting Claim

Advantra

Fee Slip #	Patient Name	Patient #	Fee Slip Date	Error
48940	Smith, Sally	28725	12/16/2010	No
48941	Smith, Sally	28725	12/16/2010	No
48943	Smith, Sally	28725	12/17/2010	No
48944	Smith, Sally	28725	12/18/2010	No

Blue Cross Blue Shield Federal

8. If the insurance claims have errors, go to Correcting Errors in UB-04 Claims on page 485. If the insurance claims do not have any errors, go to Recording Additional Information on the UB-04 Form on page 487, Printing UB-04 Claims on page 492, or Exporting UB-04 Claims on page 491.

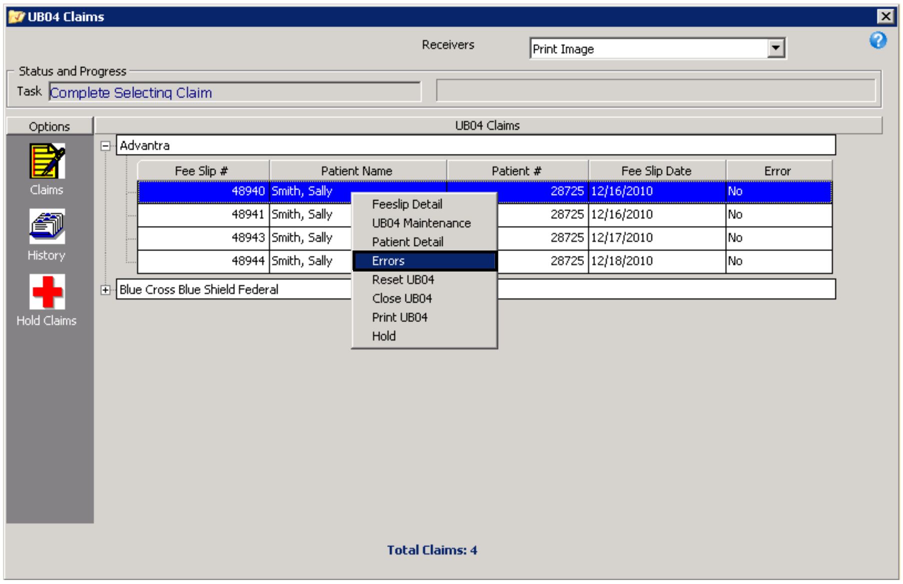
Correcting Errors in UB-04 Claims

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.

1. Select the UB-04 claims. For more information on selecting insurance claims, go to Selecting UB-04 Claims on page 484.
2. 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**.


UB04 Claims
Receivers
Print Image
Status and Progress
Task
Options
Claims
History
Hold Claims
UB04 Claims
Feeslip Detail
UB04 Maintenance
Patient Detail
Errors
Reset UB04
Close UB04
Print UB04
Hold

Task: Complete Selecting Claim

Advantra

Fee Slip #	Patient Name	Patient #	Fee Slip Date	Error
48940	Smith, Sally	28725	12/16/2010	No
48941	Smith, Sally	28725	12/16/2010	No
48943	Smith, Sally	28725	12/17/2010	No
48944	Smith, Sally	28725	12/18/2010	No

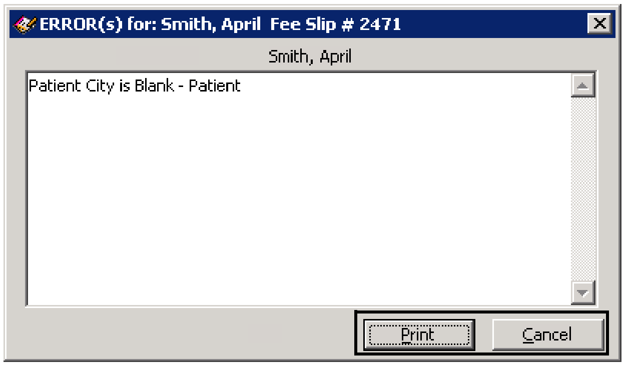
Blue Cross Blue Shield Federal

Total Claims: 4

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.


ERROR(s) for: Smith, April Fee Slip # 2471
Print
Cancel

Smith, April

Patient City is Blank - Patient

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 206. For more information on

recording insurance information, go to To record insurance information on page 213.

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 495.
- **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.

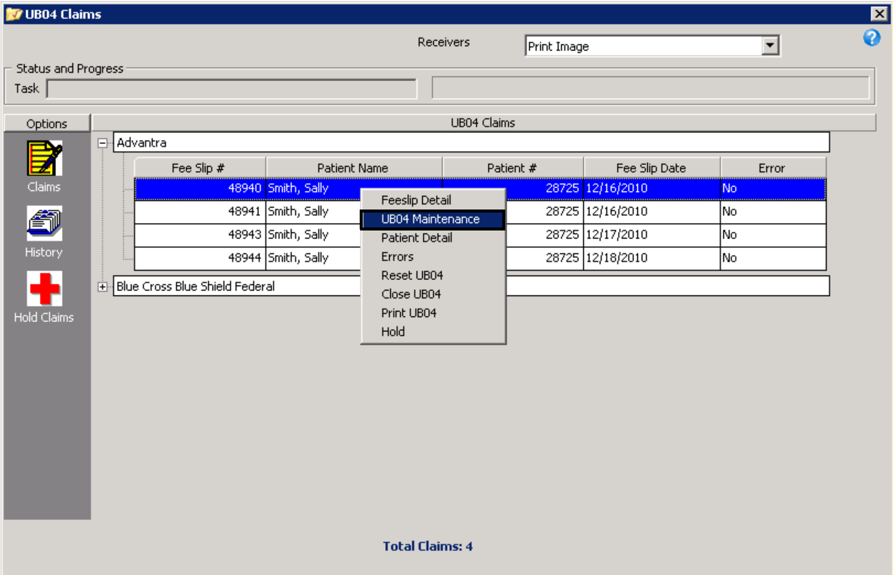
7. If you want to record additional information on a CMS 1500 form, go to Recording Additional Information on the UB-04 Form on page 487; otherwise, go to Printing UB-04 Claims on page 492 or Exporting UB-04 Claims on page 491.

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 484.
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 485.

3. Left-click and then right-click on an insurance claim and select **UB04 Maintenance**.


UB04 Claims
Status and Progress
Task
Options
Claims
History
Hold Claims
UB04 Claims
Feeslip Detail
UB04 Maintenance
Patient Detail
Errors
Reset UB04
Close UB04
Print UB04
Hold

Receivers: Print Image

Advantra

Fee Slip #	Patient Name	Patient #	Fee Slip Date	Error
48940	Smith, Sally	28725	12/16/2010	No
48941	Smith, Sally	28725	12/16/2010	No
48943	Smith, Sally	28725	12/17/2010	No
48944	Smith, Sally	28725	12/18/2010	No

Blue Cross Blue Shield Federal

Total Claims: 4

The UB-04 form opens.

4. 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 492. If you want to create a batch file and export claims, go to Exporting UB-04 Claims on page 491.

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 484.
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 485.

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 487.
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 493.

Printing UB-04 Claims

For more information on printing insurance claims, watch the "Printing Claims" 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 484.
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 485.
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 487.
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 491.

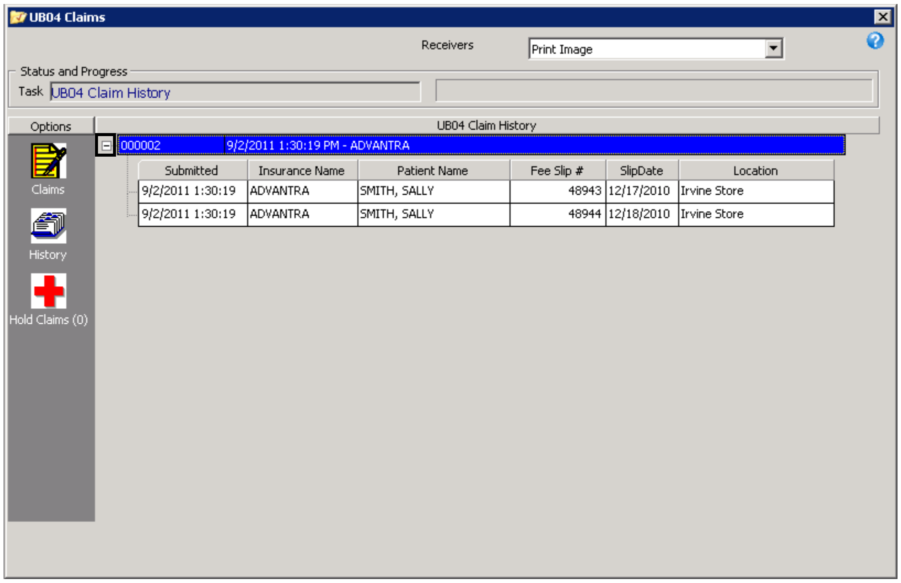
Using the UB-04 Billing History

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, 493
- To reprocess UB-04 claims, 494

▶ 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 484.
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.



Receivers: Print Image

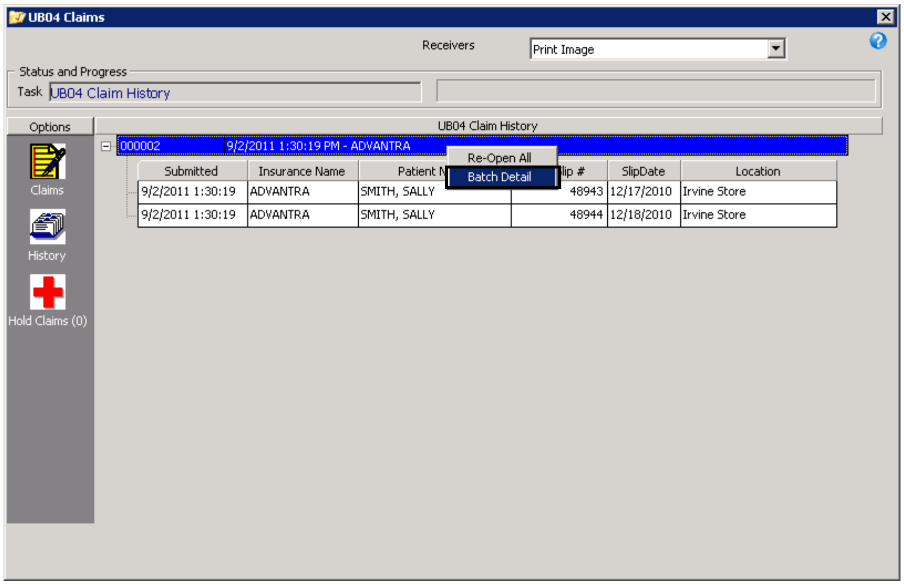
Status and Progress

Task: UB04 Claim History

000002 9/2/2011 1:30:19 PM - ADVANTRA

Submitted	Insurance Name	Patient Name	Fee Slip #	SlipDate	Location
9/2/2011 1:30:19	ADVANTRA	SMITH, SALLY	48943	12/17/2010	Irvine Store
9/2/2011 1:30:19	ADVANTRA	SMITH, SALLY	48944	12/18/2010	Irvine Store

6. Left-click and then right-click on the insurance carrier and select **Batch Detail**.


UB04 Claims
Receivers
Status and Progress
Options
Claims
History
Hold Claims (0)
UB04 Claim History
Re-Open All
Batch Detail

Receivers: Print Image

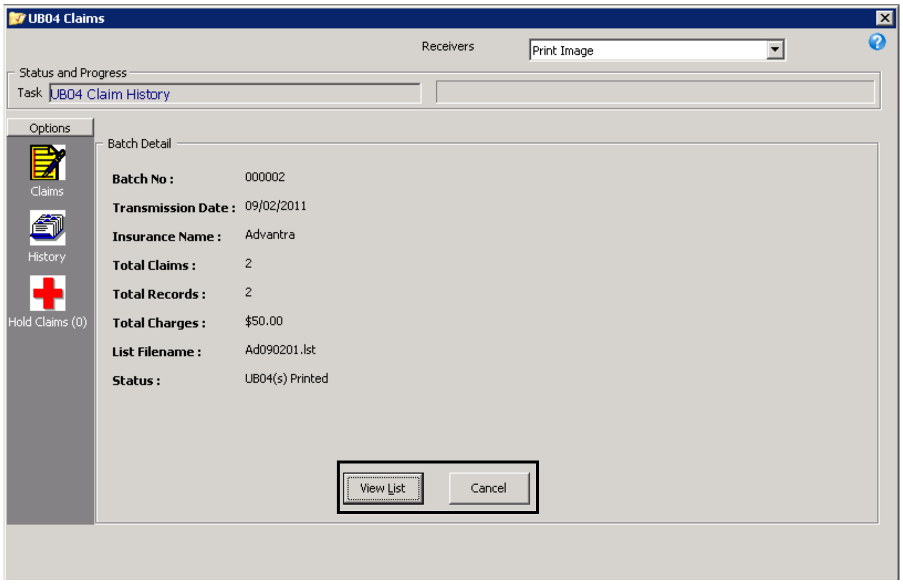
Task: UB04 Claim History

000002 9/2/2011 1:30:19 PM - ADVANTRA

Submitted	Insurance Name	Patient N	lip #	SlipDate	Location
9/2/2011 1:30:19	ADVANTRA	SMITH, SALLY	48943	12/17/2010	Irvine Store
9/2/2011 1:30:19	ADVANTRA	SMITH, SALLY	48944	12/18/2010	Irvine Store

The UB04 Claims window displays the Batch Detail.

7. Click **View List** to view and print a list of claims and charge amounts.


UB04 Claims
Receivers
Status and Progress
Options
Claims
History
Hold Claims (0)
Batch Detail
View List
Cancel

Receivers: Print Image

Task: UB04 Claim History

Batch No : 000002
Transmission Date : 09/02/2011
Insurance Name : Advantra
Total Claims : 2
Total Records : 2
Total Charges : $50.00
List Filename : Ad090201.lst
Status : UB04(s) Printed

▶ To reprocess UB-04 claims

1. Open the UB04 Claims window. For more information on opening this window, go to Opening the UB-04 Claims Window on page 484.
2. Select a third-party receiver from the **Receiver** drop-down menu, as needed.
3. Click the **History** icon.
4. 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 485, Recording Additional Information on the UB-04 Form on page 487, or Exporting UB-04 Claims on page 491 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

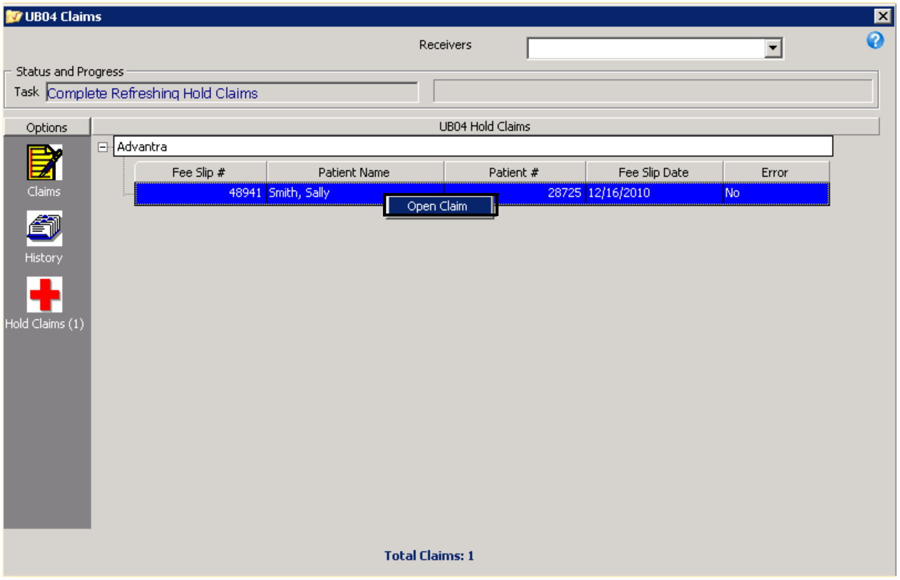
- To reopen UB-04 claims on hold, 495
- To close UB-04 claims on hold, 496

▶ 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 484.
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.



Task: Complete Refreshing Hold Claims

Fee Slip #	Patient Name	Patient #	Fee Slip Date	Error
48941	Smith, Sally	28725	12/16/2010	No

Total Claims: 1

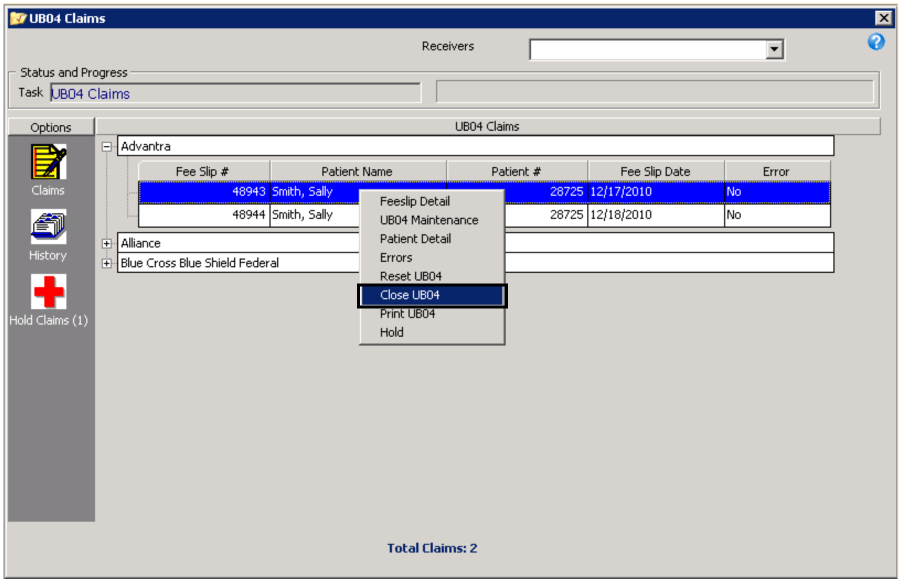
The UB-04 claim(s) can be selected again the next time you select UB-04 claims for processing. For more information on selecting UB-04 insurance claims, go to Selecting UB-04 Claims on page 484.

▶ 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 484.
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 495
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 484.

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.


UB04 Claims
Receivers
Status and Progress
Options
Claims
History
Hold Claims (1)
Feeslip Detail
UB04 Maintenance
Patient Detail
Errors
Reset UB04
Close UB04
Print UB04
Hold

Task UB04 Claims

UB04 Claims

Advantra

Fee Slip #	Patient Name	Patient #	Fee Slip Date	Error
48943	Smith, Sally	28725	12/17/2010	No
48944	Smith, Sally	28725	12/18/2010	No

Alliance

Blue Cross Blue Shield Federal

Total Claims: 2

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 213. For more information on opening the UB-04 form from the Fee Slip window, go to Viewing & Printing Claim Forms on page 177.

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 493.

Setting Up & Using the VSP Interface

12

In this chapter:

- Preparing for the OfficeMate VSP Interface, 500
- Activating the VSP Interface with Eyefinity, 500
- Turning the VSP Interface On or Off, 501
- Using the VSP Setup Assistant, 501
- Setting Up the OfficeMate VSP Interface Manually, 514
- Setting Up Product Attribute Pricing, 520
- Loading Lens Products into OfficeMate, 521
- Downloading VSP Lists, 522
- Loading Frame Products into OfficeMate, 524
- Mapping Products, 525
- Setting Up Service Attributes, 530
- Turning On the VSP Interface, 531
- Understanding the VSP Interface Workflow, 531
- Getting Member Eligibility & VSP Authorization, 532
- Coordinating Benefits, 538
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For information on using the OfficeMate VSP Interface, watch the "VSP Interface Overview" video.

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 OfficeMate 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 customercare@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 Provider's EIN Provider's NPI	Ensure that you have the social security number, EIN, and NPI for each provider.
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

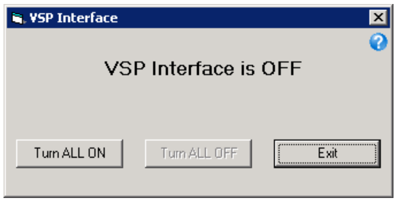
Make sure that, for each practice location, the phone number you provide to Eyefinity is the same phone number that you have recorded in OfficeMate Administration in the VSP Phone text box in the Location Maintenance window.

❖ 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**.



VSP Interface is 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, 502
- To set up locations, 502
- To set up providers, 503
- To set up base attributes, 504
- To set up lens material attributes, 505
- To set up lens color attributes, 506
- To set up other lens attributes, 507
- To set up lens type attributes, 508
- To set up lens treatments, 509
- To set up other products, 510
- To select VSP labs, 511
- To set up a VSP insurance carrier and plan, 512
- To run the Lens Product Loader, 513

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 514.

▶ 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.

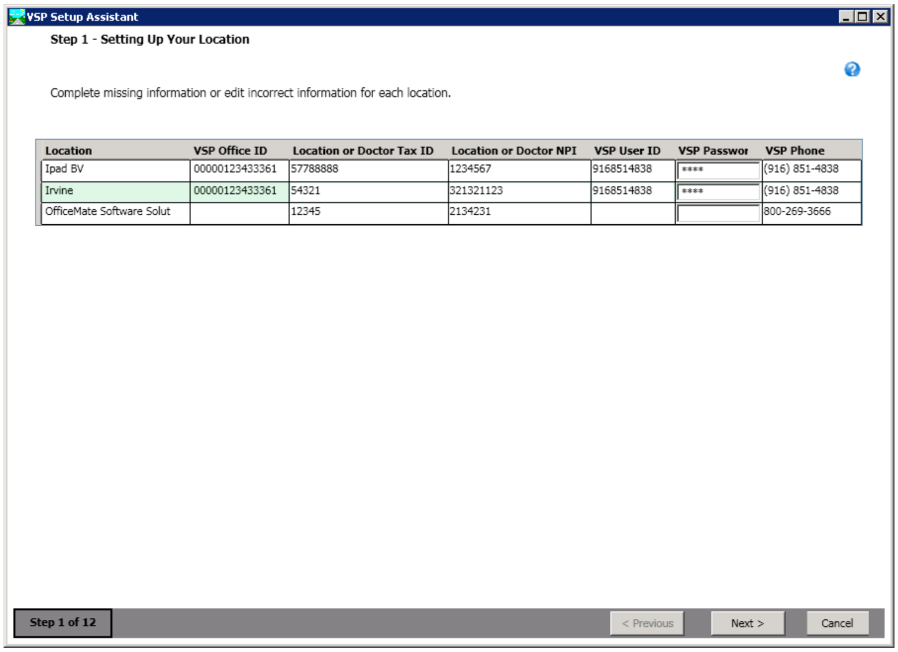
   You can close the VSP Setup Assistant and return to it at a later time. When you reopen the window, you are taken directly to the step where you left off.

▶ 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.

7. 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 Passwor	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

▶ To set up providers

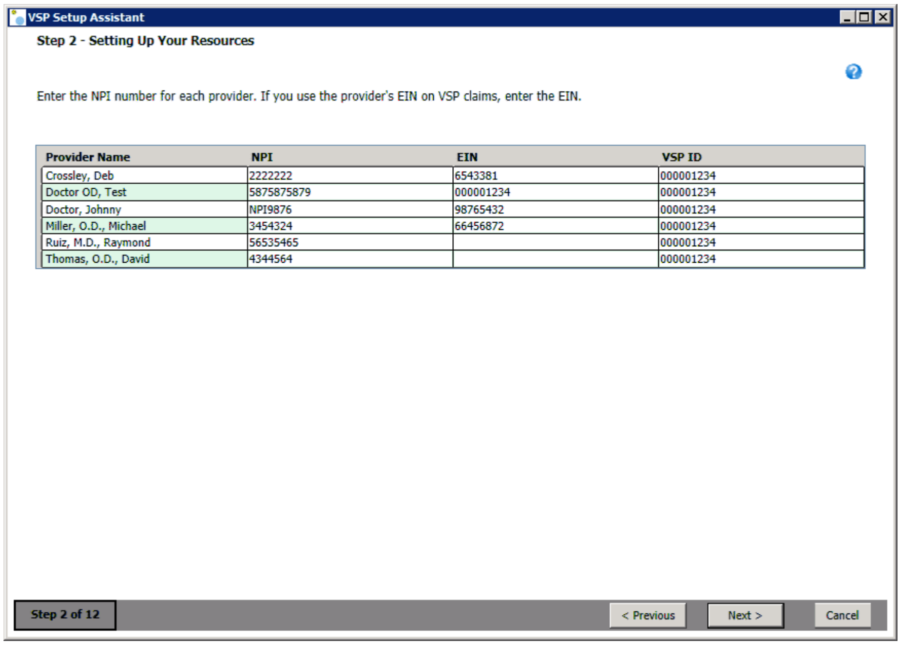
1. In the **NPI** column, type the provider's NPI number.
2. In the **EIN** column, type the provider's EIN number.
3. In the **VSP ID** column, type the provider's VSP doctor ID (DID).

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.

4. Repeat steps 1–3 for each provider listed.

5. 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
Crossley, 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

▶ To set up base attributes

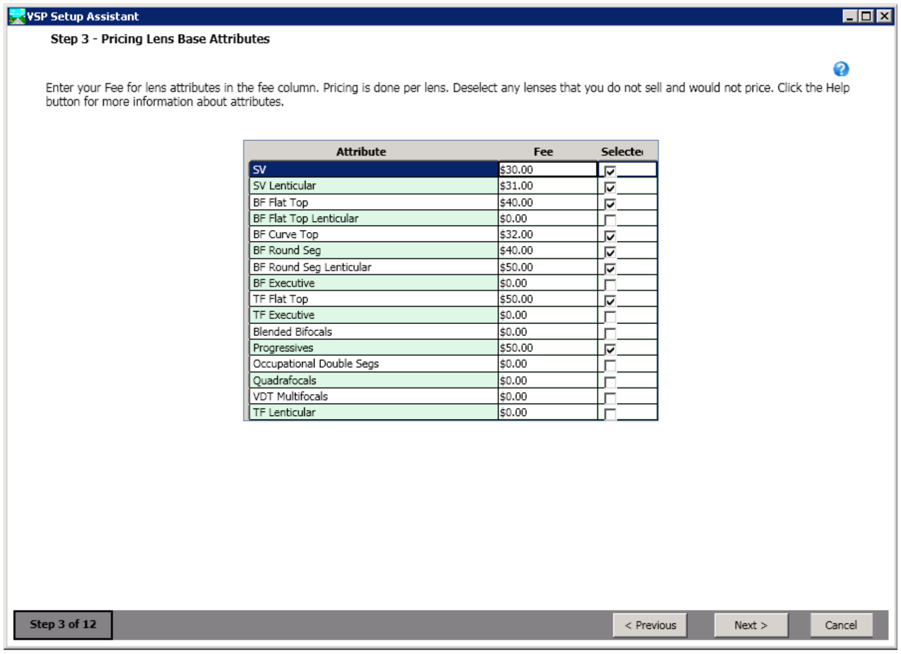
Attributes are the individual qualities and characteristics that define a product (e.g., color, material, lens type). Attributes are inherent to the product; add-ons are not attributes. For example, a single-vision, high-index transition lens has the attributes of single vision, high-index material, 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.

1. 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.

2. If you do not sell a particular lens, deselect the check box in the **Selection** column.
3. Repeat steps 1–2 for each attribute listed.

4. 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	Selecte
SV	$30.00	☑
SV Lenticular	$31.00	☑
BF Flat Top	$40.00	☑
BF Flat Top Lenticular	$0.00	☐
BF Curve Top	$32.00	☑
BF Round Seg	$40.00	☑
BF Round Seg Lenticular	$50.00	☑
BF Executive	$0.00	☐
TF Flat Top	$50.00	☑
TF Executive	$0.00	☐
Blended Bifocals	$0.00	☐
Progressives	$50.00	☑
Occupational Double Segs	$0.00	☐
Quadrafocals	$0.00	☐
VDT Multifocals	$0.00	☐
TF Lenticular	$0.00	☐

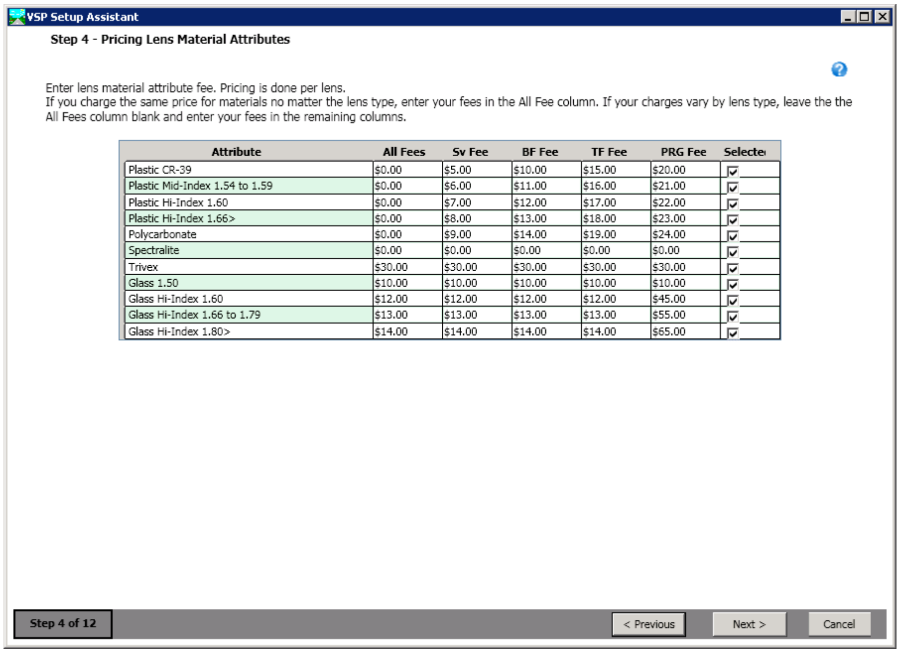
For more information about attributes go to To maintain product attributes on page 270.

▶ 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.

1. 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 tostep 2. Pricing is *per lens*.
2. In the **SV Fee** column, type the fee that you charge for this material for a single-vision lens. Pricing is *per lens*.
3. In the **BF Fee** column, type the fee that you charge for this material for a bifocal lens. Pricing is *per lens*.
4. In the **TF Fee** column, type the fee that you charge for this material for a trifocal lens. Pricing is *per lens*.
5. In the **PRG Fee** column, type the fee that you charge for this material for a progressive lens. Pricing is *per lens*.
6. If you do not sell a particular lens, deselect the check box in the **Selection** column.
7. Repeat steps 1–2 for each material listed.

8. Click **Next** to save your changes and proceed to the next window in the VSP Setup Assistant.



Step 4 - Pricing Lens Material Attributes

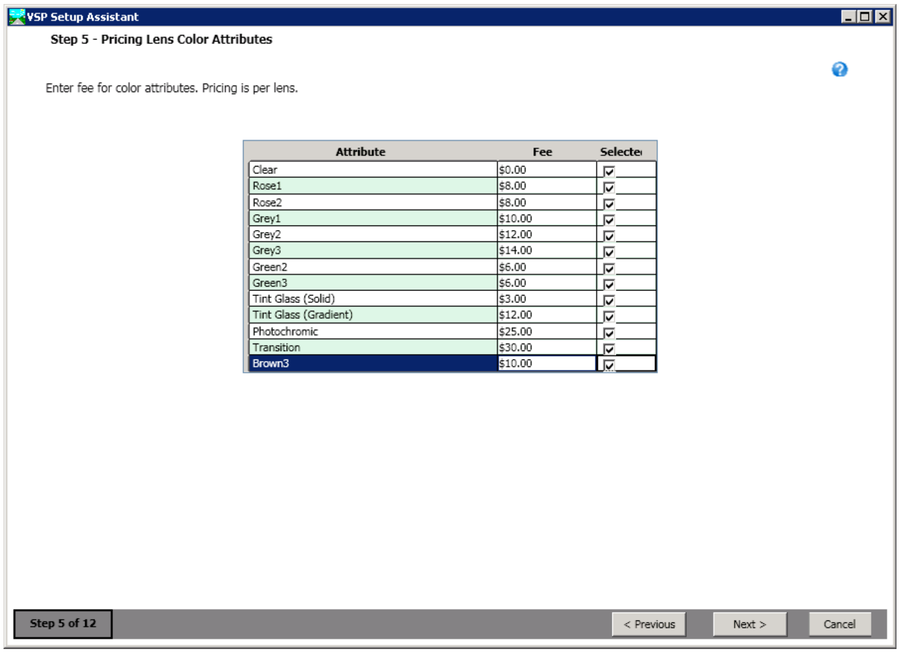
Enter lens material attribute fee. Pricing is done per lens.
If you charge the same price for materials no matter the lens type, enter your fees in the All Fee column. If your charges vary by lens type, leave the the All Fees column blank and enter your fees in the remaining columns.

Attribute	All Fees	Sv Fee	BF Fee	TF Fee	PRG Fee	Selecte
Plastic CR-39	$0.00	$5.00	$10.00	$15.00	$20.00	☑
Plastic Mid-Index 1.54 to 1.59	$0.00	$6.00	$11.00	$16.00	$21.00	☑
Plastic Hi-Index 1.60	$0.00	$7.00	$12.00	$17.00	$22.00	☑
Plastic Hi-Index 1.66>	$0.00	$8.00	$13.00	$18.00	$23.00	☑
Polycarbonate	$0.00	$9.00	$14.00	$19.00	$24.00	☑
Spectralite	$0.00	$0.00	$0.00	$0.00	$0.00	☑
Trivex	$30.00	$30.00	$30.00	$30.00	$30.00	☑
Glass 1.50	$10.00	$10.00	$10.00	$10.00	$10.00	☑
Glass Hi-Index 1.60	$12.00	$12.00	$12.00	$12.00	$45.00	☑
Glass Hi-Index 1.66 to 1.79	$13.00	$13.00	$13.00	$13.00	$55.00	☑
Glass Hi-Index 1.80>	$14.00	$14.00	$14.00	$14.00	$65.00	☑

▶ To set up lens color attributes

1. In the **Fee** column, type the fee that you charge for the color attribute. Pricing is *per lens*.
2. If you do not sell a particular color, deselect the check box in the **Selection** column.
3. Repeat steps 1–2 for each color listed.

4. 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.

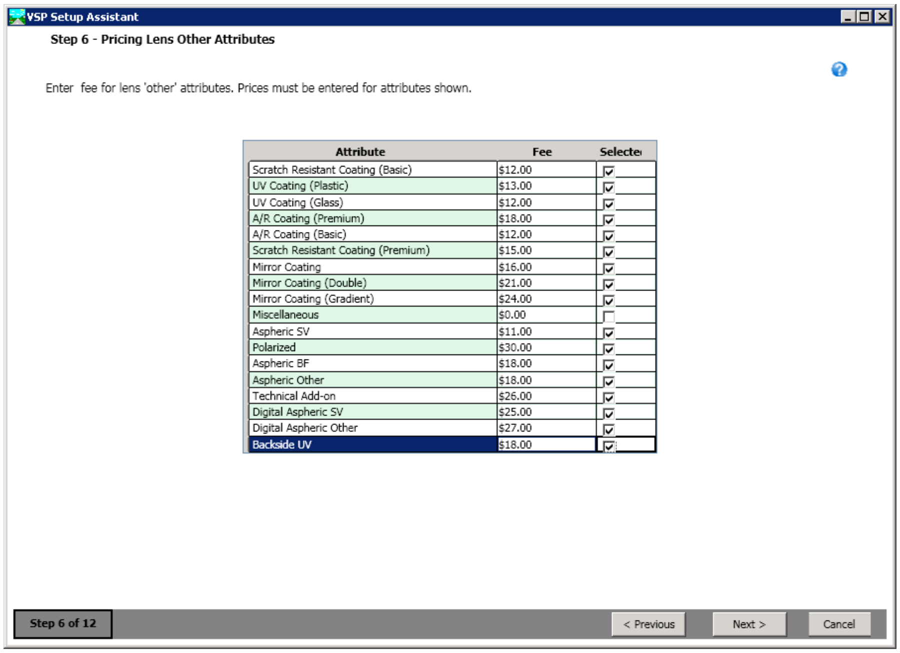
Attribute	Fee	Selecte
Clear	$0.00	☑
Rose1	$8.00	☑
Rose2	$8.00	☑
Grey1	$10.00	☑
Grey2	$12.00	☑
Grey3	$14.00	☑
Green2	$6.00	☑
Green3	$6.00	☑
Tint Glass (Solid)	$3.00	☑
Tint Glass (Gradient)	$12.00	☑
Photochromic	$25.00	☑
Transition	$30.00	☑
Brown3	$10.00	☑

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 are 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.

1. In the **Fee** column, type the fee that you charge for the attribute. Pricing is *per lens*.
2. If you do not sell a lenses with a particular attribute, deselect the check box in the **Selection** column.
3. Repeat steps 1–2 for each attribute listed.

4. 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.

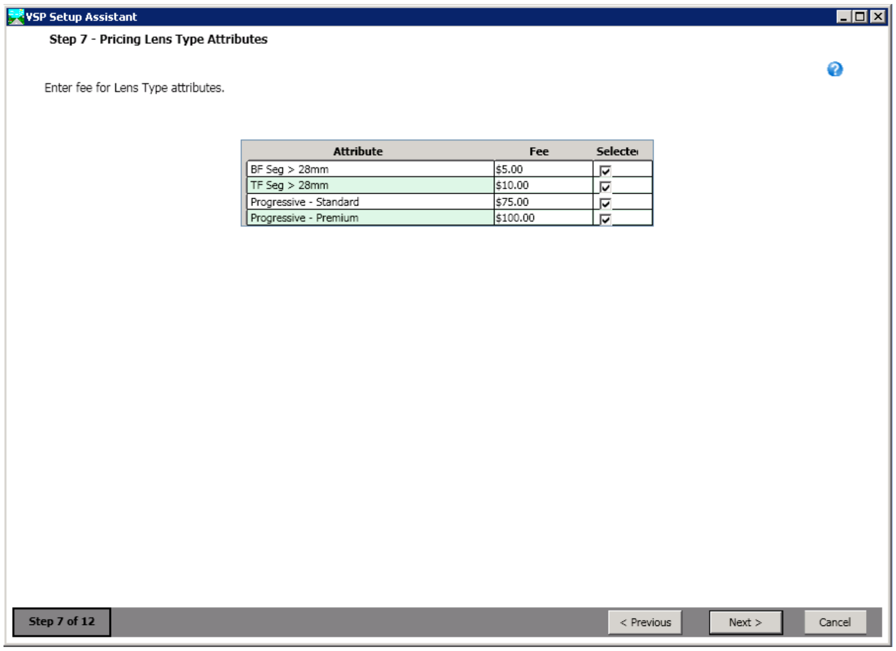
Attribute	Fee	Selecte
Scratch Resistant Coating (Basic)	$12.00	☑
UV Coating (Plastic)	$13.00	☑
UV Coating (Glass)	$12.00	☑
A/R Coating (Premium)	$18.00	☑
A/R Coating (Basic)	$12.00	☑
Scratch Resistant Coating (Premium)	$15.00	☑
Mirror Coating	$16.00	☑
Mirror Coating (Double)	$21.00	☑
Mirror Coating (Gradient)	$24.00	☑
Miscellaneous	$0.00	☐
Aspheric SV	$11.00	☑
Polarized	$30.00	☑
Aspheric BF	$18.00	☑
Aspheric Other	$18.00	☑
Technical Add-on	$26.00	☑
Digital Aspheric SV	$25.00	☑
Digital Aspheric Other	$27.00	☑
Backside UV	$18.00	☑

▶ 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.

1. In the **Fee** column, type the fee that you charge for the attribute. Pricing is *per lens*.
2. If you do not sell a lenses with a particular attribute, deselect the check box in the **Selection** column.
3. Repeat steps 1–2 for each attribute listed.
4. If you need to create additional lens type attributes, perform the following steps:
   a. Click the **<Click here to add new attribute>** row.
   b. Enter the attribute name and fee.
   c. Press the **Enter** key.
   d. Repeat steps a–c for each lens type attribute that you want to add.

5. 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.

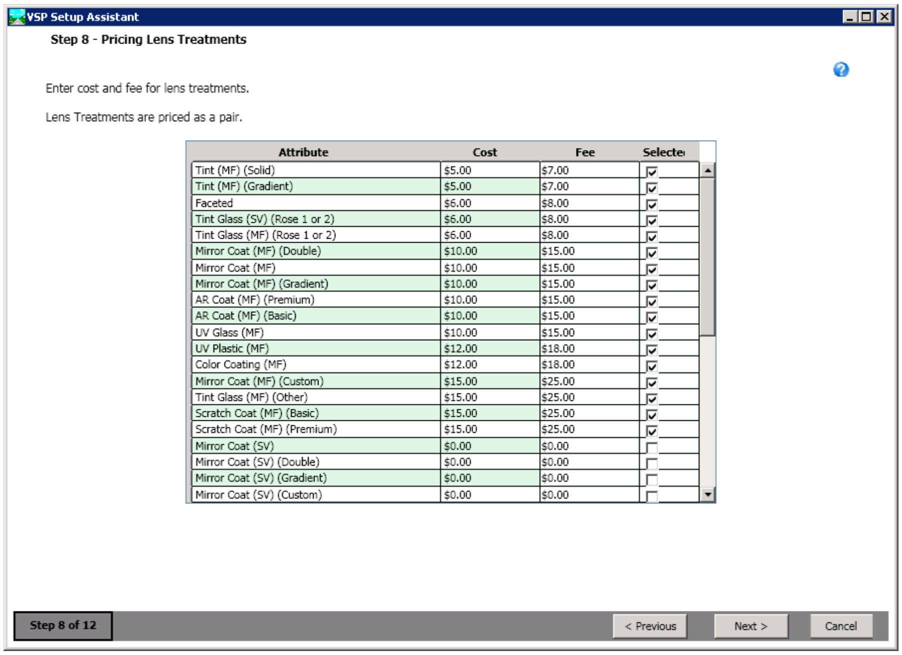
Attribute	Fee	Selecte
BF Seg > 28mm	$5.00	☑
TF Seg > 28mm	$10.00	☑
Progressive - Standard	$75.00	☑
Progressive - Premium	$100.00	☑

▶ 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.

1. In the **Cost** column, type the cost to your practice for the lens treatment. Pricing is *per pair.*
2. In the **Fee** column, type the fee that you charge for the lens treatment. Pricing is *per pair.*
3. If you do not sell a particular lens treatment, deselect the check box in the **Selection** column.
4. Repeat steps 1–3 for each attribute listed.

5. 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	Selecte
Tint (MF) (Solid)	$5.00	$7.00	☑
Tint (MF) (Gradient)	$5.00	$7.00	☑
Faceted	$6.00	$8.00	☑
Tint Glass (SV) (Rose 1 or 2)	$6.00	$8.00	☑
Tint Glass (MF) (Rose 1 or 2)	$6.00	$8.00	☑
Mirror Coat (MF) (Double)	$10.00	$15.00	☑
Mirror Coat (MF)	$10.00	$15.00	☑
Mirror Coat (MF) (Gradient)	$10.00	$15.00	☑
AR Coat (MF) (Premium)	$10.00	$15.00	☑
AR Coat (MF) (Basic)	$10.00	$15.00	☑
UV Glass (MF)	$10.00	$15.00	☑
UV Plastic (MF)	$12.00	$18.00	☑
Color Coating (MF)	$12.00	$18.00	☑
Mirror Coat (MF) (Custom)	$15.00	$25.00	☑
Tint Glass (MF) (Other)	$15.00	$25.00	☑
Scratch Coat (MF) (Basic)	$15.00	$25.00	☑
Scratch Coat (MF) (Premium)	$15.00	$25.00	☑
Mirror Coat (SV)	$0.00	$0.00	☐
Mirror Coat (SV) (Double)	$0.00	$0.00	☐
Mirror Coat (SV) (Gradient)	$0.00	$0.00	☐
Mirror Coat (SV) (Custom)	$0.00	$0.00	☐

▶ To set up other products

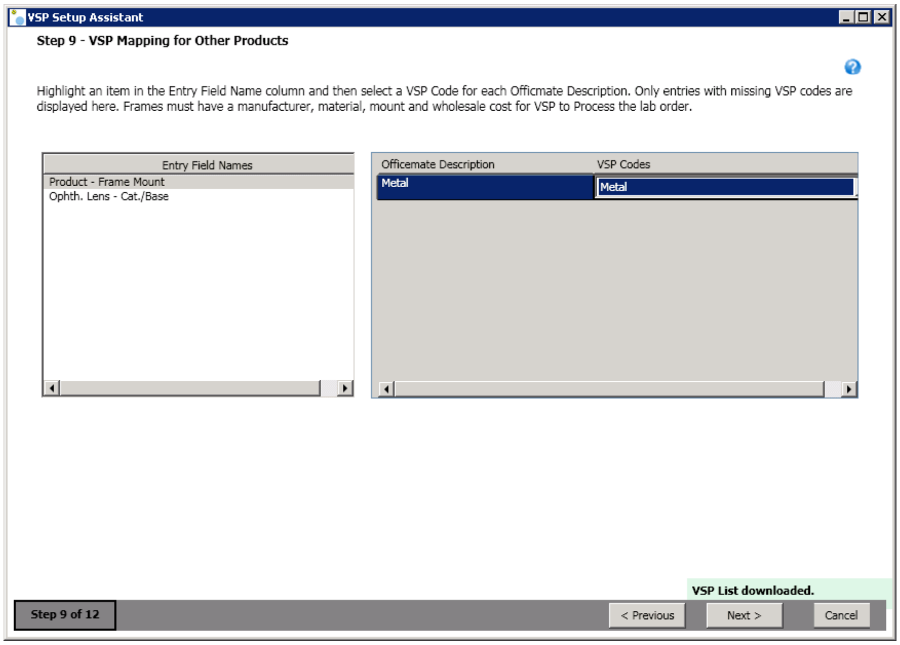
OfficeMate products that are billed to VSP insurance and ordered from VSP labs must be properly mapped before they are billed to VSP or ordered from VSP-approved labs. Mapping products in OfficeMate assigns them a VSP description; this VSP description is then sent to Eyefinity when VSP insurance is billed and VSP labs are used so that Eyefinity can properly process the orders and insurance claims.

1. 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.

2. For each product listed in the OfficeMate Description column, select the most appropriate **VSP Code** from the drop-down menus.
3. Repeat steps 1–2 for each attribute listed.

4. Click **Next** to save your changes and proceed to the next window in the VSP Setup Assistant.



Step 9 - VSP Mapping for Other Products

Highlight an item in the Entry Field Name column and then select a VSP Code for each Officmate Description. Only entries with missing VSP codes are displayed here. Frames must have a manufacturer, material, mount and wholesale cost for VSP to Process the lab order.

Entry Field Names
Product - Frame Mount
Ophth. Lens - Cat./Base

Officemate Description	VSP Codes
Metal	Metal

VSP List downloaded.

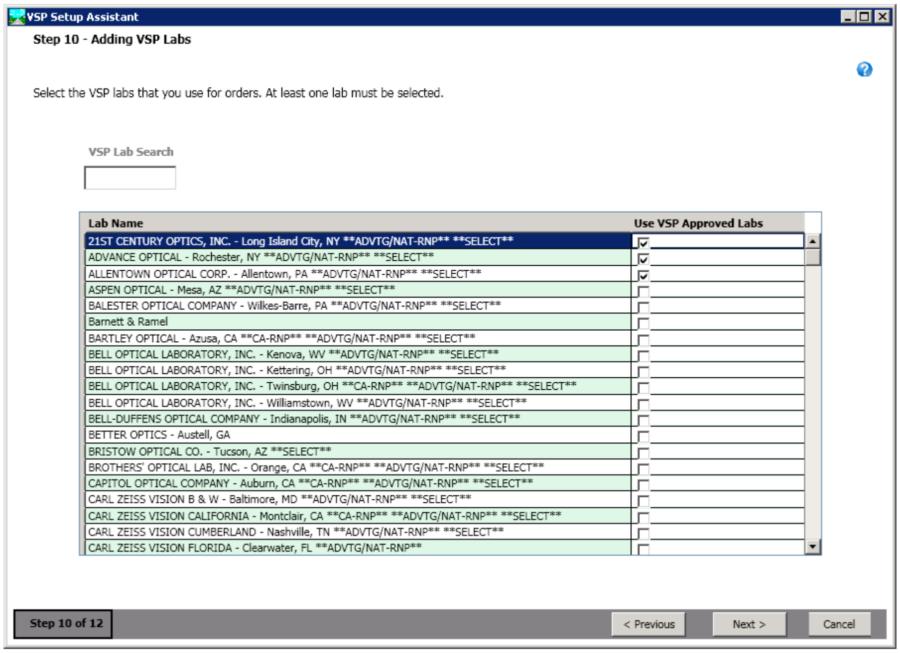
▶ To select VSP labs

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.

1. 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.



Select the VSP labs that you use for orders. At least one lab must be selected.

Lab Name	Use VSP Approved Labs
21ST CENTURY OPTICS, INC. - Long Island City, NY **ADVTG/NAT-RNP** **SELECT**	☑
ADVANCE OPTICAL - Rochester, NY **ADVTG/NAT-RNP** **SELECT**	☑
ALLENTOWN OPTICAL CORP. - Allentown, PA **ADVTG/NAT-RNP** **SELECT**	☑
ASPEN OPTICAL - Mesa, AZ **ADVTG/NAT-RNP** **SELECT**	☐
BALESTER OPTICAL COMPANY - Wilkes-Barre, PA **ADVTG/NAT-RNP** **SELECT**	☐
Barnett & Ramel	☐
BARTLEY OPTICAL - Azusa, CA **CA-RNP** **ADVTG/NAT-RNP** **SELECT**	☐
BELL OPTICAL LABORATORY, INC. - Kenova, WV **ADVTG/NAT-RNP** **SELECT**	☐
BELL OPTICAL LABORATORY, INC. - Kettering, OH **ADVTG/NAT-RNP** **SELECT**	☐
BELL OPTICAL LABORATORY, INC. - Twinsburg, OH **CA-RNP** **ADVTG/NAT-RNP** **SELECT**	☐
BELL OPTICAL LABORATORY, INC. - Williamstown, WV **ADVTG/NAT-RNP** **SELECT**	☐
BELL-DUFFENS OPTICAL COMPANY - Indianapolis, IN **ADVTG/NAT-RNP** **SELECT**	☐
BETTER OPTICS - Austell, GA	☐
BRISTOW OPTICAL CO. - Tucson, AZ **SELECT**	☐
BROTHERS' OPTICAL LAB, INC. - Orange, CA **CA-RNP** **ADVTG/NAT-RNP** **SELECT**	☐
CAPITOL OPTICAL COMPANY - Auburn, CA **CA-RNP** **ADVTG/NAT-RNP** **SELECT**	☐
CARL ZEISS VISION B & W - Baltimore, MD **ADVTG/NAT-RNP** **SELECT**	☐
CARL ZEISS VISION CALIFORNIA - Montclair, CA **CA-RNP** **ADVTG/NAT-RNP** **SELECT**	☐
CARL ZEISS VISION CUMBERLAND - Nashville, TN **ADVTG/NAT-RNP** **SELECT**	☐
CARL ZEISS VISION FLORIDA - Clearwater, FL **ADVTG/NAT-RNP**	☐

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.

2. 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.

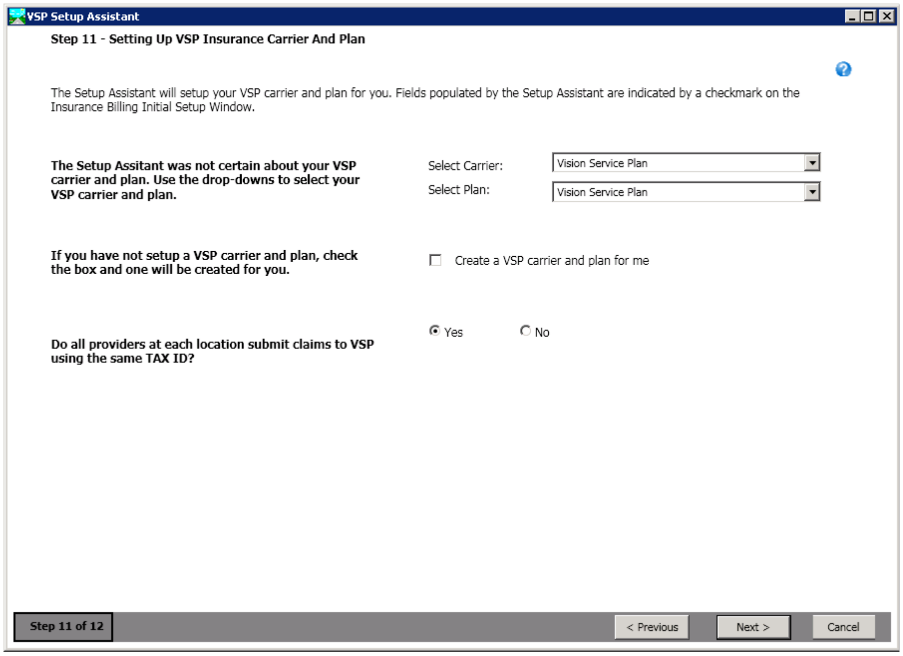
1. If VSP insurance carriers and plans are found, select one of each from the **Select Carrier** and **Select Plan** drop-down menus.

   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

▶ 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.

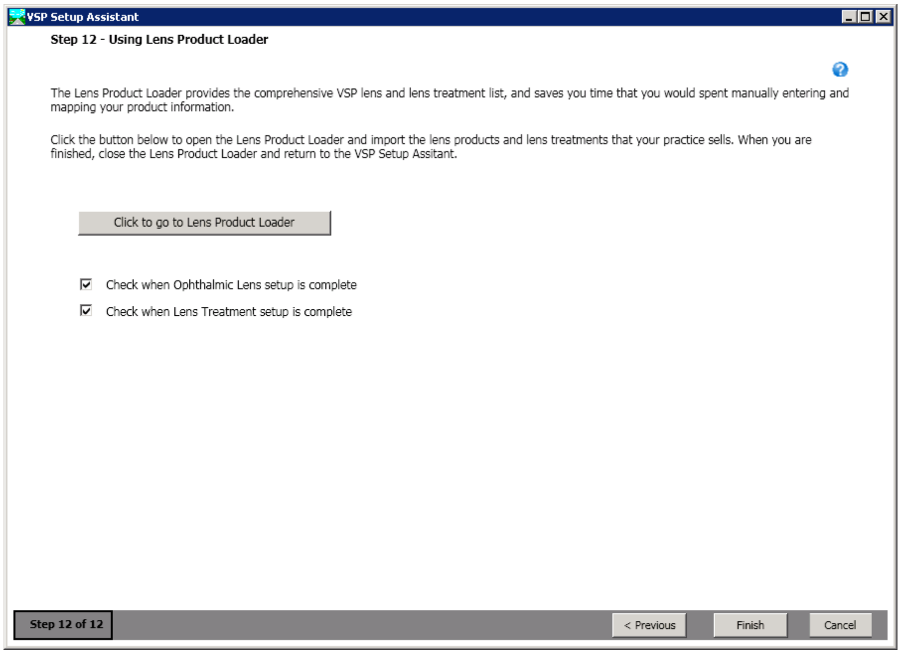
1. Click the **Click the Go to Lens Product Loader** button.

   The Lens Product Loader window opens.

2. Follow the instructions outlined in Loading Lens Products into OfficeMate on page 254.

   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.



Step 12 - Using Lens Product Loader

The Lens Product Loader provides the comprehensive VSP lens and lens treatment list, and saves you time that you would spent manually entering and mapping your product information.

Click the button below to open the Lens Product Loader and import the lens products and lens treatments that your practice sells. When you are finished, close the Lens Product Loader and return to the VSP Setup Assitant.

☑ Check when Ophthalmic Lens setup is complete
☑ Check when Lens Treatment setup is complete

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, 515
- To set up provider information, 516
- To set up insurance carrier information, 517
- To set up insurance plan information, 519

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 501

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.

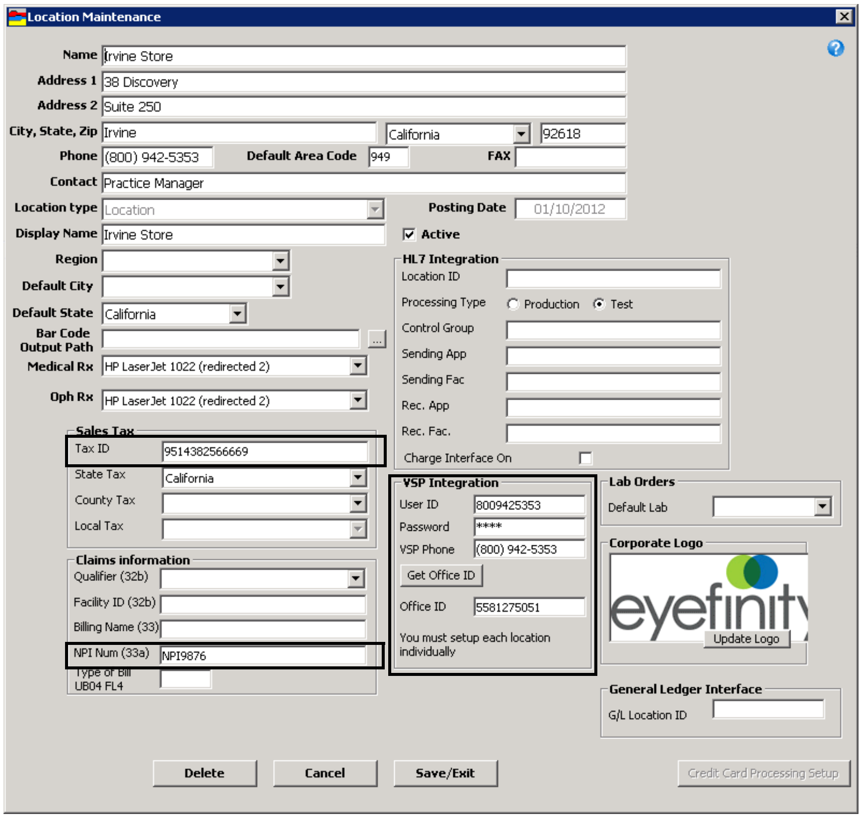
▶ To set up locations

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.


Location Maintenance
HL7 Integration
Location ID
Control Group
Sending App
Sending Fac
Rec. App
Rec. Fac.
Charge Interface On ☐
Region
Default City
Bar Code Output Path
FAX
County Tax
Local Tax
Qualifier (32b)
Facility ID (32b)
Billing Name (33)
Type of Bill UB04 FL4
Lab Orders
Default Lab
Corporate Logo
Update Logo
General Ledger Interface
G/L Location ID
Delete
Cancel
Save/Exit
Credit Card Processing Setup

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
Contact Practice Manager
Location type Location
Posting Date 01/10/2012
Display Name Irvine Store
☑ Active
Processing Type ○ Production ● Test
Default State California
Medical Rx HP LaserJet 1022 (redirected 2)
Oph Rx HP LaserJet 1022 (redirected 2)

Sales Tax
Tax ID 9514382566669
State Tax California

Claims information
NPI Num (33a) NPI9876

VSP Integration
User ID 8009425353
Password ****
VSP Phone (800) 942-5353
Get Office ID
Office ID 5581275051
You must setup each location individually

8. Click **OK**.

9. Repeat steps 2–8 for each location in your practice.

▶ To set up provider information

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.

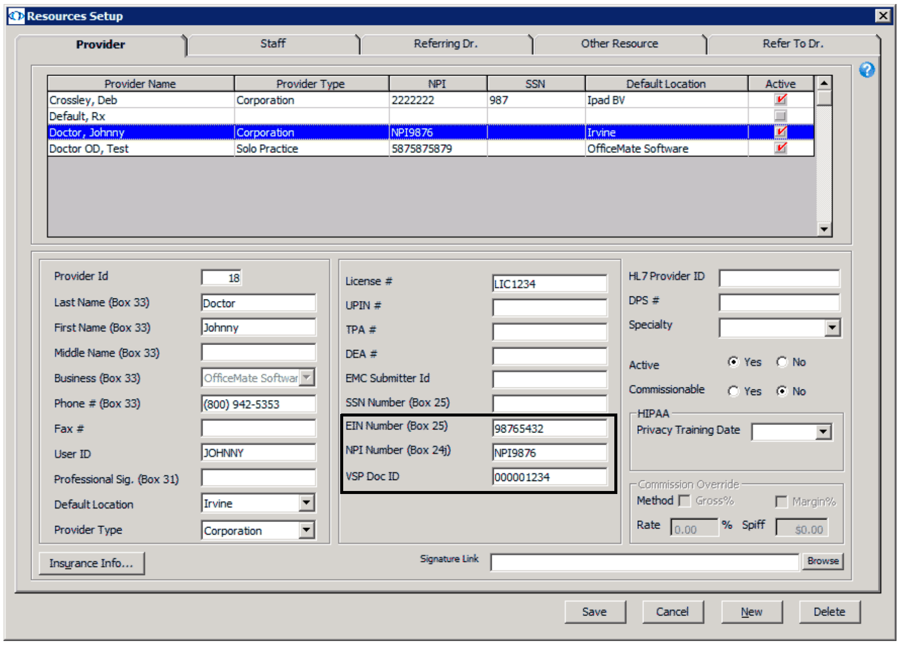
1. Open the Resources Setup window. For information about opening the Resources Setup window, go to Maintaining Providers, Staff, & Other Resources on page 51.
2. Click **New** to add a new provider.

   OR

   Select a provider from the table at the top of the window to modify a provider.
3. 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.
4. 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.
5. 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.



Provider Name	Provider Type	NPI	SSN	Default Location	Active
Crossley, Deb	Corporation	2222222	987	Ipad BV	☑
Default, Rx					☐
Doctor, Johnny	Corporation	NPI9876		Irvine	☑
Doctor OD, Test	Solo Practice	5875875879		OfficeMate Software	☑

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 24j) NPI9876
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
Signature Link

NOTE You do not need to click the Insurance Info button or enter any information for VSP on the Insurance Information window.

6. Click **Save**.

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 147.

▶ 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 147.
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.

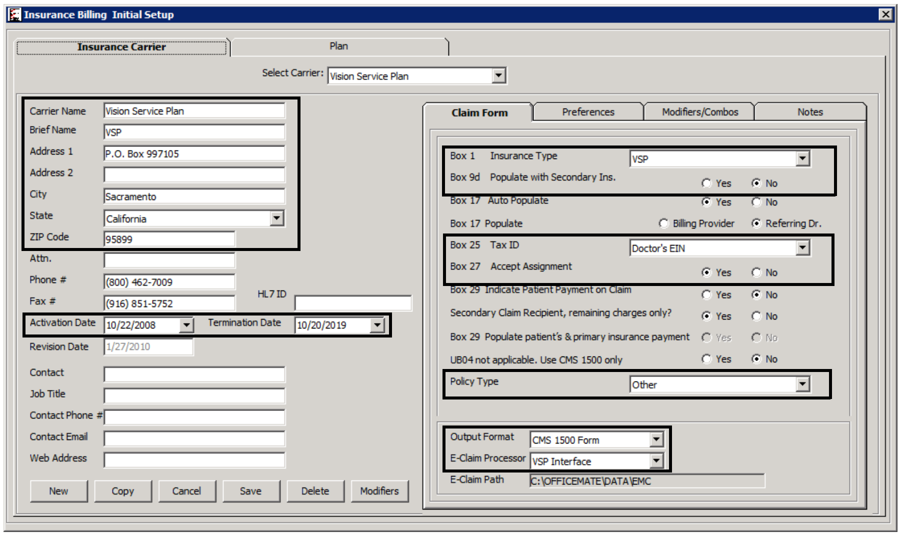
NOTE	If you provided VSP with a different type of tax ID number when you applied to be a VSP provider, select that tax ID type instead.

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

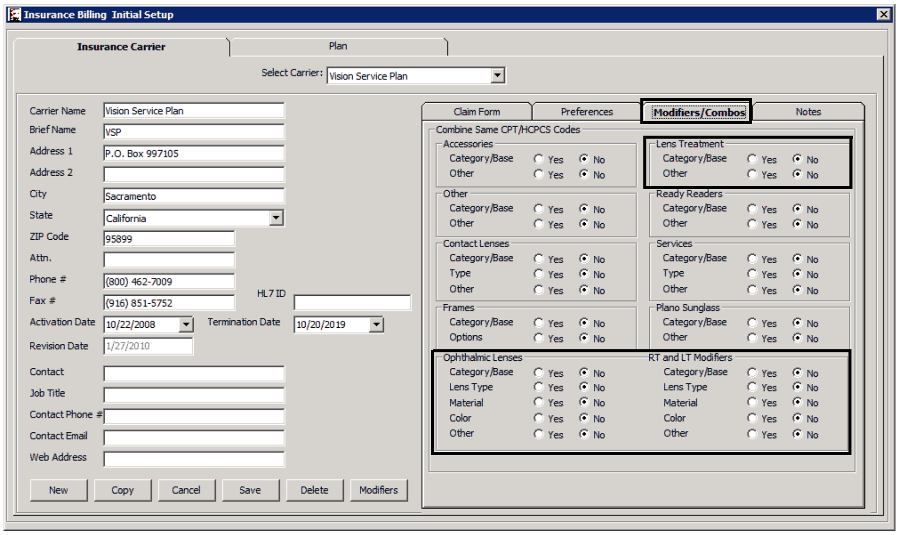
12. Select **VSP Interface** from the **E-Claim Processor** drop-down menu


Insurance Billing Initial Setup
Insurance Carrier
Plan
Claim Form
Preferences
Modifiers/Combos
Notes
New
Copy
Cancel
Save
Delete
Modifiers

Select Carrier:	Vision Service Plan
Carrier Name	Vision Service Plan
Brief Name	VSP
Address 1	P.O. Box 997105
Address 2	
City	Sacramento
State	California
ZIP Code	95899
Attn.	
Phone #	(800) 462-7009
Fax #	(916) 851-5752
HL7 ID	
Activation Date	10/22/2008
Termination Date	10/20/2019
Revision Date	1/27/2010
Contact	
Job Title	
Contact Phone #	
Contact Email	
Web Address	

Box 1 Insurance Type	VSP	
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	Doctor's EIN	
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
Policy Type	Other	
Output Format	CMS 1500 Form	
E-Claim Processor	VSP Interface	
E-Claim Path	C:\OFFICEMATE\DATA\EMC	

13. Click **Save**.
14. Click the **Modifiers/Combos** tab.
15. Ensure that all **Ophthalmic Lenses** and **Lens Treatment** radio buttons are set to **No**.


Insurance Billing Initial Setup
Insurance Carrier
Plan
Claim Form
Preferences
Modifiers/Combos
Notes
New
Copy
Cancel
Save
Delete
Modifiers

Select Carrier:	Vision Service Plan
Carrier Name	Vision Service Plan
Brief Name	VSP
Address 1	P.O. Box 997105
Address 2	
City	Sacramento
State	California
ZIP Code	95899
Attn.	
Phone #	(800) 462-7009
Fax #	(916) 851-5752
HL7 ID	
Activation Date	10/22/2008
Termination Date	10/20/2019
Revision Date	1/27/2010
Contact	
Job Title	
Contact Phone #	
Contact Email	
Web Address	

Combine Same CPT/HCPCS Codes

Accessories		
Category/Base	○ Yes	● No
Other	○ Yes	● No
Other		
Category/Base	○ Yes	● No
Other	○ Yes	● No
Contact Lenses		
Category/Base	○ Yes	● No
Type	○ Yes	● No
Other	○ Yes	● No
Frames		
Category/Base	○ Yes	● No
Options	○ Yes	● No
Ophthalmic Lenses		
Category/Base	○ Yes	● No
Lens Type	○ Yes	● No
Material	○ Yes	● No
Color	○ Yes	● No
Other	○ Yes	● No
Lens Treatment		
Category/Base	○ Yes	● No
Other	○ Yes	● No
Ready Readers		
Category/Base	○ Yes	● No
Other	○ Yes	● No
Services		
Category/Base	○ Yes	● No
Type	○ Yes	● No
Other	○ Yes	● No
Plano Sunglass		
Category/Base	○ Yes	● No
Other	○ Yes	● No
RT and LT Modifiers		
Category/Base	○ Yes	● No
Lens Type	○ Yes	● No
Material	○ Yes	● No
Color	○ Yes	● No
Other	○ Yes	● No

16. Click **Save**.

▶ To set up insurance plan information

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 156.

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 157.
2. Select Vision Service Plan or VSP from the **Select Plan** drop-down menu.

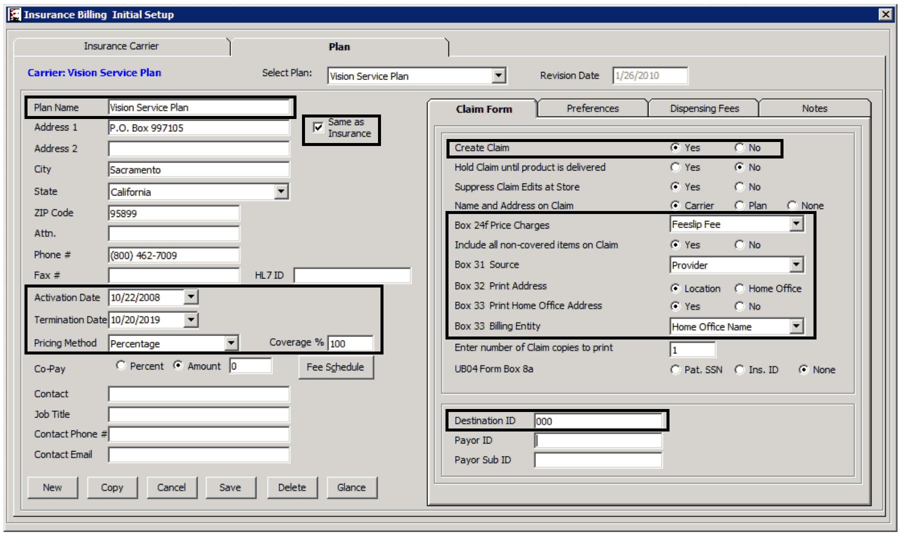
   OR

   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.


Insurance Billing Initial Setup
Insurance Carrier
Plan
Claim Form
Preferences
Dispensing Fees
Notes
Fee Schedule
New
Copy
Cancel
Save
Delete
Glance

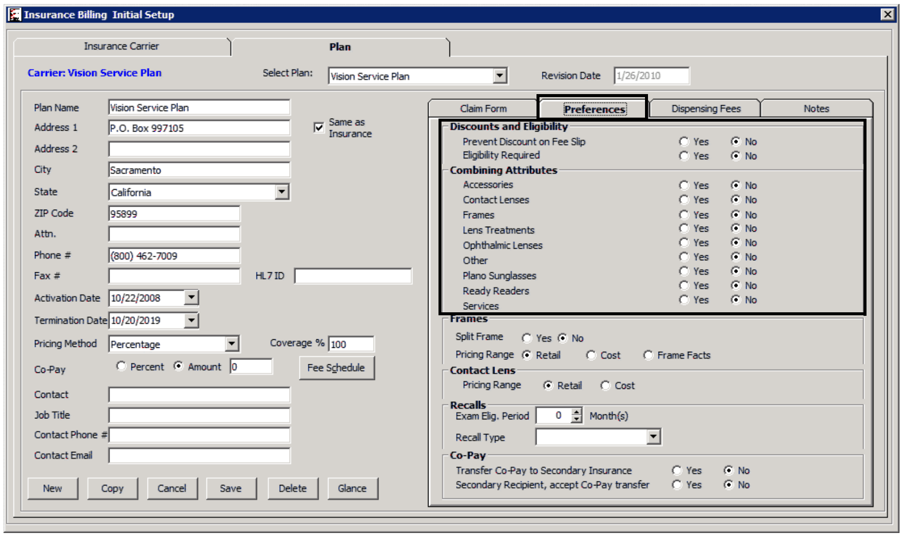
Carrier: Vision Service Plan

Select Plan:	Vision Service Plan
Revision Date	1/26/2010
Plan Name	Vision Service Plan
Address 1	P.O. Box 997105
Address 2	
City	Sacramento
State	California
ZIP Code	95899
Attn.	
Phone #	(800) 462-7009
Fax #	
HL7 ID	
Activation Date	10/22/2008
Termination Date	10/20/2019
Pricing Method	Percentage
Coverage %	100
Co-Pay	○ Percent ● Amount 0
Contact	
Job Title	
Contact Phone #	
Contact Email	

☑ Same as Insurance

Create Claim	● Yes	○ No	
Hold Claim until product is delivered	○ Yes	● No	
Suppress Claim Edits at Store	● Yes	○ No	
Name and Address on Claim	● Carrier	○ Plan	○ None
Box 24f Price Charges	Feeslip Fee		
Include all non-covered items on Claim	● Yes	○ No	
Box 31 Source	Provider		
Box 32 Print Address	● Location	○ Home Office	
Box 33 Print Home Office Address	● Yes	○ No	
Box 33 Billing Entity	Home Office Name		
Enter number of Claim copies to print	1		
UB04 Form Box 8a	○ Pat. SSN	○ Ins. ID	● None
Destination ID	000		
Payor ID			
Payor Sub ID			

17. Click **Save**.
18. Click the **Preferences** tab.
19. Ensure that all **Discounts and Eligibility** and **Combining Attributes** radio buttons are set to **No**.


Insurance Billing Initial Setup
Insurance Carrier
Plan
Claim Form
Preferences
Dispensing Fees
Notes
Fee Schedule
New
Copy
Cancel
Save
Delete
Glance

Carrier: Vision Service Plan

Select Plan:	Vision Service Plan
Revision Date	1/26/2010
Plan Name	Vision Service Plan
Address 1	P.O. Box 997105
Address 2	
City	Sacramento
State	California
ZIP Code	95899
Attn.	
Phone #	(800) 462-7009
Fax #	
HL7 ID	
Activation Date	10/22/2008
Termination Date	10/20/2019
Pricing Method	Percentage
Coverage %	100
Co-Pay	○ Percent ● Amount 0
Contact	
Job Title	
Contact Phone #	
Contact Email	

☑ Same as Insurance

Discounts and Eligibility

Prevent Discount on Fee Slip	○ Yes	● No
Eligibility Required	○ Yes	● No

Combining Attributes

Accessories	○ Yes	● No
Contact Lenses	○ Yes	● No
Frames	○ Yes	● No
Lens Treatments	○ Yes	● No
Ophthalmic Lenses	○ Yes	● No
Other	○ Yes	● No
Plano Sunglasses	○ Yes	● No
Ready Readers	○ Yes	● No
Services	○ Yes	● No

Frames

Split Frame	○ Yes	● No	
Pricing Range	● Retail	○ Cost	○ Frame Facts

Contact Lens

Pricing Range	● Retail	○ Cost

Recalls

Exam Elig. Period	0 Month(s)
Recall Type	

Co-Pay

Transfer Co-Pay to Secondary Insurance	○ Yes	● No
Secondary Recipient, accept Co-Pay transfer	○ Yes	● 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.

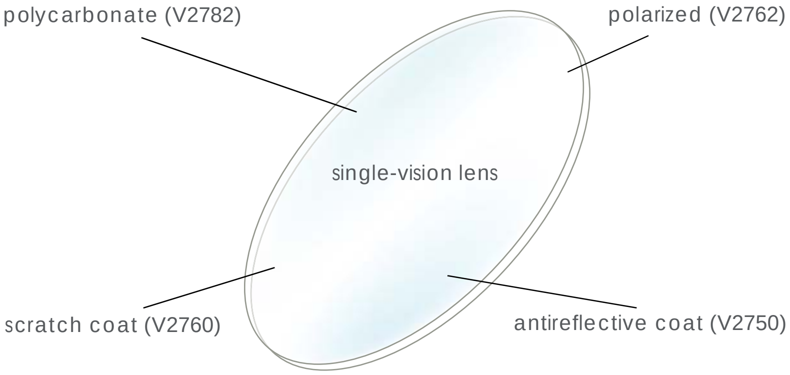


Figure 12-5:An example of the attributes that make up a lens. OfficeMate allows you to select a product and automatically populate the insurance claim with the product's basic attributes.

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, 140
- To add & modify additional attributes, 142

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 254.

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 520.
- 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 520.

Downloading VSP Lists

You must download VSP lists before you can map your products and submit orders and insurance claims to Eyefinity.

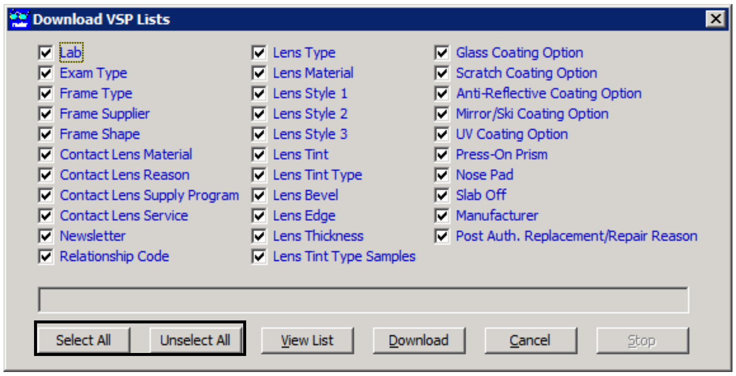
VSP lists are also downloaded when you run the Lens Product Loader. If you recently ran the Lens Product Loader, you do not need to download the VSP lists again. If you need to send orders to a new lab, you can also use the following instructions to download the latest list of labs.

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.

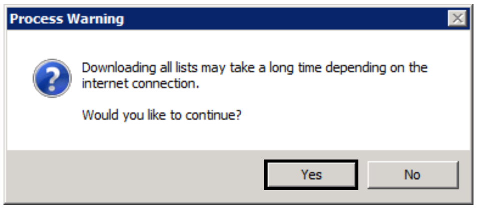


☑ Lab
☑ Exam Type
☑ Frame Type
☑ Frame Supplier
☑ Frame Shape
☑ Contact Lens Material
☑ Contact Lens Reason
☑ Contact Lens Supply Program
☑ Contact Lens Service
☑ Newsletter
☑ Relationship Code
☑ Lens Type
☑ Lens Material
☑ Lens Style 1
☑ Lens Style 2
☑ Lens Style 3
☑ Lens Tint
☑ Lens Tint Type
☑ Lens Bevel
☑ Lens Edge
☑ Lens Thickness
☑ Lens Tint Type Samples
☑ Glass Coating Option
☑ Scratch Coating Option
☑ Anti-Reflective Coating Option
☑ Mirror/Ski Coating Option
☑ UV Coating Option
☑ Press-On Prism
☑ Nose Pad
☑ Slab Off
☑ Manufacturer
☑ Post Auth. Replacement/Repair Reason

3. Click **Download**.

   The Process Warning window opens.

4. Click **Yes** to download the VSP lists that you selected.



Downloading all lists may take a long time depending on the internet connection.

Would you like to continue?

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, 524
- To add missing frame mount information, 524

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 247.

▶ To load frame products into OfficeMate

1. For information about loading frame products into OfficeMate, go to Using FrameMate on page 419.
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 524.

▶ To add missing frame mount information

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.

NOTE	For complete information about the Product Maintenance window, go to Updating Many Products & Services on page 287.

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.

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, 525
- Using the Products Module to Map Individual Products, 529

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 529. 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, 525
- To map OfficeMate products to VSP definitions, 526
- To select VSP-approved labs, 528

▶ To assign VSP codes to OfficeMate product descriptions

Before you map your OfficeMate products you must assign VSP codes to your OfficeMate product descriptions.

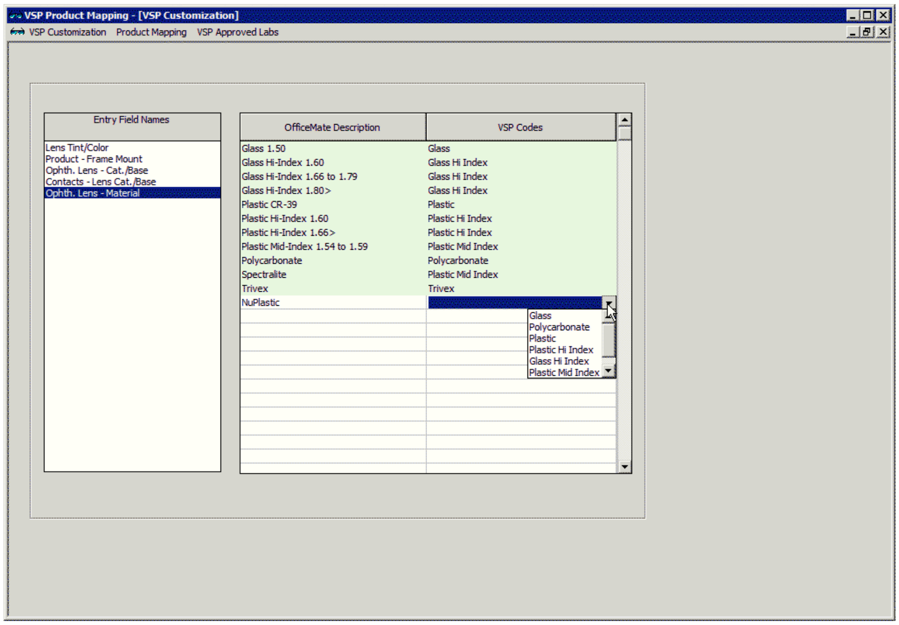
NOTE	If you downloaded ophthalmic lenses and lens treatments using the Lens Product Loader, the VSP Customization tab is completed for you, and you can skip this section and go directly to To map OfficeMate products to VSP definitions on page 526. For information about downloading products using the Lens Product Loader, go to Loading Lens Products into OfficeMate on page 521.

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.



Entry Field Names
Lens Tint/Color
Product - Frame Mount
Ophth. Lens - Cat./Base
Contacts - Lens Cat./Base
Ophth. Lens - Material

OfficeMate Description	VSP Codes
Glass 1.50	Glass
Glass Hi-Index 1.60	Glass Hi Index
Glass Hi-Index 1.66 to 1.79	Glass Hi Index
Glass Hi-Index 1.80>	Glass Hi Index
Plastic CR-39	Plastic
Plastic Hi-Index 1.60	Plastic Hi Index
Plastic Hi-Index 1.66>	Plastic Hi Index
Plastic Mid-Index 1.54 to 1.59	Plastic Mid Index
Polycarbonate	Polycarbonate
Spectralite	Plastic Mid Index
Trivex	Trivex
NuPlastic	

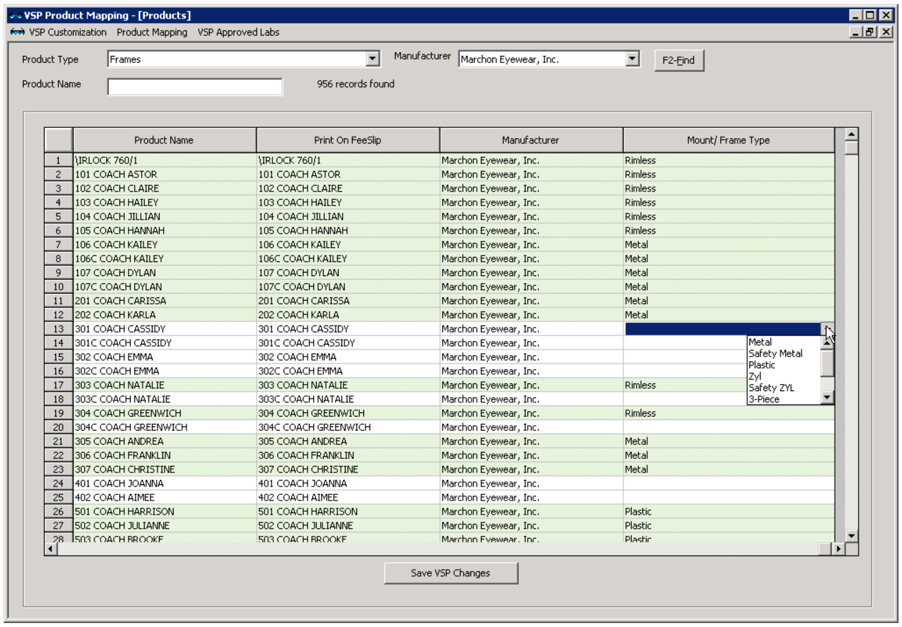
4. Click the names in the **Entry Field Names** column on the left side of the window and repeat step 3 for each name until all of the OfficeMate descriptions have been assigned VSP codes.
5. Go to To map OfficeMate products to VSP definitions on page 526 to map your OfficeMate products to VSP definitions.

▶ 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.

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 **Product Mapping** tab and go to step 2.
2. Select a product type from the **Product Type** drop-down menu.
3. 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.
4. Type a product name in the **Product Name** text box to search for a specific product.
5. 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 529.
   - Plano Sunglasses: Mount/Frame Type



Product Type: Frames
Manufacturer: Marchon Eyewear, Inc.
Product Name:
956 records found

	Product Name	Print On FeeSlip	Manufacturer	Mount/ Frame Type
1	\IRLOCK 760/1	\IRLOCK 760/1	Marchon Eyewear, Inc.	Rimless
2	101 COACH ASTOR	101 COACH ASTOR	Marchon Eyewear, Inc.	Rimless
3	102 COACH CLAIRE	102 COACH CLAIRE	Marchon Eyewear, Inc.	Rimless
4	103 COACH HAILEY	103 COACH HAILEY	Marchon Eyewear, Inc.	Rimless
5	104 COACH JILLIAN	104 COACH JILLIAN	Marchon Eyewear, Inc.	Rimless
6	105 COACH HANNAH	105 COACH HANNAH	Marchon Eyewear, Inc.	Rimless
7	106 COACH KAILEY	106 COACH KAILEY	Marchon Eyewear, Inc.	Metal
8	106C COACH KAILEY	106C COACH KAILEY	Marchon Eyewear, Inc.	Metal
9	107 COACH DYLAN	107 COACH DYLAN	Marchon Eyewear, Inc.	Metal
10	107C COACH DYLAN	107C COACH DYLAN	Marchon Eyewear, Inc.	Metal
11	201 COACH CARISSA	201 COACH CARISSA	Marchon Eyewear, Inc.	Metal
12	202 COACH KARLA	202 COACH KARLA	Marchon Eyewear, Inc.	Metal
13	301 COACH CASSIDY	301 COACH CASSIDY	Marchon Eyewear, Inc.	
14	301C COACH CASSIDY	301C COACH CASSIDY	Marchon Eyewear, Inc.	
15	302 COACH EMMA	302 COACH EMMA	Marchon Eyewear, Inc.	
16	302C COACH EMMA	302C COACH EMMA	Marchon Eyewear, Inc.	
17	303 COACH NATALIE	303 COACH NATALIE	Marchon Eyewear, Inc.	Rimless
18	303C COACH NATALIE	303C COACH NATALIE	Marchon Eyewear, Inc.	
19	304 COACH GREENWICH	304 COACH GREENWICH	Marchon Eyewear, Inc.	Rimless
20	304C COACH GREENWICH	304C COACH GREENWICH	Marchon Eyewear, Inc.	
21	305 COACH ANDREA	305 COACH ANDREA	Marchon Eyewear, Inc.	Metal
22	306 COACH FRANKLIN	306 COACH FRANKLIN	Marchon Eyewear, Inc.	Metal
23	307 COACH CHRISTINE	307 COACH CHRISTINE	Marchon Eyewear, Inc.	Metal
24	401 COACH JOANNA	401 COACH JOANNA	Marchon Eyewear, Inc.	
25	402 COACH AIMEE	402 COACH AIMEE	Marchon Eyewear, Inc.	
26	501 COACH HARRISON	501 COACH HARRISON	Marchon Eyewear, Inc.	Plastic
27	502 COACH JULIANNE	502 COACH JULIANNE	Marchon Eyewear, Inc.	Plastic
28	503 COACH BROOKE	503 COACH BROOKE	Marchon Eyewear, Inc.	Plastic

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 528 to select the VSP-approved labs to which you want to send orders.

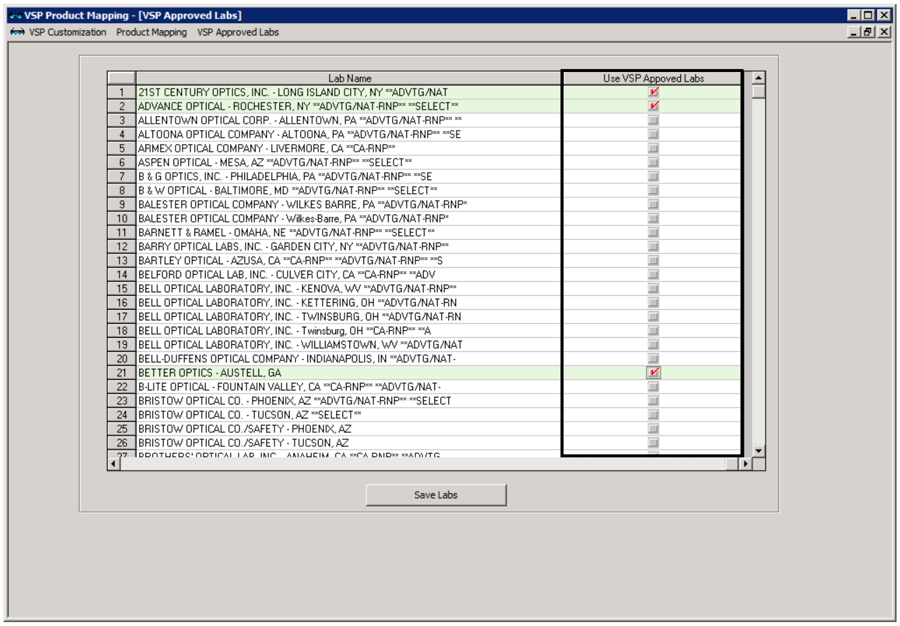
▶ To select VSP-approved labs

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.



	Lab Name	Use VSP Appoved Labs
1	21ST CENTURY OPTICS, INC. - LONG ISLAND CITY, NY **ADVTG/NAT	☑
2	ADVANCE OPTICAL - ROCHESTER, NY **ADVTG/NAT-RNP** **SELECT**	☑
3	ALLENTOWN OPTICAL CORP. - ALLENTOWN, PA **ADVTG/NAT-RNP** **	☐
4	ALTOONA OPTICAL COMPANY - ALTOONA, PA **ADVTG/NAT-RNP** **SE	☐
5	ARMEX OPTICAL COMPANY - LIVERMORE, CA **CA-RNP**	☐
6	ASPEN OPTICAL - MESA, AZ **ADVTG/NAT-RNP** **SELECT**	☐
7	B & G OPTICS, INC. - PHILADELPHIA, PA **ADVTG/NAT-RNP** **SE	☐
8	B & W OPTICAL - BALTIMORE, MD **ADVTG/NAT-RNP** **SELECT**	☐
9	BALESTER OPTICAL COMPANY - WILKES BARRE, PA **ADVTG/NAT-RNP*	☐
10	BALESTER OPTICAL COMPANY - Wilkes-Barre, PA **ADVTG/NAT-RNP*	☐
11	BARNETT & RAMEL - OMAHA, NE **ADVTG/NAT-RNP** **SELECT**	☐
12	BARRY OPTICAL LABS, INC. - GARDEN CITY, NY **ADVTG/NAT-RNP**	☐
13	BARTLEY OPTICAL - AZUSA, CA **CA-RNP** **ADVTG/NAT-RNP** **S	☐
14	BELFORD OPTICAL LAB, INC. - CULVER CITY, CA **CA-RNP** **ADV	☐
15	BELL OPTICAL LABORATORY, INC. - KENOVA, WV **ADVTG/NAT-RNP**	☐
16	BELL OPTICAL LABORATORY, INC. - KETTERING, OH **ADVTG/NAT-RN	☐
17	BELL OPTICAL LABORATORY, INC. - TWINSBURG, OH **ADVTG/NAT-RN	☐
18	BELL OPTICAL LABORATORY, INC. - Twinsburg, OH **CA-RNP** **A	☐
19	BELL OPTICAL LABORATORY, INC. - WILLIAMSTOWN, WV **ADVTG/NAT	☐
20	BELL-DUFFENS OPTICAL COMPANY - INDIANAPOLIS, IN **ADVTG/NAT-	☐
21	BETTER OPTICS - AUSTELL, GA	☑
22	B-LITE OPTICAL - FOUNTAIN VALLEY, CA **CA-RNP** **ADVTG/NAT-	☐
23	BRISTOW OPTICAL CO. - PHOENIX, AZ **ADVTG/NAT-RNP** **SELECT	☐
24	BRISTOW OPTICAL CO. - TUCSON, AZ **SELECT**	☐
25	BRISTOW OPTICAL CO./SAFETY - PHOENIX, AZ	☐
26	BRISTOW OPTICAL CO./SAFETY - TUCSON, AZ	☐
27	BROTHERS' OPTICAL LAB, INC. - ANAHEIM, CA **CA-RNP** **ADVTG	☐

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 **×** in the upper right corner of the window to close the VSP Product Mapping window.

Using the Products Module to Map Individual Products

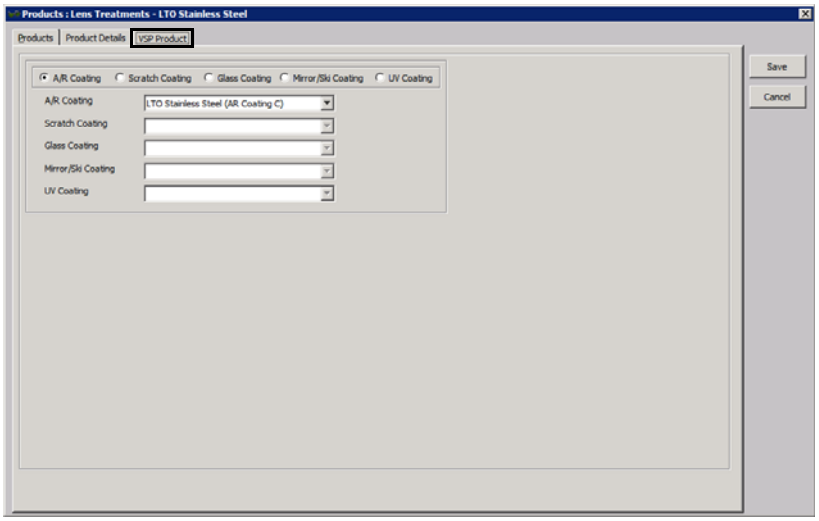
This section calls attention only to the fields and options required for the VSP Interface. For complete information about setting up products, go to Maintaining Product & Service Information on page 247.

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 525.

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.

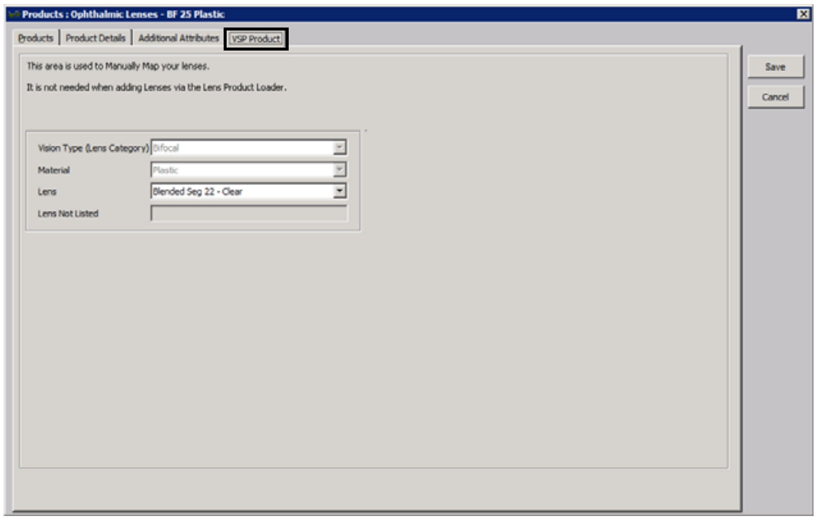

Products : Lens Treatments - LTO Stainless Steel
Products
Product Details
VSP Product
○ Scratch Coating
○ Glass Coating
○ Mirror/Ski Coating
○ UV Coating
Scratch Coating
Glass Coating
Mirror/Ski Coating
UV Coating
Save
Cancel

● A/R Coating

A/R Coating: LTO Stainless Steel (AR Coating C)

   - 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.


Products : Ophthalmic Lenses - BF 25 Plastic
Products
Product Details
Additional Attributes
VSP Product
Save
Cancel

This area is used to Manually Map your lenses.

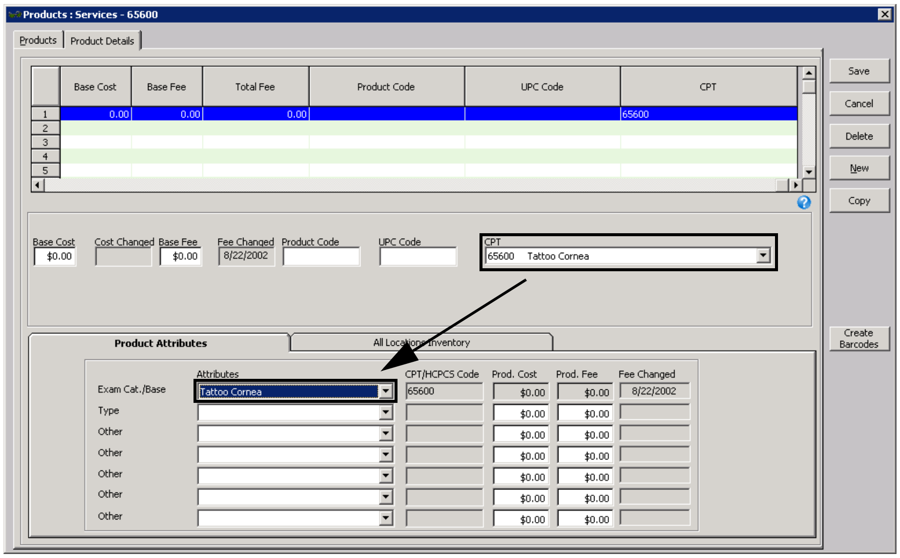
It is not needed when adding Lenses via the Lens Product Loader.

Vision Type (Lens Category): Bifocal
Material: Plastic
Lens: Blended Seg 22 - Clear
Lens Not Listed:

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.


Products : Services - 65600
Products
Product Details
Save
Cancel
Delete
New
Copy
Create Barcodes
Product Attributes
All Locations Inventory

	Base Cost	Base Fee	Total Fee	Product Code	UPC Code	CPT
1	0.00	0.00	0.00			65600
2						
3						
4						
5						

Base Cost: $0.00
Cost Changed:
Base Fee: $0.00
Fee Changed: 8/22/2002
Product Code:
UPC Code:
CPT: 65600 Tattoo Cornea

	Attributes	CPT/HCPCS Code	Prod. Cost	Prod. Fee	Fee Changed
Exam Cat./Base	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	
Other			$0.00	$0.00	

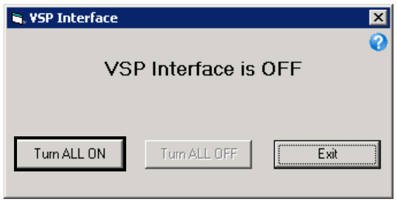
For more information, go to To maintain service attributes on page 285.

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**.


VSP Interface
Turn ALL ON
Turn ALL OFF
Exit

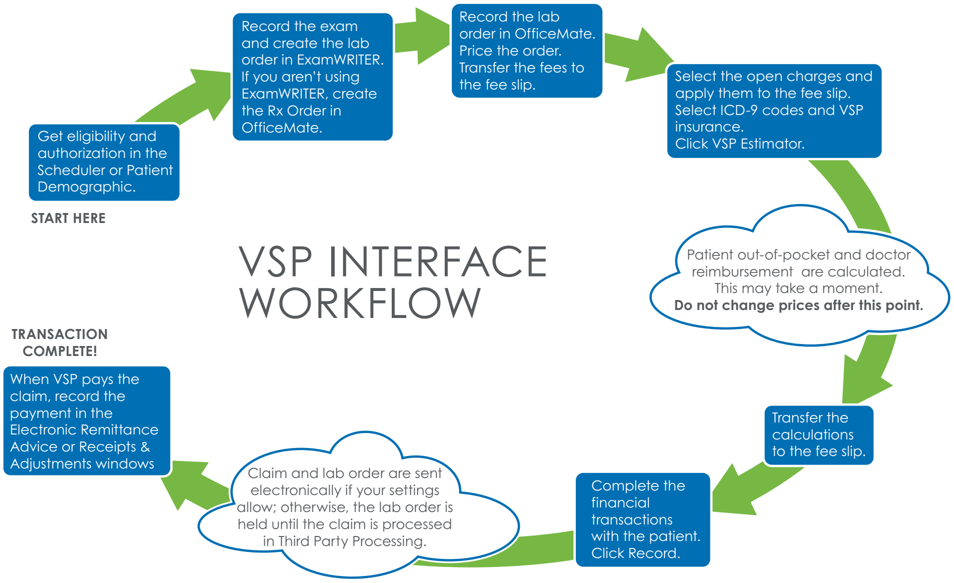
VSP Interface is OFF

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 it's 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.

For information on VSP doctor reimbursements, watch the "VSP Interface Doctor Reimbursement" video.


VSP INTERFACE WORKFLOW
START HERE
Get eligibility and authorization in the Scheduler or Patient Demographic.
Record the exam and create the lab order in ExamWRITER. If you aren't using ExamWRITER, create the Rx Order in OfficeMate.
Record the lab order in OfficeMate. Price the order. Transfer the fees to the fee slip.
Select the open charges and apply them to the fee slip. Select ICD-9 codes and VSP insurance. Click VSP Estimator.
Patient out-of-pocket and doctor reimbursement are calculated. This may take a moment. Do not change prices after this point.
Transfer the calculations to the fee slip.
Complete the financial transactions with the patient. Click Record.
Claim and lab order are sent electronically if your settings allow; otherwise, the lab order is held until the claim is processed in Third Party Processing.
When VSP pays the claim, record the payment in the Electronic Remittance Advice or Receipts & Adjustments windows
TRANSACTION COMPLETE!

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, 532
- Researching VSP Insurance Claims & Lab Orders, 539
- Recording Insurance Payments Using Electronic Remittance Advice, 368

Getting Member Eligibility & VSP Authorization

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, 532
- To obtain VSP member eligibility and authorization information, 533
- To view eligibility, doctor reports, and packing slips, 537
- To view authorizations, 538

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 517.

▶ To set up a patient's VSP insurance

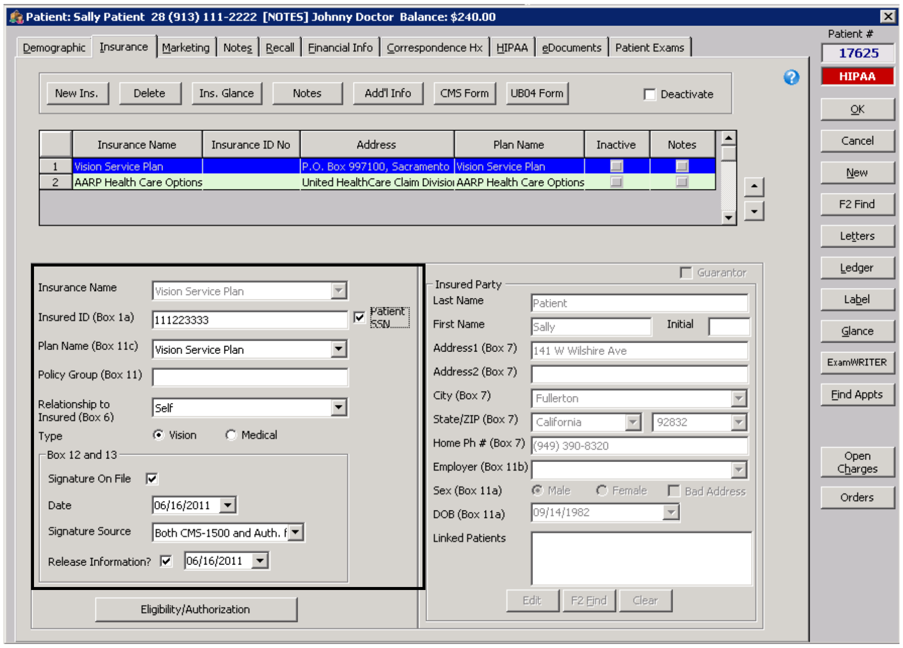
This section calls attention only to the fields and options required for the VSP Interface. For complete information about setting up patient insurance information, go to To record insurance information on page 213.

1. Open the Patient Demographic window. For more information about opening the Patient Demographic window, go to Opening Patient Records on page 202.
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.

8. Select the patient’s relationship to the insured party from the **Relationship to Insured (Box 6)** drop-down menu.


Demographic
Insurance
Marketing
Notes
Recall
Financial Info
Correspondence Hx
HIPAA
eDocuments
Patient Exams
New Ins.
Delete
Ins. Glance
Notes
Add'l Info
CMS Form
UB04 Form
OK
Cancel
New
F2 Find
Letters
Ledger
Label
Glance
ExamWRITER
Find Appts
Open Charges
Orders
Eligibility/Authorization
Edit
F2 Find
Clear

Patient: Sally Patient 28 (913) 111-2222 [NOTES] Johnny Doctor Balance: $240.00

Patient # 17625

HIPAA

☐ Deactivate

	Insurance Name	Insurance ID No	Address	Plan Name	Inactive	Notes
1	Vision Service Plan		P.O. Box 997100, Sacramento	Vision Service Plan	☐	☐
2	AARP Health Care Options		United HealthCare Claim Divisio	AARP Health Care Options	☐	☐

Insurance Name: Vision Service Plan
Insured ID (Box 1a): 111223333 ☑ Patient SSN
Plan Name (Box 11c): Vision Service Plan
Policy Group (Box 11):
Relationship to Insured (Box 6): Self
Type: ● Vision ○ Medical

Box 12 and 13
Signature On File ☑
Date: 06/16/2011
Signature Source: Both CMS-1500 and Auth. f
Release Information? ☑ 06/16/2011

☐ Guarantor

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:

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.

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. If you already have an authorization, click **Enter Existing Authorization** to manually enter and validate an authorization number.
5. Click **Eligibility/Authorization**.

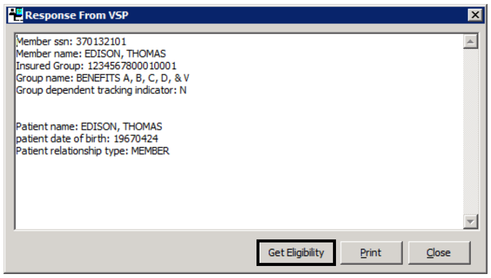
NOTES	• You must click Eligibility/Authorization even if you entered an existing authorization. • A check mark next to the Eligibility/Authorization button indicates that the patient has an active VSP authorization that is less than thirty days old.

The VSP Eligibility/Authorization window opens.

6. 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**.

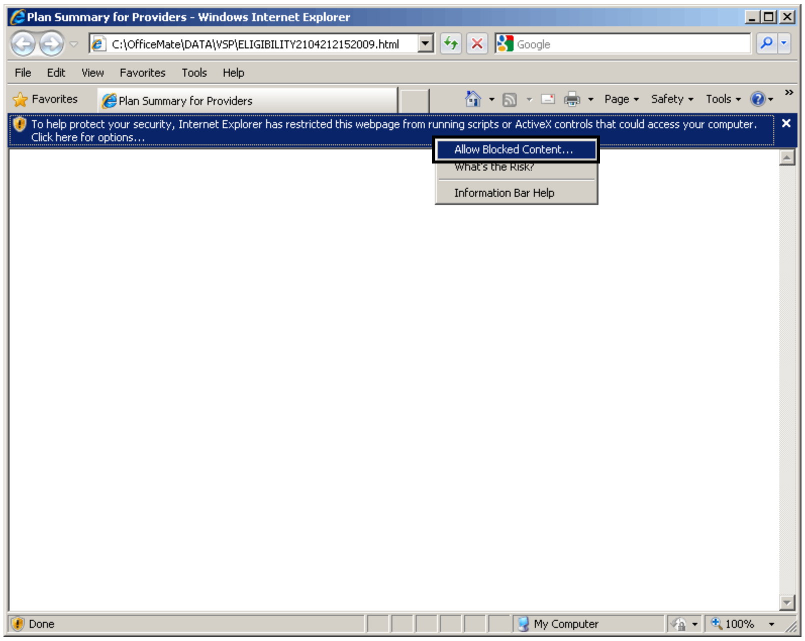

Response From VSP
Get Eligibility
Print
Close

Member ssn: 370132101
Member name: EDISON, THOMAS
Insured Group: 12345678000010001
Group name: BENEFITS A, B, C, D, & V
Group dependent tracking indicator: N

Patient name: EDISON, THOMAS
patient date of birth: 19670424
Patient relationship type: MEMBER

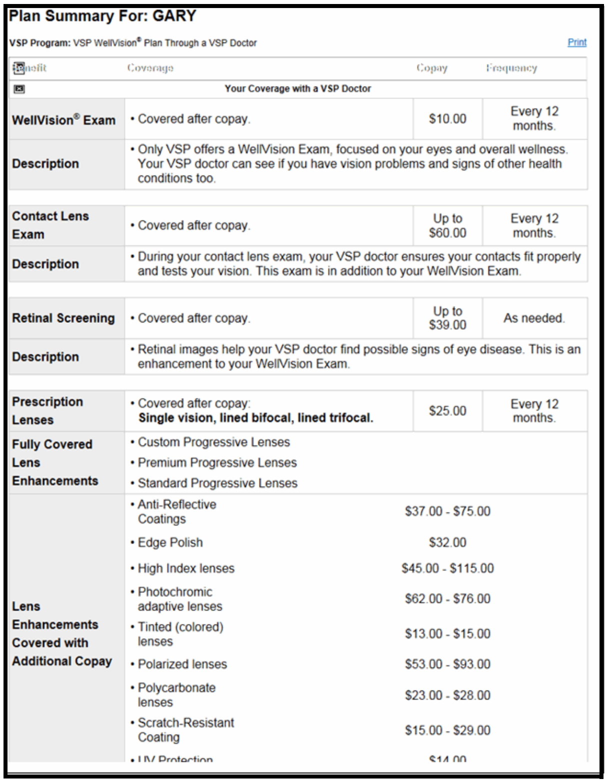
Your Web browser opens to display the patient’s eligibility.

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.


Plan Summary for Providers - Windows Internet Explorer
C:\OfficeMate\DATA\VSP\ELIGIBILITY2104212152009.html
Google
File
Edit
View
Favorites
Tools
Help
Favorites
Plan Summary for Providers
Page
Safety
Tools
Allow Blocked Content...
What's the Risk?
Information Bar Help
Done
My Computer
100%

To help protect your security, Internet Explorer has restricted this webpage from running scripts or ActiveX controls that could access your computer. Click here for options...

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	• 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	

9. Click the **×** 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.

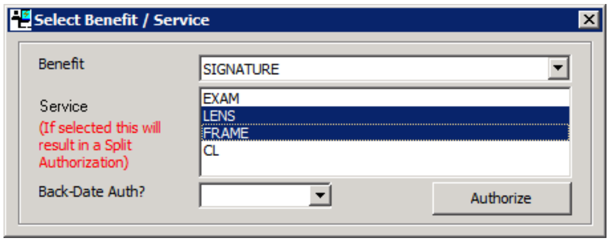
10. Select a benefit from the **Benefit** drop-down menu.

    A list of services is displayed in the **Service** box.

11. If you only want to obtain authorization for a specific service or group of services (split authorization), select them from the **Service** box.

12. If this is a back-dated authorization, type the date of the service in the **Back-Date Auth?** field.

13. Click **Authorize** to obtain authorization for all of the services listed for the benefit you selected.


Select Benefit / Service
Back-Date Auth?
Authorize

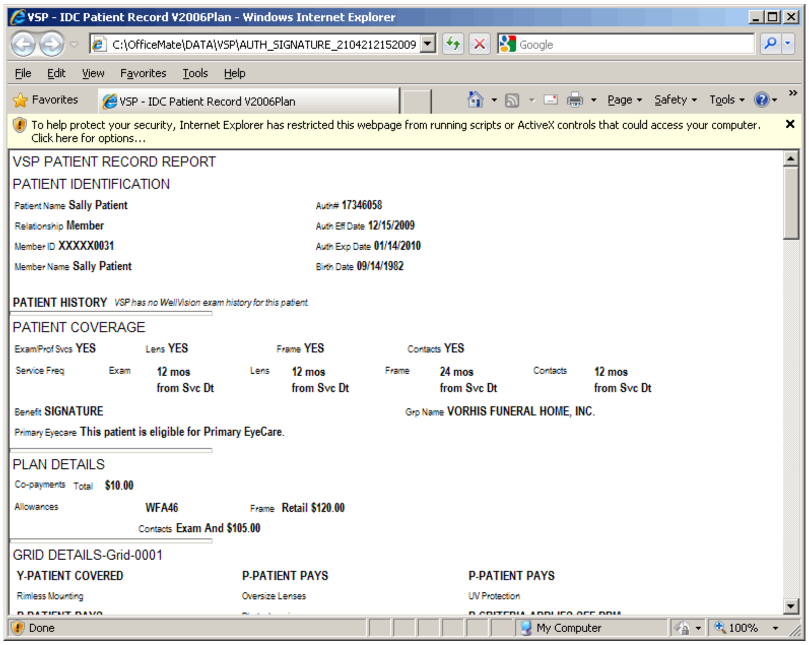
Benefit SIGNATURE

Service
(If selected this will result in a Split Authorization)

EXAM
LENS
FRAME
CL

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.


VSP - IDC Patient Record V2006Plan - Windows Internet Explorer
C:\OfficeMate\DATA\VSP\AUTH_SIGNATURE_2104212152009
Google
File Edit View Favorites Tools Help
Favorites
VSP - IDC Patient Record V2006Plan
Page Safety Tools
Done
My Computer
100%

To help protect your security, Internet Explorer has restricted this webpage from running scripts or ActiveX controls that could access your computer. Click here for options...

VSP PATIENT RECORD REPORT

PATIENT IDENTIFICATION

Patient Name Sally Patient
Auth# 17346058
Relationship Member
Auth Eff Date 12/15/2009
Member ID XXXXX0031
Auth Exp Date 01/14/2010
Member Name Sally Patient
Birth Date 09/14/1982

PATIENT HISTORY *VSP has no WellVision exam history for this patient.*

PATIENT COVERAGE

Exam/Prof Svcs YES
Lens YES
Frame YES
Contacts YES

Service Freq
Exam 12 mos from Svc Dt
Lens 12 mos from Svc Dt
Frame 24 mos from Svc Dt
Contacts 12 mos from Svc Dt

Benefit SIGNATURE
Grp Name VORHIS FUNERAL HOME, INC.
Primary Eyecare This patient is eligible for Primary EyeCare.

PLAN DETAILS

Co-payments Total $10.00
Allowances WFA46
Frame Retail $120.00
Contacts Exam And $105.00

GRID DETAILS-Grid-0001

Y-PATIENT COVERED	P-PATIENT PAYS	P-PATIENT PAYS
Rimless Mounting	Oversize Lenses	UV Protection

14. Click the × in the top right corner of the window to close the VSP-IDC Patient Record window after viewing or printing the information.
15. 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 538.

▶ 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**.

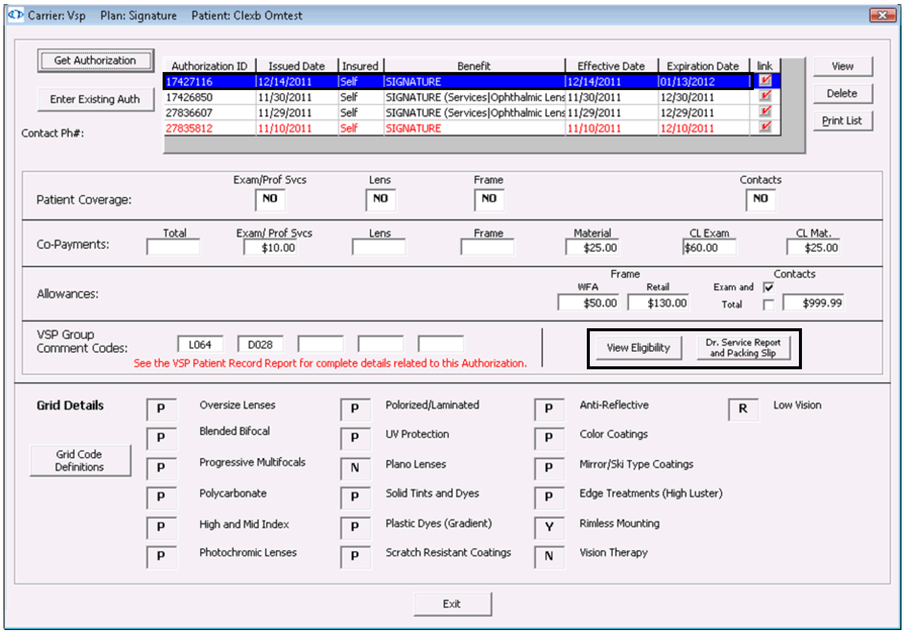
   The VSP Eligibility/Authorization window opens.
5. Select an authorization from those listed at the top of the window.
6. Click **View Eligibility**, as needed, to view the patient's eligibility that was transmitted from VSP.

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 533.

   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.



Carrier: Vsp Plan: Signature Patient: Clexb Omtest

Authorization ID	Issued Date	Insured	Benefit	Effective Date	Expiration Date	link
17427116	12/14/2011	Self	SIGNATURE	12/14/2011	01/13/2012	☑
17426850	11/30/2011	Self	SIGNATURE (Services|Ophthalmic Lens	11/30/2011	12/30/2011	☑
27836607	11/29/2011	Self	SIGNATURE (Services|Ophthalmic Lens	11/29/2011	12/29/2011	☑
27835812	11/10/2011	Self	SIGNATURE	11/10/2011	12/10/2011	☑

Contact Ph#:

	Exam/Prof Svcs	Lens	Frame	Contacts
Patient Coverage:	NO	NO	NO	NO

	Total	Exam/ Prof Svcs	Lens	Frame	Material	CL Exam	CL Mat.
Co-Payments:		$10.00			$25.00	$60.00	$25.00

Allowances:

Frame: WFA $50.00 Retail $130.00

Contacts: Exam and ☑ Total ☐ $999.99

VSP Group Comment Codes: L064 D028

See the VSP Patient Record Report for complete details related to this Authorization.

Grid Details

P	Oversize Lenses	P	Polorized/Laminated	P	Anti-Reflective	R	Low Vision
P	Blended Bifocal	P	UV Protection	P	Color Coatings		
P	Progressive Multifocals	N	Plano Lenses	P	Mirror/Ski Type Coatings		
P	Polycarbonate	P	Solid Tints and Dyes	P	Edge Treatments (High Luster)		
P	High and Mid Index	P	Plastic Dyes (Gradient)	Y	Rimless Mounting		
P	Photochromic Lenses	P	Scratch Resistant Coatings	N	Vision Therapy		

9. Click **Exit** to close the VSP Eligibility/Authorization window.

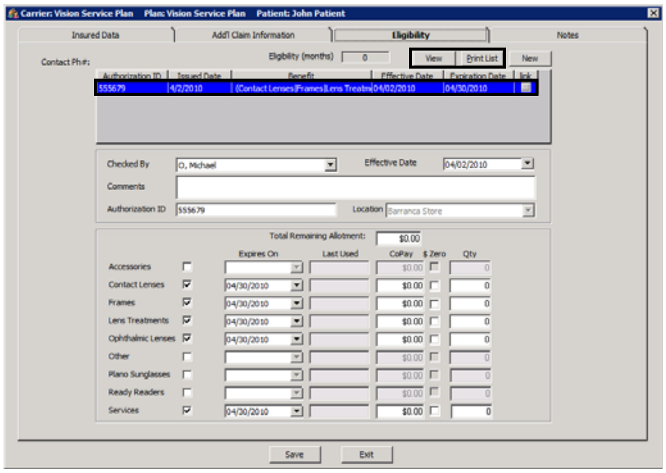
▶ To view authorizations

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**.

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.

5. Double-click an authorization or select an authorization from those listed at the top of the window and click **View**.
6. To print a list of the patient's VSP authorizations, click **Print List**.


Carrier: Vision Service Plan Plan: Vision Service Plan Patient: John Patient
Insured Data
Add'l Claim Information
Eligibility
Notes
View
Print List
New
Save
Exit

Contact Ph#:

Eligibility (months) 0

Authorization ID	Issued Date	Benefit	Effective Date	Expiration Date	link
555679	4/2/2010	(Contact Lenses|Frames|Lens Treatm	04/02/2010	04/30/2010	☐

Checked By: O, Michael

Effective Date: 04/02/2010

Comments:

Authorization ID: 555679

Location: Barranca Store

Total Remaining Allotment: $0.00

		Expires On	Last Used	CoPay	$ Zero	Qty
Accessories	☐			$0.00	☐	0
Contact Lenses	☑	04/30/2010		$0.00	☐	0
Frames	☑	04/30/2010		$0.00	☐	0
Lens Treatments	☑	04/30/2010		$0.00	☐	0
Ophthalmic Lenses	☑	04/30/2010		$0.00	☐	0
Other	☐			$0.00	☐	0
Plano Sunglasses	☐			$0.00	☐	0
Ready Readers	☐			$0.00	☐	0
Services	☑	04/30/2010		$0.00	☐	0

7. 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:

1. 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 532.
2. Record or retrieve an authorization for both plans. For more information, go to To obtain VSP member eligibility and authorization information on page 533.
3. Record the order at a store location in OfficeMate.

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.

Researching VSP Insurance Claims & Lab Orders

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 457.

To view the status of VSP claims and lab orders, perform the following steps:

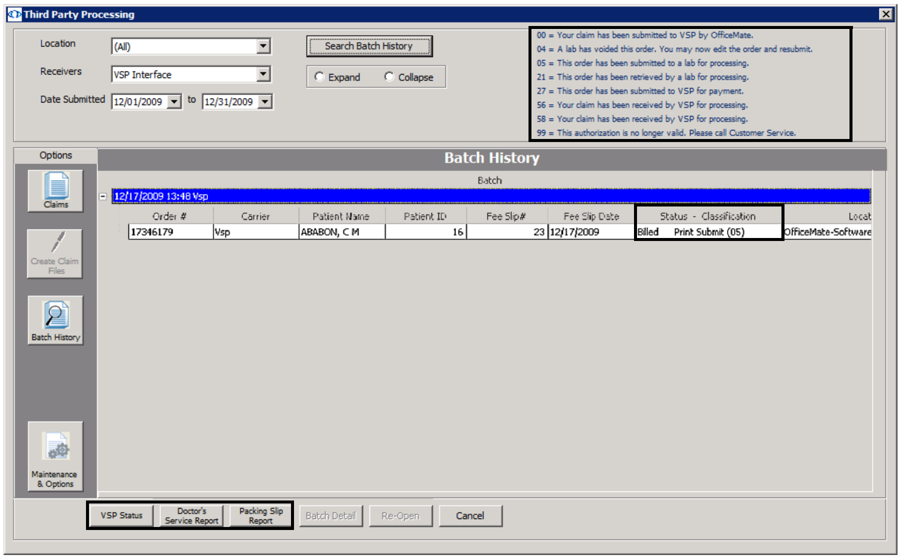
This section calls attention only to the fields and options particular to the VSP Interface. For complete information about researching insurance claims, go to Using the Batch History on page 478.

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.

9. Compare the number listed in the Status Classification column with the code list displayed at the top of the window.


Third Party Processing
Search Batch History
○ Expand
○ Collapse
Options
Claims
Create Claim Files
Batch History
Maintenance & Options
Batch History
Batch
VSP Status
Doctor's Service Report
Packing Slip Report
Batch Detail
Re-Open
Cancel

Location: (All)
Receivers: VSP Interface
Date Submitted: 12/01/2009 to 12/31/2009

00 = Your claim has been submitted to VSP by OfficeMate.
04 = A lab has voided this order. You may now edit the order and resubmit.
05 = This order has been submitted to a lab for processing.
21 = This order has been retrieved by a lab for processing.
27 = This order has been submitted to VSP for payment.
56 = Your claim has been received by VSP for processing.
58 = Your claim has been received by VSP for processing.
99 = This authorization is no longer valid. Please call Customer Service.

12/17/2009 13:48 Vsp

Order #	Carrier	Patient Name	Patient ID	Fee Slip#	Fee Slip Date	Status - Classification	Locat
17346179	Vsp	ABABON, C M	16	23	12/17/2009	Billed Print Submit (05)	OfficeMate-Software

10. Click **Doctor’s Service Report** to view the doctor’s service report, as needed.
11. Click **Packing Slip Report** to view and print the packing slip, as needed.
12. Click **Cancel** when you are finished.

Creating & Printing Reports & Statements

13

In this chapter:

For more information on creating reports, watch the "Reports Overview" video.

- Opening the Reports & Statements Window, 542
- Adding & Removing Reports From Tabs, 542
- Creating & Printing Daily Reports, 547
- Creating & Printing Weekly Reports, 550
- Creating & Printing Monthly Reports, 552
- Creating & Printing Yearly Reports, 555
- Creating & Printing On Demand Reports, 558
- Creating & Printing Internal Marketing Reports, 560
- Creating & Printing Statements, 561
- Creating & Printing Business Analysis Reports, 567
- Creating & Printing Custom Reports, 568
- Viewing the Business Insights Dashboard, Powered by The EDGE, 628
- Creating & Printing the Exam Analysis Report, 628
- Viewing the Report History, 630
- List of Reports, 633

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 97.
- 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.

NOTE

Security access to the business insights financial dashboard, *powered by* The EDGE, is controlled through the Administration product > Reports module > Business Insights Dashboard task. If staff members have security rights to this specific task, then they will have access to this integration. For detailed instructions on how to limit access to this integration, read article #000010137 in the Eyefinity Support Community. For information on setting up security settings in OfficeMate, go to Setting Up Security on page 97.

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, 543
- To remove reports from tabs, 547

▶ 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 542.
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

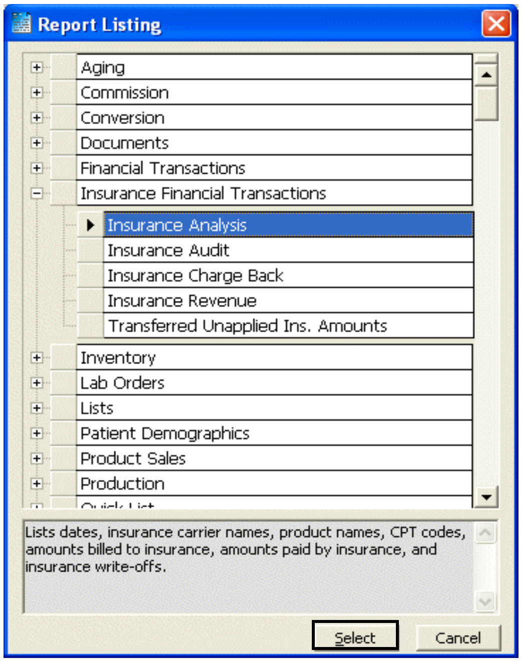
Production
Monthly Production Summary
Production
Production Summary by Provider on Fee Slip
Production Summary by Provider on Fee Slip Line Item

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


Report Listing
Aging
Commission
Conversion
Documents
Financial Transactions
Insurance Financial Transactions
Insurance Analysis
Insurance Audit
Insurance Charge Back
Insurance Revenue
Transferred Unapplied Ins. Amounts
Inventory
Lab Orders
Lists
Patient Demographics
Product Sales
Production
Select
Cancel

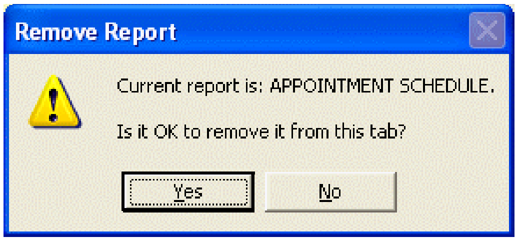
Lists dates, insurance carrier names, product names, CPT codes, amounts billed to insurance, amounts paid by insurance, and insurance write-offs.

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 542.
2. Click the **Daily**, **Weekly**, **Monthly**, **Yearly**, or **On Demand** tab.
3. Click **Remove**.

   The Remove Reports window opens.
4. Click **Yes**.


Remove Report
Yes
No

Current report is: APPOINTMENT SCHEDULE.

Is it OK to remove it from this tab?

The report is removed from the list of reports in the tab that you selected in step 2.

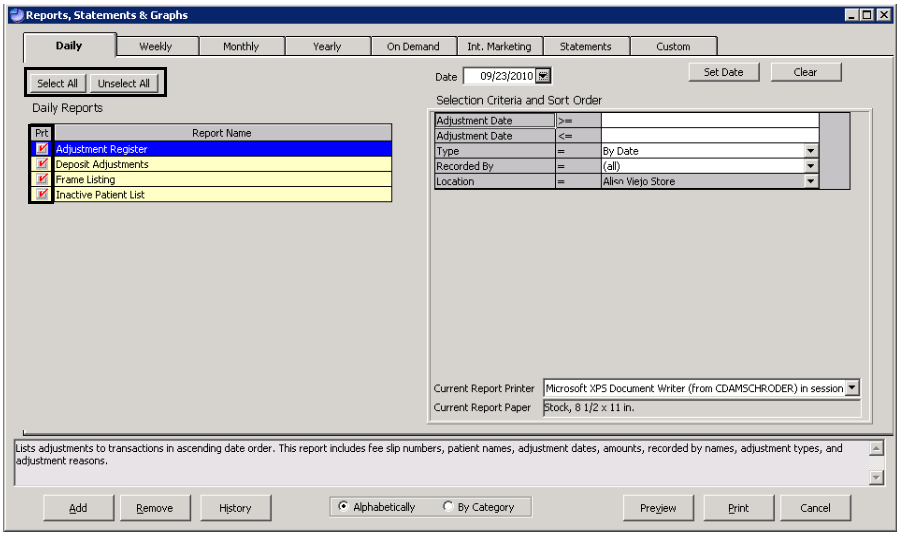
Creating & Printing Daily Reports

1. Open the Reports & Statements window. For more information on opening this window, go to Opening the Reports & Statements Window on page 542.

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 542.
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.



Date 09/23/2010

Daily Reports

Prt	Report Name
☑	Adjustment Register
☑	Deposit Adjustments
☑	Frame Listing
☑	Inactive Patient List

Selection Criteria and Sort Order

Adjustment Date	>=	
Adjustment Date	<=	
Type	=	By Date
Recorded By	=	(all)
Location	=	Alisn Viejo Store

Current Report Printer: Microsoft XPS Document Writer (from CDAMSCHRODER) in session

Current Report Paper: Stock, 8 1/2 x 11 in.

Lists adjustments to transactions in ascending date order. This report includes fee slip numbers, patient names, adjustment dates, amounts, recorded by names, adjustment types, and adjustment reasons.

● Alphabetically ○ By Category

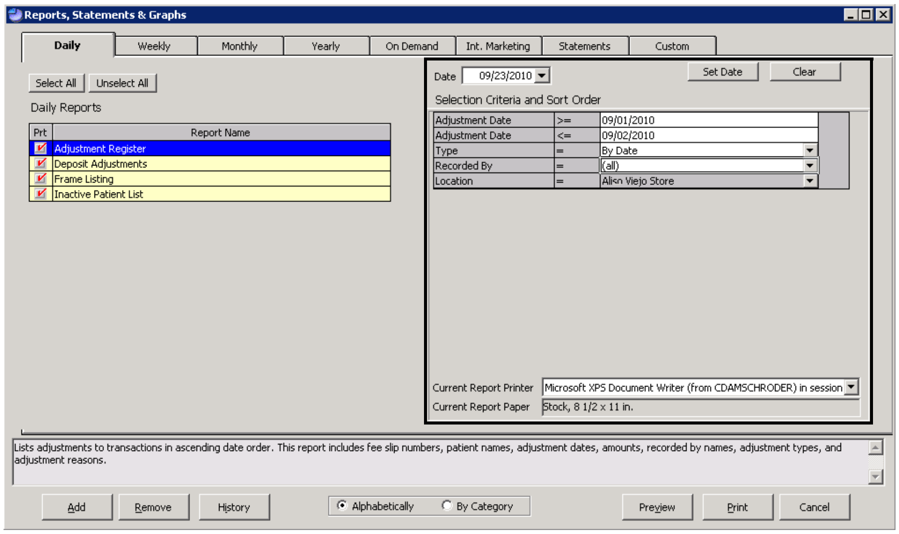
5. Type or select a date from the **Date** box and click **Set Date**.

   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 633.

7. Select a printer or fax program from the **Current Report Printer** drop-down menu.


Reports, Statements & Graphs
Daily
Weekly
Monthly
Yearly
On Demand
Int. Marketing
Statements
Custom
Select All
Unselect All
Set Date
Clear
Add
Remove
History
● Alphabetically
○ By Category
Preview
Print
Cancel

Daily Reports

Prt	Report Name
☑	Adjustment Register
☑	Deposit Adjustments
☑	Frame Listing
☑	Inactive Patient List

Date: 09/23/2010

Selection Criteria and Sort Order

Adjustment Date	>=	09/01/2010
Adjustment Date	<=	09/02/2010
Type	=	By Date
Recorded By	=	(all)
Location	=	Alisn Viejo Store

Current Report Printer: Microsoft XPS Document Writer (from CDAMSCHRODER) in session

Current Report Paper: Stock, 8 1/2 x 11 in.

Lists adjustments to transactions in ascending date order. This report includes fee slip numbers, patient names, adjustment dates, amounts, recorded by names, adjustment types, and adjustment reasons.

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 97-2003 Data Only (*.xls)** format from the **Save as type** drop-down menu.

   – Close the Preview Window.

10. Click **Print** to print or fax the report(s).

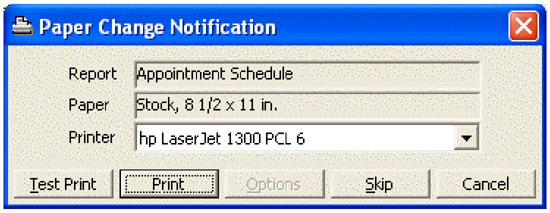
    The Print Reports window opens.

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.

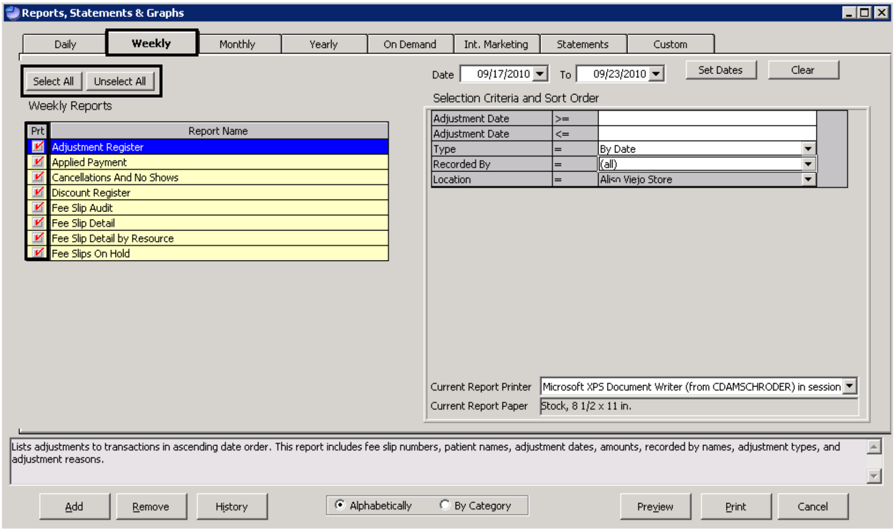

Paper Change Notification
Test Print
Print
Options
Skip
Cancel

Report: Appointment Schedule
Paper: Stock, 8 1/2 x 11 in.
Printer: hp LaserJet 1300 PCL 6

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 542.
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 542.
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.


Reports, Statements & Graphs
Daily
Weekly
Monthly
Yearly
On Demand
Int. Marketing
Statements
Custom
Select All
Unselect All
Set Dates
Clear
Add
Remove
History
● Alphabetically
○ By Category
Preview
Print
Cancel

Date 09/17/2010 To 09/23/2010

Weekly Reports

Prt	Report Name
☑	Adjustment Register
☑	Applied Payment
☑	Cancellations And No Shows
☑	Discount Register
☑	Fee Slip Audit
☑	Fee Slip Detail
☑	Fee Slip Detail by Resource
☑	Fee Slips On Hold

Selection Criteria and Sort Order

Adjustment Date	>=	
Adjustment Date	<=	
Type	=	By Date
Recorded By	=	(all)
Location	=	Alisn Viejo Store

Current Report Printer: Microsoft XPS Document Writer (from CDAMSCHRODER) in session
Current Report Paper: Stock, 8 1/2 x 11 in.

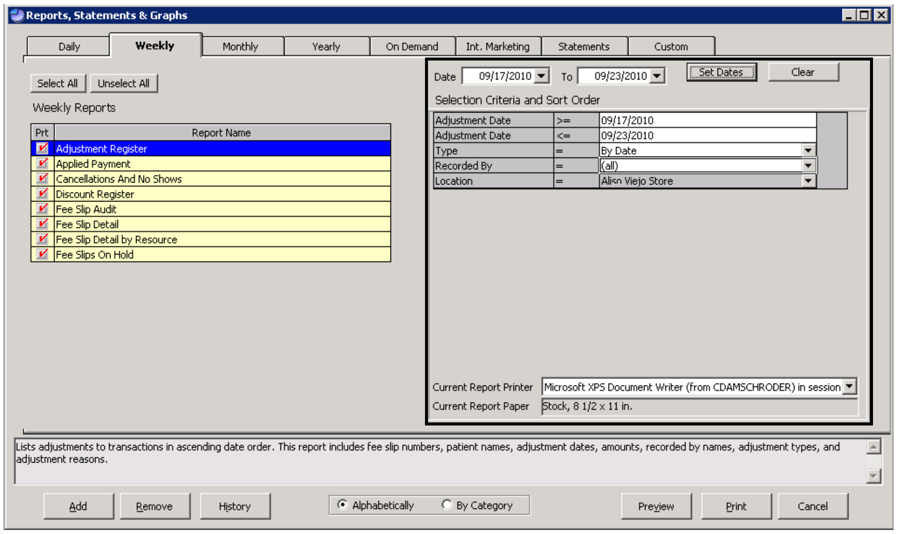
Lists adjustments to transactions in ascending date order. This report includes fee slip numbers, patient names, adjustment dates, amounts, recorded by names, adjustment types, and adjustment reasons.

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 633.
8. Select a printer or fax program from the **Current Report Printer** drop-down menu.



Date 09/17/2010 To 09/23/2010

Weekly Reports

Prt	Report Name
☑	Adjustment Register
☑	Applied Payment
☑	Cancellations And No Shows
☑	Discount Register
☑	Fee Slip Audit
☑	Fee Slip Detail
☑	Fee Slip Detail by Resource
☑	Fee Slips On Hold

Selection Criteria and Sort Order

Adjustment Date	>=	09/17/2010
Adjustment Date	<=	09/23/2010
Type	=	By Date
Recorded By	=	(all)
Location	=	Aliso Viejo Store

Current Report Printer: Microsoft XPS Document Writer (from CDAMSCHRODER) in session

Current Report Paper: Stock, 8 1/2 x 11 in.

Lists adjustments to transactions in ascending date order. This report includes fee slip numbers, patient names, adjustment dates, amounts, recorded by names, adjustment types, and adjustment reasons.

● Alphabetically ○ By Category

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 97-2003 Data Only (*.xls)** format from the **Save as type** drop-down menu.

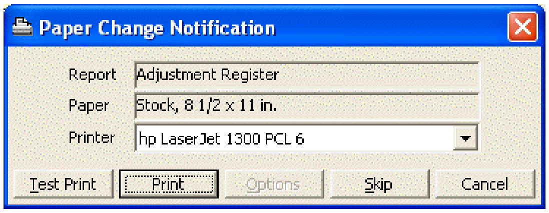
    - Close the Preview Window.
11. Click **Print** to print or fax the report(s).

    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.



Report: Adjustment Register
Paper: Stock, 8 1/2 x 11 in.
Printer: hp LaserJet 1300 PCL 6

Creating & Printing Monthly Reports

This section tells you how to create and print monthly reports, including how

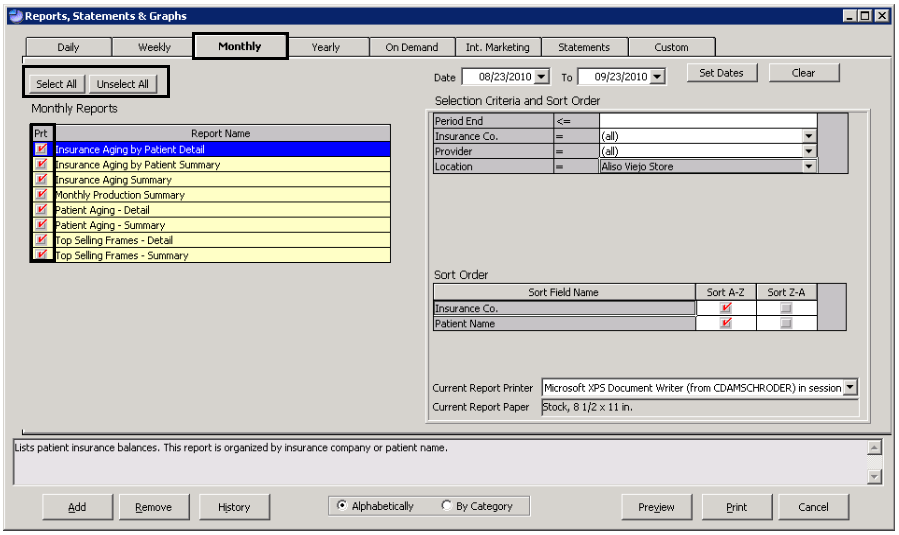
- To create & print monthly reports, 552
- To balance accounts receivable, 555

▶ 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 542.
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 542.
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.


Reports, Statements & Graphs
Daily
Weekly
Monthly
Yearly
On Demand
Int. Marketing
Statements
Custom
Select All
Unselect All
Set Dates
Clear
Add
Remove
History
Preview
Print
Cancel

Monthly Reports

Prt	Report Name
☑	Insurance Aging by Patient Detail
☑	Insurance Aging by Patient Summary
☑	Insurance Aging Summary
☑	Monthly Production Summary
☑	Patient Aging - Detail
☑	Patient Aging - Summary
☑	Top Selling Frames - Detail
☑	Top Selling Frames - Summary

Date 08/23/2010 To 09/23/2010

Selection Criteria and Sort Order

Period End	<=	
Insurance Co.	=	(all)
Provider	=	(all)
Location	=	Aliso Viejo Store

Sort Order

Sort Field Name	Sort A-Z	Sort Z-A
Insurance Co.	☑	☐
Patient Name	☑	☐

Current Report Printer: Microsoft XPS Document Writer (from CDAMSCHRODER) in session
Current Report Paper: Stock, 8 1/2 x 11 in.

Lists patient insurance balances. This report is organized by insurance company or patient name.

● Alphabetically ○ By Category

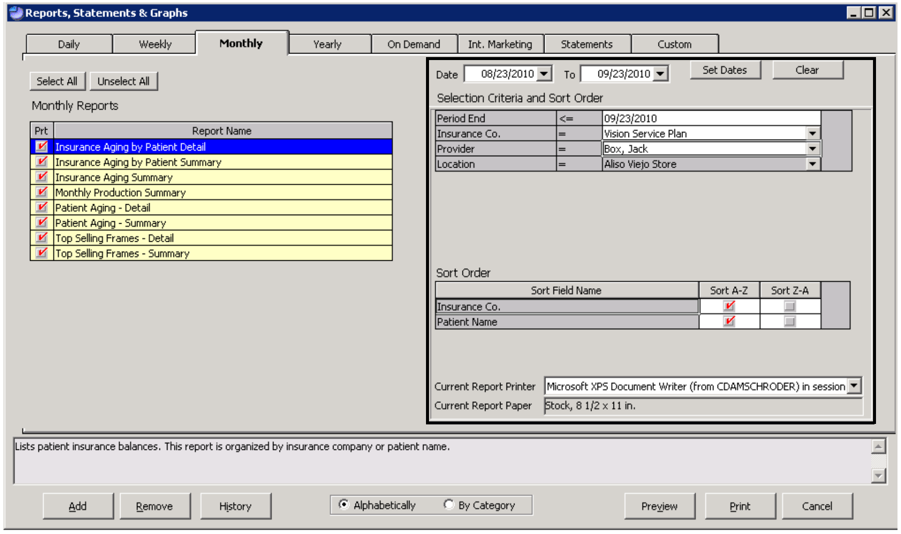
6. Type or select dates from the **Date** and **To** boxes and click **Set Dates**.

   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 633.

8. Select a printer or fax program from the **Current Report Printer** drop-down menu.



Monthly Reports

Prt	Report Name
☑	Insurance Aging by Patient Detail
☑	Insurance Aging by Patient Summary
☑	Insurance Aging Summary
☑	Monthly Production Summary
☑	Patient Aging - Detail
☑	Patient Aging - Summary
☑	Top Selling Frames - Detail
☑	Top Selling Frames - Summary

Date 08/23/2010 To 09/23/2010

Selection Criteria and Sort Order

Period End	<=	09/23/2010
Insurance Co.	=	Vision Service Plan
Provider	=	Box, Jack
Location	=	Aliso Viejo Store

Sort Order

Sort Field Name	Sort A-Z	Sort Z-A
Insurance Co.	☑	☐
Patient Name	☑	☐

Current Report Printer: Microsoft XPS Document Writer (from CDAMSCHRODER) in session
Current Report Paper: Stock, 8 1/2 x 11 in.

Lists patient insurance balances. This report is organized by insurance company or patient name.

● Alphabetically ○ By Category

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 97-2003 Data Only (*.xls)** format from the **Save as type** drop-down menu.

    – Close the Preview Window.

11. Click **Print** to print or fax the report(s).

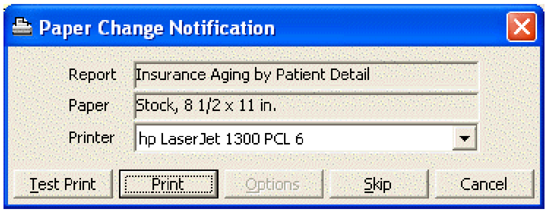
    The Print Reports window opens.

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.



Report: Insurance Aging by Patient Detail
Paper: Stock, 8 1/2 x 11 in.
Printer: hp LaserJet 1300 PCL 6

▶ To balance accounts receivable

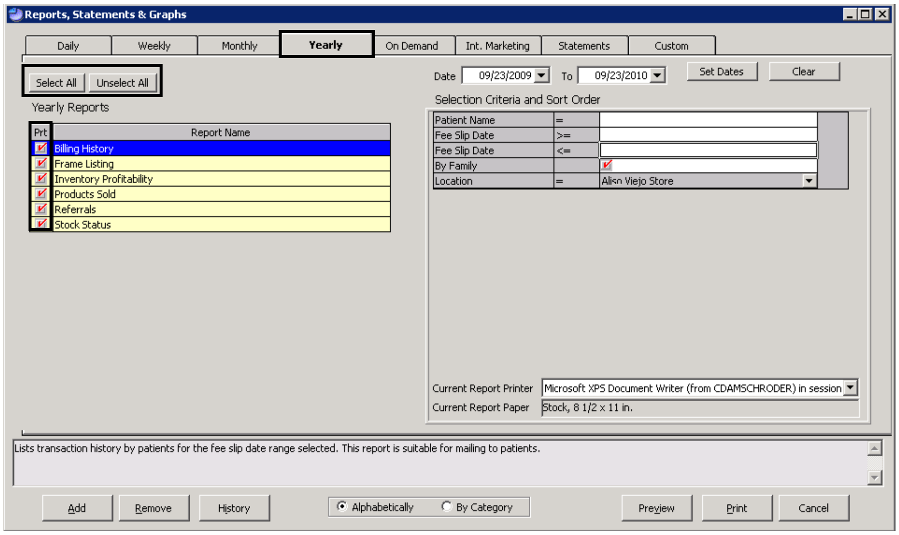
1. Establish a “Beginning Balance” amount using the following instructions:
    a. Create the Patient Aging Summary report for the prior period.
    b. Create the Insurance Aging Summary report for the prior period.
    c. Add the totals from the Patient Aging Summary report and the Insurance Aging Summary 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 542.
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 542.
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.


Reports, Statements & Graphs
Daily
Weekly
Monthly
Yearly
On Demand
Int. Marketing
Statements
Custom
Select All
Unselect All
Set Dates
Clear
Add
Remove
History
Preview
Print
Cancel

Yearly Reports

Prt	Report Name
☑	Billing History
☑	Frame Listing
☑	Inventory Profitability
☑	Products Sold
☑	Referrals
☑	Stock Status

Date 09/23/2009 To 09/23/2010

Selection Criteria and Sort Order

Patient Name	=	
Fee Slip Date	>=	
Fee Slip Date	<=	
By Family		☑
Location	=	Alisn Viejo Store

Current Report Printer Microsoft XPS Document Writer (from CDAMSCHRODER) in session

Current Report Paper Stock, 8 1/2 x 11 in.

Lists transaction history by patients for the fee slip date range selected. This report is suitable for mailing to patients.

● Alphabetically ○ By Category

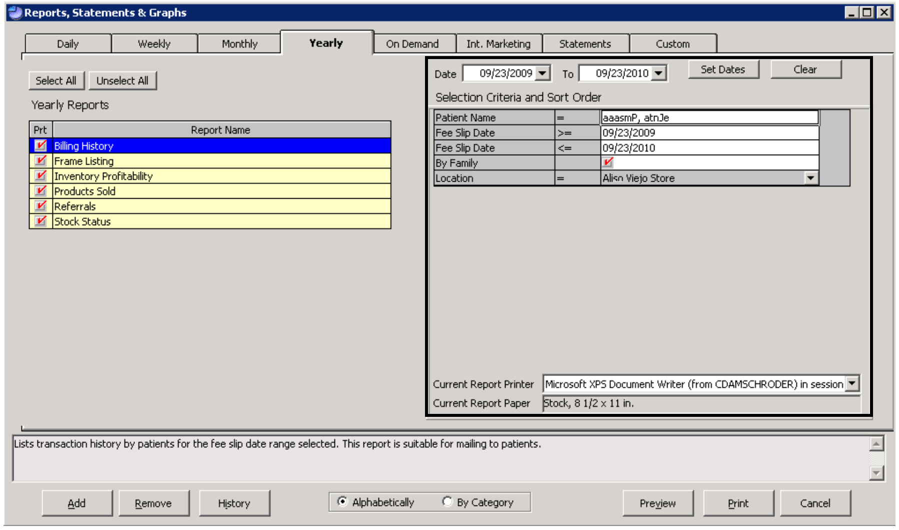
6. Type or select dates from the **Date** and **To** boxes and click **Set Date**.

   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 633.

8. Select a printer or fax program from the **Current Report Printer** drop-down menu.


Reports, Statements & Graphs
Daily
Weekly
Monthly
Yearly
On Demand
Int. Marketing
Statements
Custom
Select All
Unselect All
Set Dates
Clear
Add
Remove
History
Preview
Print
Cancel

Yearly Reports

Prt	Report Name
☑	Billing History
☑	Frame Listing
☑	Inventory Profitability
☑	Products Sold
☑	Referrals
☑	Stock Status

Date 09/23/2009 To 09/23/2010

Selection Criteria and Sort Order

Patient Name	=	aaasmP, atnJe
Fee Slip Date	>=	09/23/2009
Fee Slip Date	<=	09/23/2010
By Family		☑
Location	=	Alisn Viejo Store

Current Report Printer: Microsoft XPS Document Writer (from CDAMSCHRODER) in session

Current Report Paper: Stock, 8 1/2 x 11 in.

Lists transaction history by patients for the fee slip date range selected. This report is suitable for mailing to patients.

● Alphabetically ○ By Category

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).

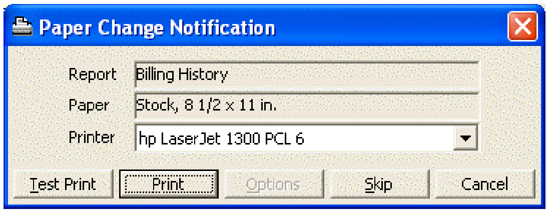
    The Print Reports window opens.

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.


Paper Change Notification
Test Print
Print
Options
Skip
Cancel

Report: Billing History

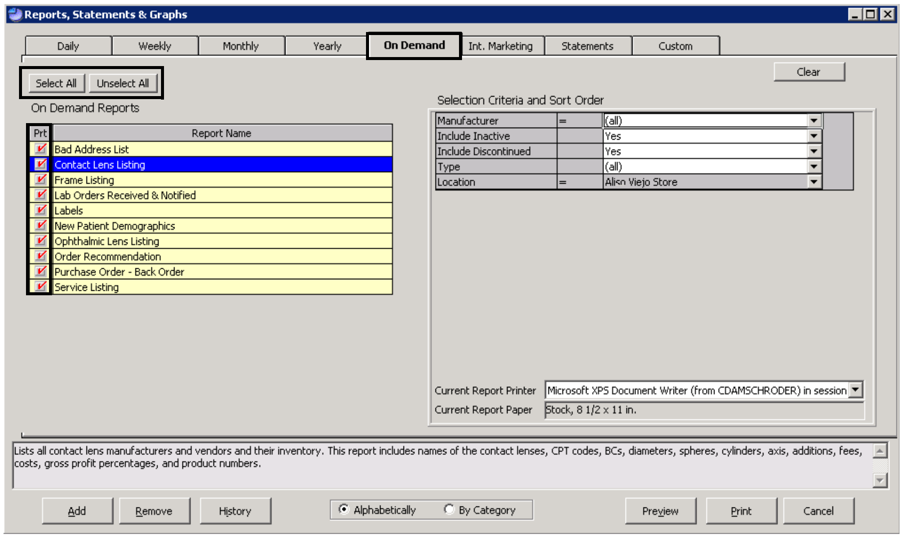
Paper: Stock, 8 1/2 x 11 in.

Printer: hp LaserJet 1300 PCL 6

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 542.
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 542.
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.



On Demand Reports

Prt	Report Name
☑	Bad Address List
☑	Contact Lens Listing
☑	Frame Listing
☑	Lab Orders Received & Notified
☑	Labels
☑	New Patient Demographics
☑	Ophthalmic Lens Listing
☑	Order Recommendation
☑	Purchase Order - Back Order
☑	Service Listing

Selection Criteria and Sort Order

Manufacturer	=	(all)
Include Inactive		Yes
Include Discontinued		Yes
Type		(all)
Location	=	Aliso Viejo Store

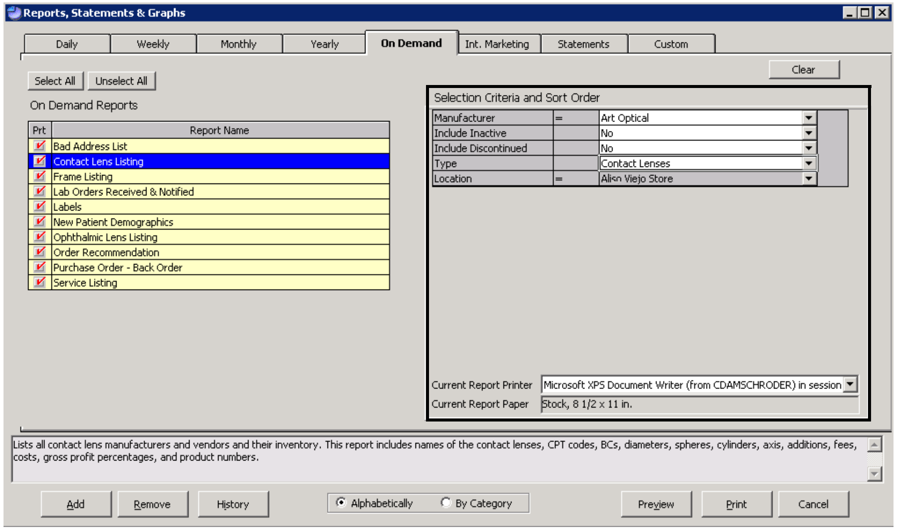
Current Report Printer: Microsoft XPS Document Writer (from CDAMSCHRODER) in session

Current Report Paper: Stock, 8 1/2 x 11 in.

Lists all contact lens manufacturers and vendors and their inventory. This report includes names of the contact lenses, CPT codes, BCs, diameters, spheres, cylinders, axis, additions, fees, costs, gross profit percentages, and product numbers.

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 633.

7. Select a printer or fax program from the **Current Report Printer** drop-down menu.



On Demand Reports

Prt	Report Name
☑	Bad Address List
☑	Contact Lens Listing
☑	Frame Listing
☑	Lab Orders Received & Notified
☑	Labels
☑	New Patient Demographics
☑	Ophthalmic Lens Listing
☑	Order Recommendation
☑	Purchase Order - Back Order
☑	Service Listing

Selection Criteria and Sort Order

Manufacturer	=	Art Optical
Include Inactive		No
Include Discontinued		No
Type		Contact Lenses
Location	=	Alisо Viejo Store

Current Report Printer: Microsoft XPS Document Writer (from CDAMSCHRODER) in session
Current Report Paper: Stock, 8 1/2 x 11 in.

Lists all contact lens manufacturers and vendors and their inventory. This report includes names of the contact lenses, CPT codes, BCs, diameters, spheres, cylinders, axis, additions, fees, costs, gross profit percentages, and product numbers.

● Alphabetically ○ By Category

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 97-2003 Data Only (*.xls)** format from the **Save as type** drop-down menu.

   - Close the Preview Window.

10. Click **Print** to print or fax the report(s).

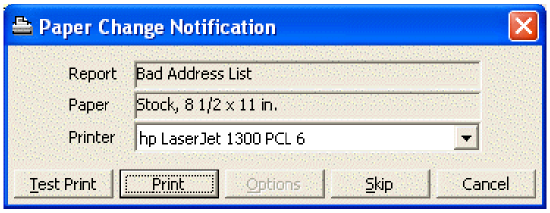
    The Print Reports window opens.

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.


Paper Change Notification
Test Print
Print
Options
Skip
Cancel

Report: Bad Address List
Paper: Stock, 8 1/2 x 11 in.
Printer: hp LaserJet 1300 PCL 6

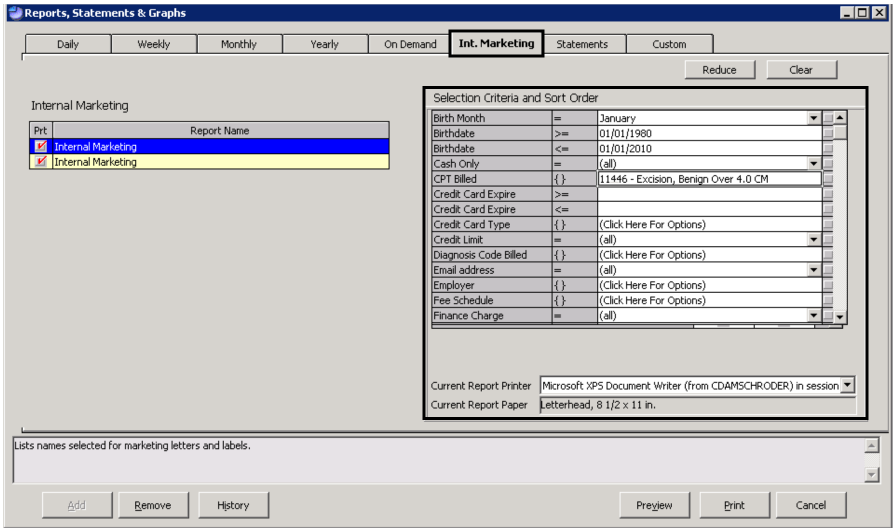
Creating & Printing Internal Marketing Reports

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 542.
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 668.

   NOTE Click **Expand** to expand the Selection Criteria and view the entire list.


Reports, Statements & Graphs
Daily
Weekly
Monthly
Yearly
On Demand
Int. Marketing
Statements
Custom
Reduce
Clear
Add
Remove
History
Preview
Print
Cancel

Internal Marketing

Prt	Report Name
☑	Internal Marketing
☑	Internal Marketing

Selection Criteria and Sort Order

Birth Month	=	January
Birthdate	>=	01/01/1980
Birthdate	<=	01/01/2010
Cash Only	=	(all)
CPT Billed	{ }	11446 - Excision, Benign Over 4.0 CM
Credit Card Expire	>=	
Credit Card Expire	<=	
Credit Card Type	{ }	(Click Here For Options)
Credit Limit	=	(all)
Diagnosis Code Billed	{ }	(Click Here For Options)
Email address	=	(all)
Employer	{ }	(Click Here For Options)
Fee Schedule	{ }	(Click Here For Options)
Finance Charge	=	(all)

Current Report Printer: Microsoft XPS Document Writer (from CDAMSCHRODER) in session
Current Report Paper: Letterhead, 8 1/2 x 11 in.

Lists names selected for marketing letters and labels.

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 97-2003 Data Only (*.xls)** format from the **Save as type** drop-down menu.

   - Close the Preview Window.

7. Click **Print** to print or fax the report.

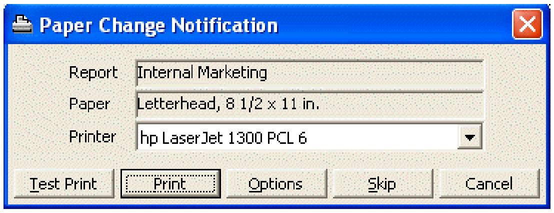
   The Print Reports window opens.

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.



Report: Internal Marketing
Paper: Letterhead, 8 1/2 x 11 in.
Printer: hp LaserJet 1300 PCL 6

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, 562
- To calculate finance charges, 566

For information on creating statements, watch the "Statements" video.

▶ To create & print Statements

NOTES	
NOTES	• To define and change your Statements report preferences, go to To set up statement preferences on page 73. • 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 542.
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 73.

   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.

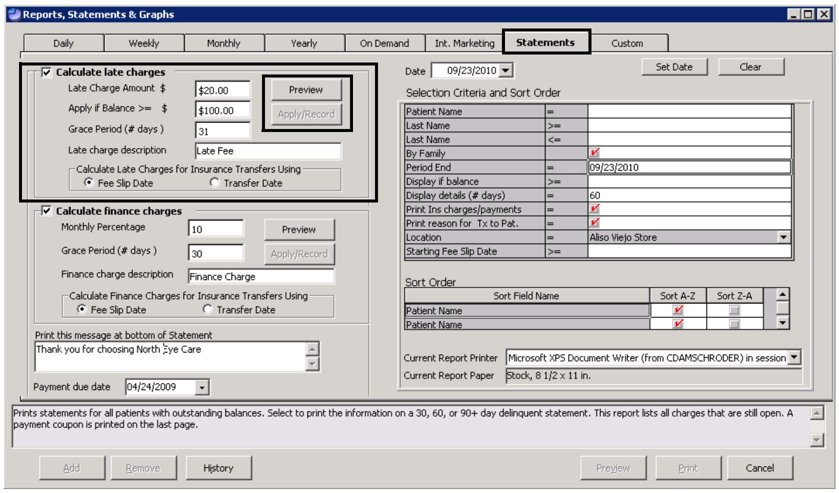
e. Type the number of grace period days in the **Grace Period (# days)** text box.

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.



☑ Calculate late charges
Late Charge Amount $: $20.00
Apply if Balance >= $: $100.00
Grace Period (# days): 31
Late charge description: Late Fee
Calculate Late Charges for Insurance Transfers Using: ● Fee Slip Date ○ Transfer Date

☑ Calculate finance charges
Monthly Percentage: 10
Grace Period (# days): 30
Finance charge description: Finance Charge
Calculate Finance Charges for Insurance Transfers Using: ● Fee Slip Date ○ Transfer Date

Print this message at bottom of Statement: Thank you for choosing North Eye Care
Payment due date: 04/24/2009

Date: 09/23/2010

Selection Criteria and Sort Order

Patient Name	=	
Last Name	>=	
Last Name	<=	
By Family		☑
Period End	=	09/23/2010
Display if balance	>=	
Display details (# days)	=	60
Print Ins charges/payments	=	☑
Print reason for Tx to Pat.	=	☑
Location	=	Aliso Viejo Store
Starting Fee Slip Date	>=	

Sort Order

Sort Field Name	Sort A-Z	Sort Z-A
Patient Name	☑	☐
Patient Name	☑	☐

Current Report Printer: Microsoft XPS Document Writer (from CDAMSCHRODER) in session
Current Report Paper: Stock, 8 1/2 x 11 in.

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.

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 73.

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.

c. Type the monthly finance charge percentage in the **Monthly Percentage** text box.

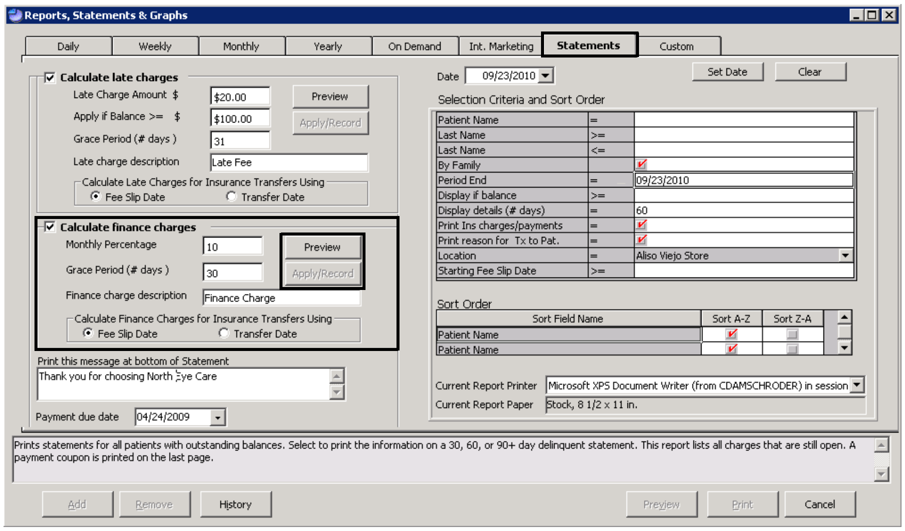
d. Type the number of grace period days in the **Grace Period (# days)** text box.

e. Type the finance charge description in the **Finance charge description** text box.

f. 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.

g. Click **Preview** to view, print, and export the Finance Charge List.

h. Click **Apply/Record** to record the finance charges on the Patient Ledger window.



☑ **Calculate late charges**

Late Charge Amount $ $20.00
Apply if Balance >= $ $100.00
Grace Period (# days) 31
Late charge description Late Fee
Calculate Late Charges for Insurance Transfers Using
● Fee Slip Date ○ Transfer Date

☑ **Calculate finance charges**

Monthly Percentage 10
Grace Period (# days) 30
Finance charge description Finance Charge
Calculate Finance Charges for Insurance Transfers Using
● Fee Slip Date ○ Transfer Date

Print this message at bottom of Statement
Thank you for choosing North Eye Care

Payment due date 04/24/2009

Date 09/23/2010

Selection Criteria and Sort Order

Patient Name	=	
Last Name	>=	
Last Name	<=	
By Family		☑
Period End	=	09/23/2010
Display if balance	>=	
Display details (# days)	=	60
Print Ins charges/payments	=	☑
Print reason for Tx to Pat.	=	☑
Location	=	Aliso Viejo Store
Starting Fee Slip Date	>=	

Sort Order

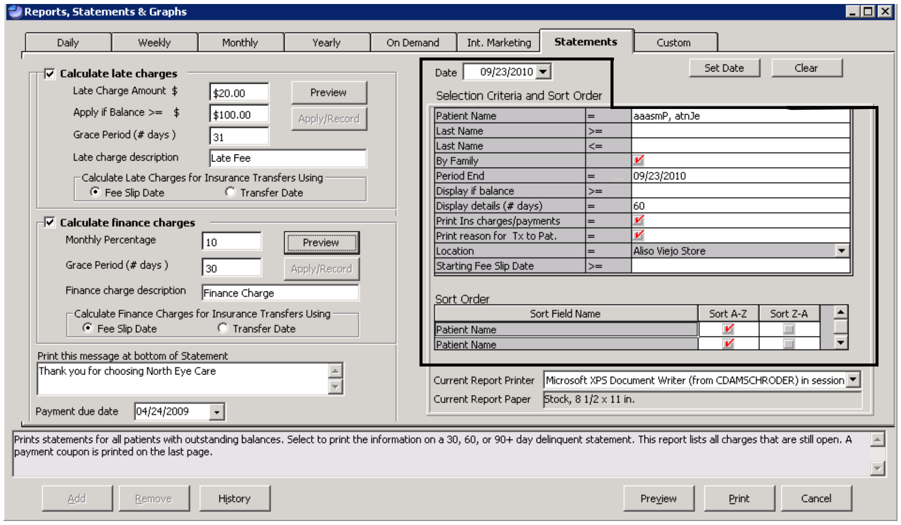
Sort Field Name	Sort A-Z	Sort Z-A
Patient Name	☑	☐
Patient Name	☑	☐

Current Report Printer Microsoft XPS Document Writer (from CDAMSCHRODER) in session
Current Report Paper Stock, 8 1/2 x 11 in.

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.

6. 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.
7. 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 709.



☑ **Calculate late charges**
Late Charge Amount $ $20.00
Apply if Balance >= $ $100.00
Grace Period (# days) 31
Late charge description Late Fee
Calculate Late Charges for Insurance Transfers Using ● Fee Slip Date ○ Transfer Date

☑ **Calculate finance charges**
Monthly Percentage 10
Grace Period (# days) 30
Finance charge description Finance Charge
Calculate Finance Charges for Insurance Transfers Using ● Fee Slip Date ○ Transfer Date

Print this message at bottom of Statement
Thank you for choosing North Eye Care
Payment due date 04/24/2009

Date 09/23/2010

Selection Criteria and Sort Order

Patient Name	=	aaasmP, atnJe
Last Name	>=	
Last Name	<=	
By Family		✓
Period End	=	09/23/2010
Display if balance	>=	
Display details (# days)	=	60
Print Ins charges/payments	=	✓
Print reason for Tx to Pat.	=	✓
Location	=	Aliso Viejo Store
Starting Fee Slip Date	>=	

Sort Order

Sort Field Name	Sort A-Z	Sort Z-A
Patient Name	✓	☐
Patient Name	✓	☐

Current Report Printer Microsoft XPS Document Writer (from CDAMSCHRODER) in session
Current Report Paper Stock, 8 1/2 x 11 in.

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.

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 97-2003 Data Only (*.xls)** format from the **Save as type** drop-down menu.

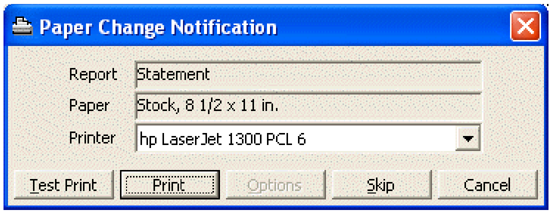
    - Close the Preview Window.

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.



Report: Statement
Paper: Stock, 8 1/2 x 11 in.
Printer: hp LaserJet 1300 PCL 6

▶ 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.

   = (Percentage entered) * (# of Days Past Due - Grace Period - 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.

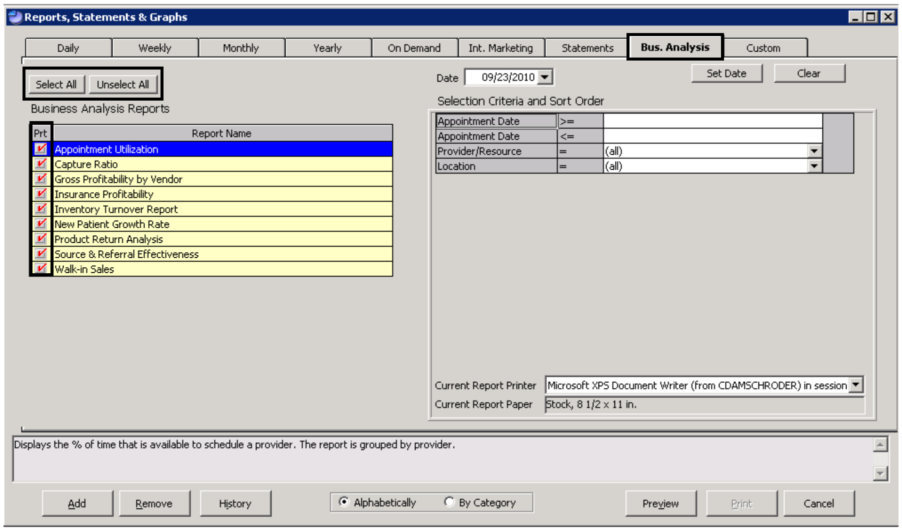
If the finance charge was already calculated on the past due item, subtract the number of days between the date the finance charge was last calculated and the current date.

Creating & Printing Business Analysis Reports

For information on creating business analysis reports, watch the "Business Analysis Reports" video.

1. Open the Reports & Statements window. For more information on opening this window, go to Opening the Reports & Statements Window on page 542.
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 542.
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.



Business Analysis Reports

Prt	Report Name
☑	Appointment Utilization
☑	Capture Ratio
☑	Gross Profitability by Vendor
☑	Insurance Profitability
☑	Inventory Turnover Report
☑	New Patient Growth Rate
☑	Product Return Analysis
☑	Source & Referral Effectiveness
☑	Walk-in Sales

Date 09/23/2010

Selection Criteria and Sort Order

Appointment Date	>=	
Appointment Date	<=	
Provider/Resource	=	(all)
Location	=	(all)

Current Report Printer Microsoft XPS Document Writer (from CDAMSCHRODER) in session
Current Report Paper Stock, 8 1/2 x 11 in.

Displays the % of time that is available to schedule a provider. The report is grouped by provider.

● Alphabetically ○ By Category

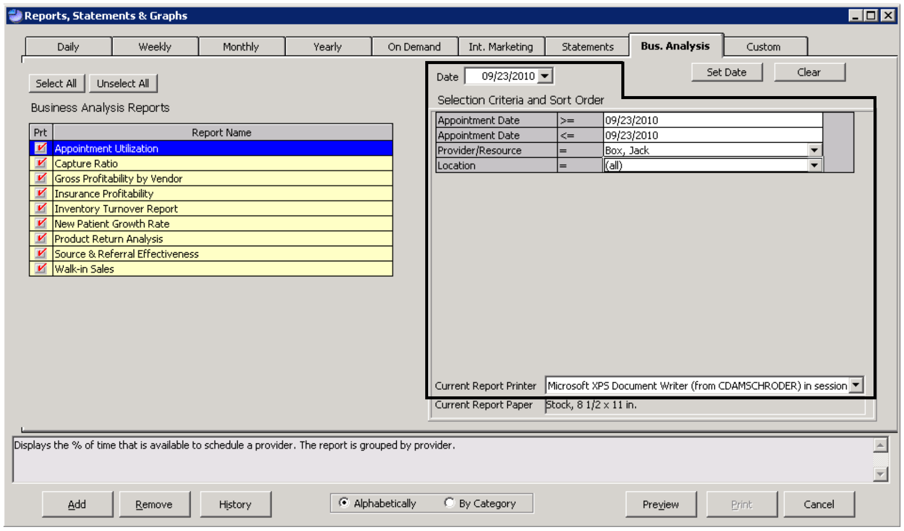
6. Type or select dates from the **Date** box and click **Set Date**.

   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 633.

8. Select a printer or fax program from the **Current Report Printer** drop-down menu.


Reports, Statements & Graphs
Daily
Weekly
Monthly
Yearly
On Demand
Int. Marketing
Statements
Bus. Analysis
Custom
Select All
Unselect All
Set Date
Clear
Add
Remove
History
Preview
Print
Cancel

Business Analysis Reports

Prt	Report Name
☑	Appointment Utilization
☑	Capture Ratio
☑	Gross Profitability by Vendor
☑	Insurance Profitability
☑	Inventory Turnover Report
☑	New Patient Growth Rate
☑	Product Return Analysis
☑	Source & Referral Effectiveness
☑	Walk-in Sales

Date 09/23/2010

Selection Criteria and Sort Order

Appointment Date	>=	09/23/2010
Appointment Date	<=	09/23/2010
Provider/Resource	=	Box, Jack
Location	=	(all)

Current Report Printer: Microsoft XPS Document Writer (from CDAMSCHRODER) in session

Current Report Paper: Stock, 8 1/2 x 11 in.

Displays the % of time that is available to schedule a provider. The report is grouped by provider.

● Alphabetically ○ By Category

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

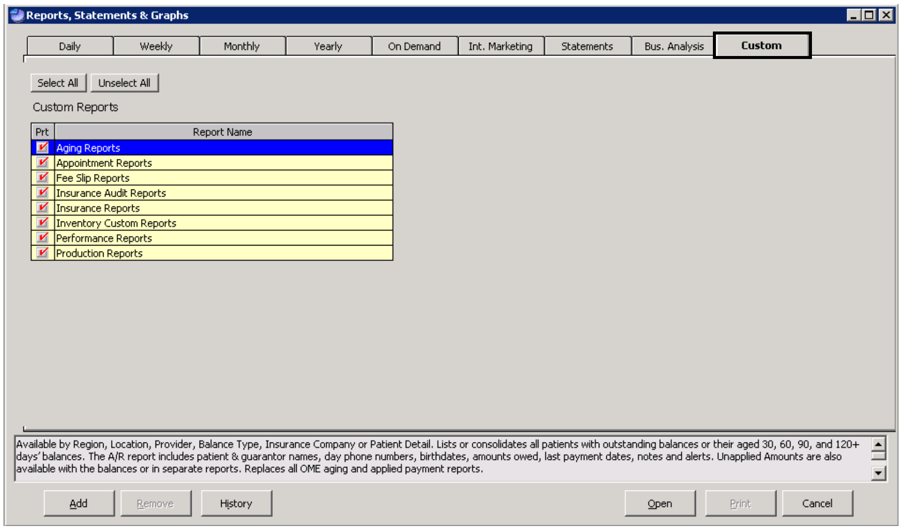
The custom reports give you the ability to create more dynamic and flexible reports than the traditional reports allow. This section tells you how to create reports, save and load report settings, print reports, and export reports, including how

- To open the Custom Reports window, 569
- To save custom report settings, 570
- To load saved custom report settings, 572
- To modify or delete saved custom report settings, 572
- To find information about reports by name, 573
- To create and print custom aging reports, 574
- To create and print custom appointment reports, 580
- To create and print custom fee slip reports, 587
- To create and print custom insurance audit reports, 594
- To create and print custom insurance reports, 600
- To create and print custom inventory reports, 606
- To create and print custom performance reports, 613
- To create and print custom production reports, 619
- To use the Report Viewer window, 627

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 542.
2. Click the **Custom** tab.



Custom Reports

Prt	Report Name
☑	Aging Reports
☑	Appointment Reports
☑	Fee Slip Reports
☑	Insurance Audit Reports
☑	Insurance Reports
☑	Inventory Custom Reports
☑	Performance Reports
☑	Production Reports

Available by Region, Location, Provider, Balance Type, Insurance Company or Patient Detail. Lists or consolidates all patients with outstanding balances or their aged 30, 60, 90, and 120+ days' balances. The A/R report includes patient & guarantor names, day phone numbers, birthdates, amounts owed, last payment dates, notes and alerts. Unapplied Amounts are also available with the balances or in separate reports. Replaces all OME aging and applied payment reports.

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 542.
4. Select a report from the Report Name list.
5. Click **Open**.

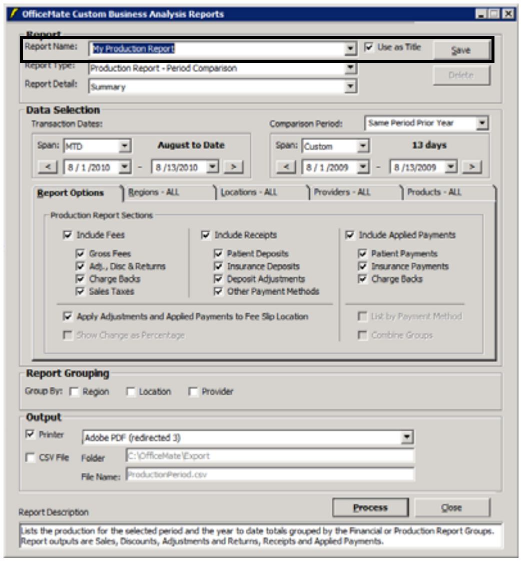
   The Custom Reports window opens.

6. To open previously saved report settings, go to To load saved custom report settings on page 572.
7. Continue by proceeding to the applicable section:
   - To create and print custom aging reports, 574
   - To create and print custom appointment reports, 580
   - To create and print custom fee slip reports, 587
   - To create and print custom insurance audit reports, 594
   - To create and print custom insurance reports, 600
   - To create and print custom inventory reports, 606
   - To create and print custom performance reports, 613
   - To create and print custom production reports, 619

▶ 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 569.
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, 574
   - To create and print custom appointment reports, 580
   - To create and print custom fee slip reports, 587
   - To create and print custom insurance audit reports, 594
   - To create and print custom insurance reports, 600
   - To create and print custom inventory reports, 606
   - To create and print custom performance reports, 613
   - To create and print custom production reports, 619
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.


OfficeMate Custom Business Analysis Reports
Report
Save
Delete
Data Selection
Transaction Dates:
Report Options
Regions - ALL
Locations - ALL
Providers - ALL
Products - ALL
Production Report Sections
Report Grouping
Output
Process
Close

Report Name: My Production Report
☑ Use as Title
Report Type: Production Report - Period Comparison
Report Detail: Summary
Span: MTD August to Date
8 / 1 /2010 - 8 /13/2010
Comparison Period: Same Period Prior Year
Span: Custom 13 days
8 / 1 /2009 - 8 /13/2009

☑ 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

Group By: ☐ Region ☐ Location ☐ Provider

☑ Printer: Adobe PDF (redirected 3)
☐ CSV File Folder: C:\OfficeMate\Export
File Name: ProductionPeriod.csv

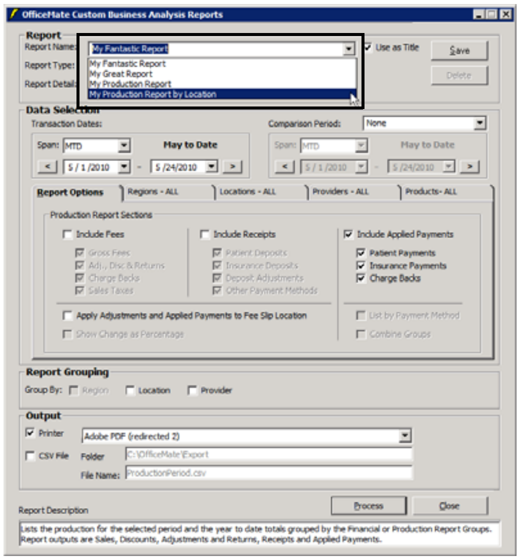
Report Description
Lists the production for the selected period and the year to date totals grouped by the Financial or Production Report Groups. Report outputs are Sales, Discounts, Adjustments and Returns, Receipts and Applied Payments.

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 569.
2. Select a report from the **Report Name** drop-down menu.


OfficeMate Custom Business Analysis Reports
Report
Report Name:
Report Type:
Report Detail:
Save
Delete
Data Selection
Transaction Dates:
Comparison Period:
Report Options
Regions - ALL
Locations - ALL
Providers - ALL
Products- ALL
Production Report Sections
Report Grouping
Group By:
Output
Folder
File Name:
Report Description
Process
Close

Report Name: My Fantastic Report
My Fantastic Report
My Great Report
My Production Report
My Production Report by Location

☑ Use as Title

Span: MTD May to Date 5 / 1 /2010 - 5 /24/2010

Comparison Period: None

Span: MTD May to Date 5 / 1 /2010 - 5 /24/2010

☐ 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

Group By: ☐ Region ☐ Location ☐ Provider

☑ Printer Adobe PDF (redirected 2)
☐ CSV File Folder C:\OfficeMate\Export
File Name: ProductionPeriod.csv

Lists the production for the selected period and the year to date totals grouped by the Financial or Production Report Groups. Report outputs are Sales, Discounts, Adjustments and Returns, Receipts and Applied Payments.

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, 574
   - To create and print custom appointment reports, 580
   - To create and print custom fee slip reports, 587
   - To create and print custom insurance audit reports, 594
   - To create and print custom insurance reports, 600
   - To create and print custom inventory reports, 606
   - To create and print custom performance reports, 613
   - To create and print custom production reports, 619

NOTE For information about saving report settings for future use, go to To save custom report settings on page 570.

▶ 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 569.
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 574
Aged A/R 30-60-90-120+	To create and print custom aging reports on page 574
Applied Insurance Payment	To create and print custom insurance reports on page 600
Appointments Scheduled with Insurance	To create and print custom appointment reports on page 580
Fee Slip Adjustment and Payment	To create and print custom fee slip reports on page 587
Fee Slip Listing	To create and print custom fee slip reports on page 587
Frame Stock Status	To create and print custom inventory reports on page 606
Insurance Deposit Audit	To create and print custom insurance audit reports on page 594
Insurance Sales Analysis	To create and print custom insurance reports on page 600
Inventory Valuation	To create and print custom inventory reports on page 606
Location Inventory	To create and print custom inventory reports on page 606
Monthly Production Recap	To create and print custom production reports on page 619
Order Recommendation	To create and print custom inventory reports on page 606
Performance - Net Fees	To create and print custom performance reports on page 613
Performance - Net Quantities	To create and print custom performance reports on page 613

For information about this report...	Go to...
Production - Location Comparison	To create and print custom production reports on page 619
Production - Period Comparison	To create and print custom production reports on page 619
Production - Provider Comparison	To create and print custom production reports on page 619
Production - Year-to-Year Comparison	To create and print custom production reports on page 619
Productivity Recap	To create and print custom production reports on page 619
Stock Status	To create and print custom inventory reports on page 606

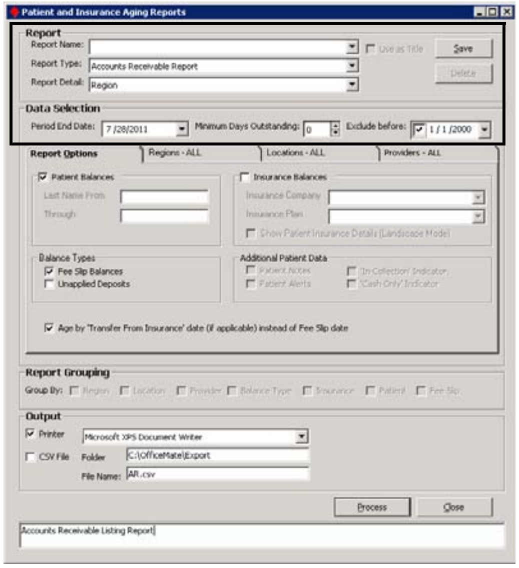
▶ To create and print custom aging reports

1. Open the Reports & Statements window. For more information on opening this window, go to Opening the Reports & Statements Window on page 542.
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 572, 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.



Patient and Insurance Aging Reports

Report

Report Name:

Report Type: Accounts Receivable Report

Report Detail: Region

☐ Use as Title

Data Selection

Period End Date: 7 /28/2011

Minimum Days Outstanding: 0

Exclude before: ☑ 1 / 1 /2000

Report Options

☑ Patient Balances

Last Name From

Through

☐ Insurance Balances

Insurance Company

Insurance Plan

☐ 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: Microsoft XPS Document Writer

☐ CSV File Folder: C:\OfficeMate\Export

File Name: AR.csv

Accounts Receivable Listing Report

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.

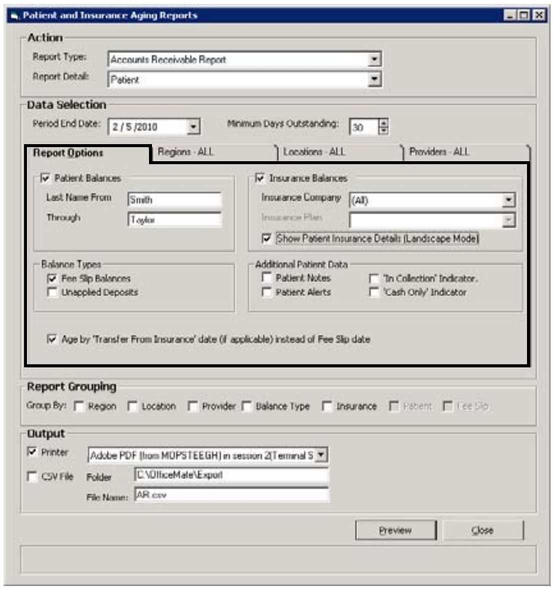
    d. Select the **Fee Slip Balances** check box to display balances due from fee slip charges.

    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.

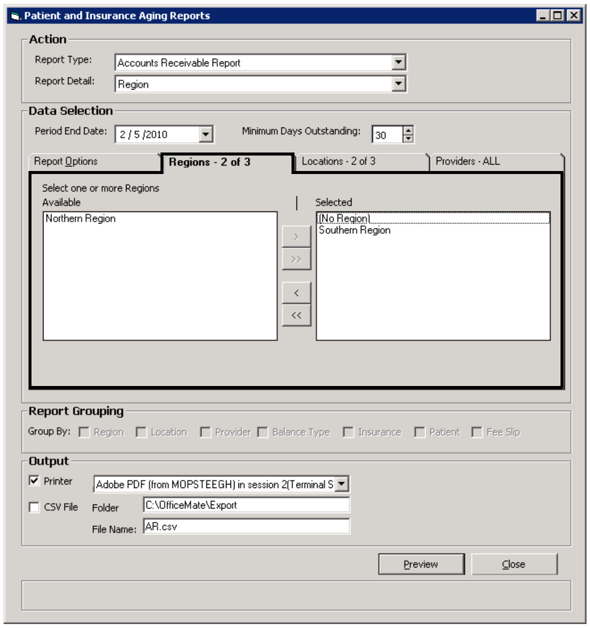

Patient and Insurance Aging Reports
Action
Data Selection
Report Options
Regions - ALL
Locations - ALL
Providers - ALL
Report Grouping
Output
Preview
Close

Report Type: Accounts Receivable Report
Report Detail: Patient
Period End Date: 2 / 5 /2010
Minimum Days Outstanding: 30
☑ Patient Balances
Last Name From: Smith
Through: Taylor
☑ Insurance Balances
Insurance Company: (All)
Insurance Plan:
☑ 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
Group By: ☐ Region ☐ Location ☐ Provider ☐ Balance Type ☐ Insurance ☐ Patient ☐ Fee Slip
☑ Printer: Adobe PDF (from MOPSTEEGH) in session 2(Terminal S
☐ CSV File
Folder: C:\OfficeMate\Export
File Name: AR.csv

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.



Patient and Insurance Aging Reports

Action
Report Type: Accounts Receivable Report
Report Detail: Region

Data Selection
Period End Date: 2 / 5 /2010
Minimum Days Outstanding: 30

Report Options | **Regions - 2 of 3** | Locations - 2 of 3 | Providers - ALL

Select one or more Regions
Available: Northern Region
Selected: (No Region), Southern Region

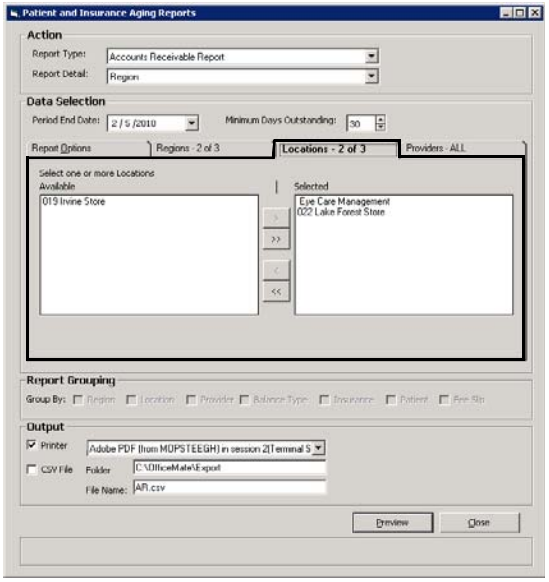
Report Grouping
Group By: ☐ Region ☐ Location ☐ Provider ☐ Balance Type ☐ Insurance ☐ Patient ☐ Fee Slip

Output
☑ Printer: Adobe PDF (from MOPSTEEGH) in session 2(Terminal S
☐ CSV File
Folder: C:\OfficeMate\Export
File Name: AR.csv

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.

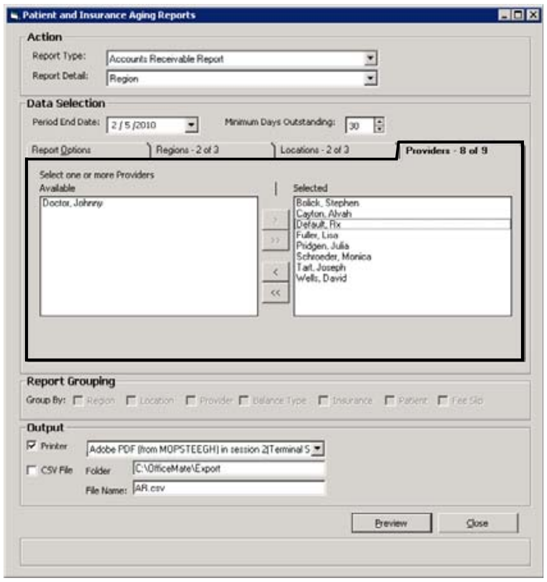

Patient and Insurance Aging Reports
Action
Data Selection
Report Options
Regions - 2 of 3
Locations - 2 of 3
Providers - ALL
Select one or more Locations
>
>>
<
<<
Report Grouping
Group By: ☐ Region ☐ Location ☐ Provider ☐ Balance Type ☐ Insurance ☐ Patient ☐ Fee Slip
Output
Preview
Close

Report Type: Accounts Receivable Report
Report Detail: Region
Period End Date: 2 / 5 /2010
Minimum Days Outstanding: 30
Available: 019 Irvine Store
Selected: Eye Care Management, 022 Lake Forest Store
☑ Printer: Adobe PDF (from MOPSTEEGH) in session 2(Terminal S
☐ CSV File Folder: C:\OfficeMate\Export
File Name: AR.csv

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.


Patient and Insurance Aging Reports

Action
Report Type: Accounts Receivable Report
Report Detail: Region

Data Selection
Period End Date: 2 / 5 /2010
Minimum Days Outstanding: 30

Report Options | Regions - 2 of 3 | Locations - 2 of 3 | Providers - 8 of 9

Select one or more Providers

Available	Selected
Doctor, Johnny	Bolick, Stephen Cayton, Alvah Default, Rx Fuller, Lisa Pridgen, Julia Schroeder, Monica Tart, Joseph Wells, David

Report Grouping
Group By: ☐ Region ☐ Location ☐ Provider ☐ Balance Type ☐ Insurance ☐ Patient ☐ Fee Slip

Output
☑ Printer: Adobe PDF (from MOPSTEEGH) in session 2(Terminal S
☐ CSV File Folder: C:\OfficeMate\Export
File Name: AR.csv

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 570.
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 627.

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

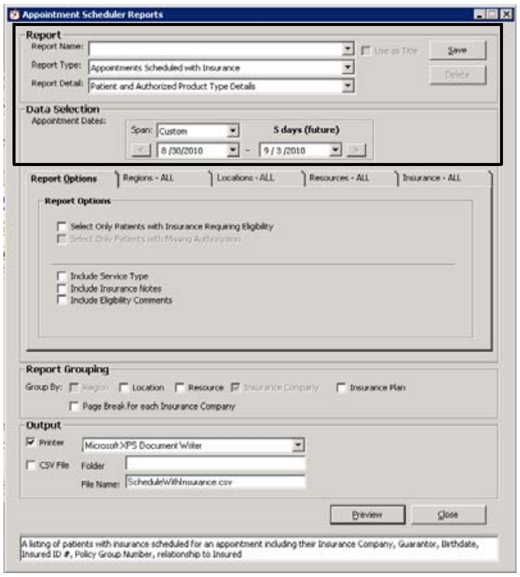
1. Open the Reports & Statements window. For more information on opening this window, go to Opening the Reports & Statements Window on page 542.
2. Click the **Custom** tab.
3. Select **Appointment Reports** from the Report Name list.
4. Click **Open**.

   The Appointment Scheduler Reports window opens.
5. To open previously saved report settings, go to To load saved custom report settings on page 572, 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

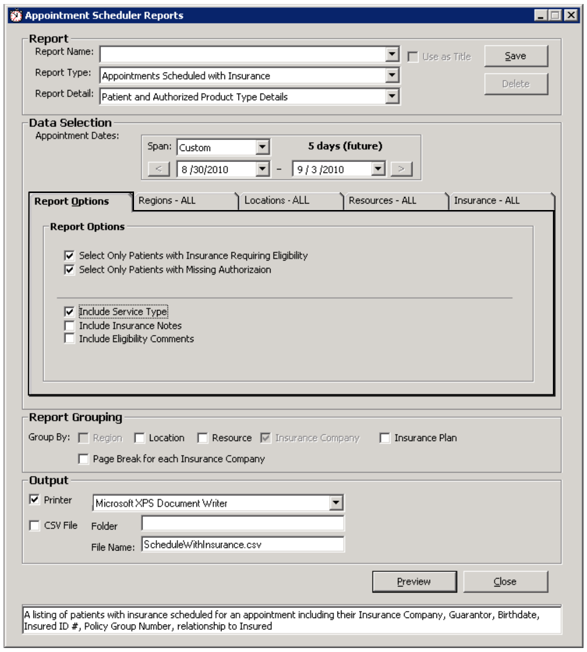
   - Enter beginning and ending dates in the date range fields.



Report Name:
Report Type: Appointments Scheduled with Insurance
Report Detail: Patient and Authorized Product Type Details
Span: Custom
5 days (future)
8 /30/2010 - 9 / 3 /2010
☐ Select Only Patients with Insurance Requiring Eligibility
☐ Select Only Patients with Missing Authorization
☐ Include Service Type
☐ Include Insurance Notes
☐ Include Eligibility Comments
Group By: ☐ Region ☐ Location ☐ Resource ☑ Insurance Company ☐ Insurance Plan
☐ Page Break for each Insurance Company
☑ Printer: Microsoft XPS Document Writer
☐ 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

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 160.
   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 217.
   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 217.
   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 217.


Appointment Scheduler Reports
Report
Save
Delete
Data Selection
<
>
Report Options
Regions - ALL
Locations - ALL
Resources - ALL
Insurance - ALL
Report Grouping
Output
Preview
Close

Report Name:
☐ Use as Title
Report Type: Appointments Scheduled with Insurance
Report Detail: Patient and Authorized Product Type Details

Appointment Dates:
Span: Custom
5 days (future)
8 /30/2010 – 9 / 3 /2010

Report Options
☑ Select Only Patients with Insurance Requiring Eligibility
☑ Select Only Patients with Missing Authorizaion
☑ Include Service Type
☐ Include Insurance Notes
☐ Include Eligibility Comments

Group By: ☐ Region ☐ Location ☐ Resource ☑ Insurance Company ☐ Insurance Plan
☐ Page Break for each Insurance Company

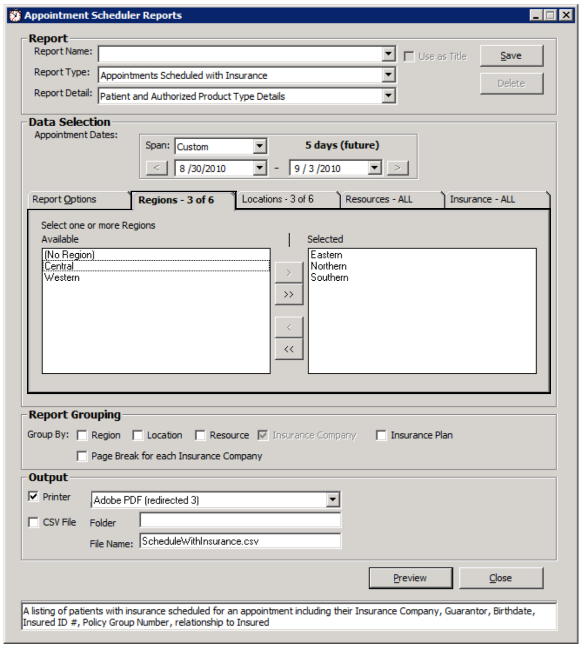
☑ Printer: Microsoft XPS Document Writer
☐ CSV File Folder:
File Name: ScheduleWithInsurance.csv

A listing of patients with insurance scheduled for an appointment including their Insurance Company, Guarantor, Birthdate, Insured ID #, Policy Group Number, relationship to Insured

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
☐ Use as Title
Save
Delete
Data Selection
Report Options
Regions - 3 of 6
Locations - 3 of 6
Resources - ALL
Insurance - ALL
>
>>
<
<<
Report Grouping
Output
Preview
Close

Report Name:
Report Type: Appointments Scheduled with Insurance
Report Detail: Patient and Authorized Product Type Details

Appointment Dates:
Span: Custom 5 days (future)
8 /30/2010 - 9 / 3 /2010

Select one or more Regions
Available: (No Region), Central, Western
Selected: Eastern, Northern, Southern

Group By: ☐ Region ☐ Location ☐ Resource ☑ Insurance Company ☐ Insurance Plan
☐ Page Break for each Insurance Company

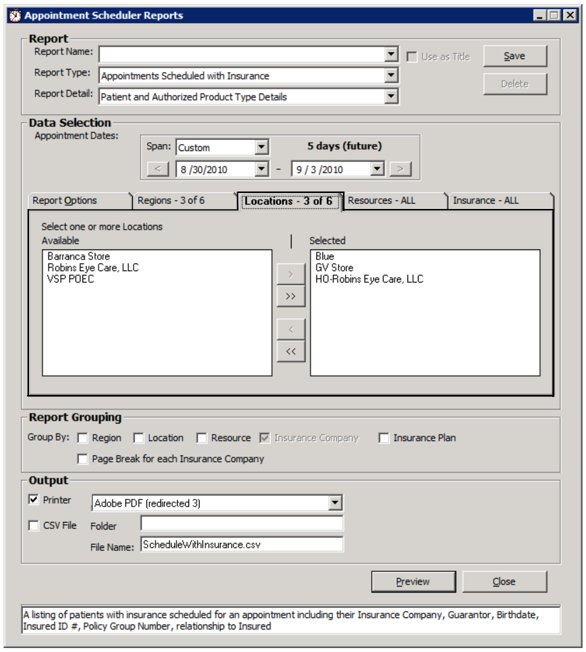
☑ Printer Adobe PDF (redirected 3)
☐ CSV File Folder
File Name: ScheduleWithInsurance.csv

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
Save
Delete
Data Selection
Report Options
Regions - 3 of 6
Locations - 3 of 6
Resources - ALL
Insurance - ALL
>
>>
<
<<
Report Grouping
Output
Preview
Close

Report Name:
☐ Use as Title
Report Type: Appointments Scheduled with Insurance
Report Detail: Patient and Authorized Product Type Details

Appointment Dates:
Span: Custom — 5 days (future)
8 /30/2010 - 9 / 3 /2010

Select one or more Locations

Available:
Barranca Store
Robins Eye Care, LLC
VSP POEC

Selected:
Blue
GV Store
HO-Robins Eye Care, LLC

Group By: ☐ Region ☐ Location ☐ Resource ☑ Insurance Company ☐ Insurance Plan
☐ Page Break for each Insurance Company

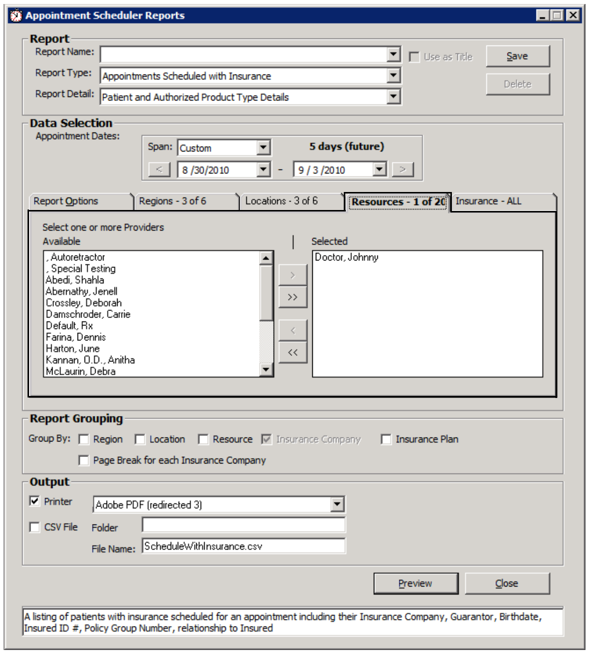
☑ Printer Adobe PDF (redirected 3)
☐ CSV File Folder
File Name: ScheduleWithInsurance.csv

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
Save
Delete
Data Selection
Report Options
Regions - 3 of 6
Locations - 3 of 6
Resources - 1 of 20
Insurance - ALL
>
>>
<
<<
Report Grouping
Output
Preview
Close

Report Name:
☐ Use as Title
Report Type: Appointments Scheduled with Insurance
Report Detail: Patient and Authorized Product Type Details
Appointment Dates:
Span: Custom
5 days (future)
8 /30/2010 - 9 / 3 /2010

Select one or more Providers

Available
, Autoretractor
, Special Testing
Abedi, Shahla
Abernathy, Jenell
Crossley, Deborah
Damschroder, Carrie
Default, Rx
Farina, Dennis
Harton, June
Kannan, O.D., Anitha
McLaurin, Debra

Selected
Doctor, Johnny

Group By: ☐ Region ☐ Location ☐ Resource ☑ Insurance Company ☐ Insurance Plan
☐ Page Break for each Insurance Company

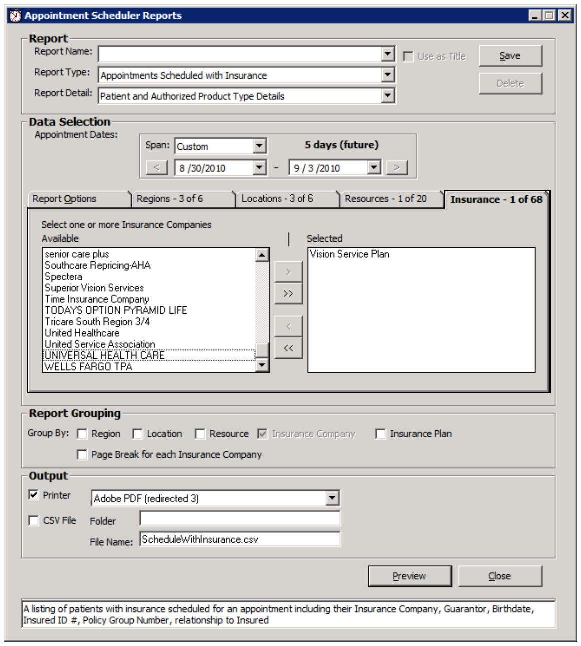
☑ Printer Adobe PDF (redirected 3)
☐ CSV File Folder
File Name: ScheduleWithInsurance.csv

A listing of patients with insurance scheduled for an appointment including their Insurance Company, Guarantor, Birthdate, Insured ID #, Policy Group Number, relationship to Insured

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.



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

Select one or more Insurance Companies

Available
senior care plus
Southcare Repricing-AHA
Spectera
Superior Vision Services
Time Insurance Company
TODAYS OPTION PYRAMID LIFE
Tricare South Region 3/4
United Healthcare
United Service Association
UNIVERSAL HEALTH CARE
WELLS FARGO TPA

Selected
Vision Service Plan

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

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 570.

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 627.

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 542.
1. Click the **Custom** tab.
2. Select **Fee Slip Reports** from the Report Name list.
3. Click **Open**.

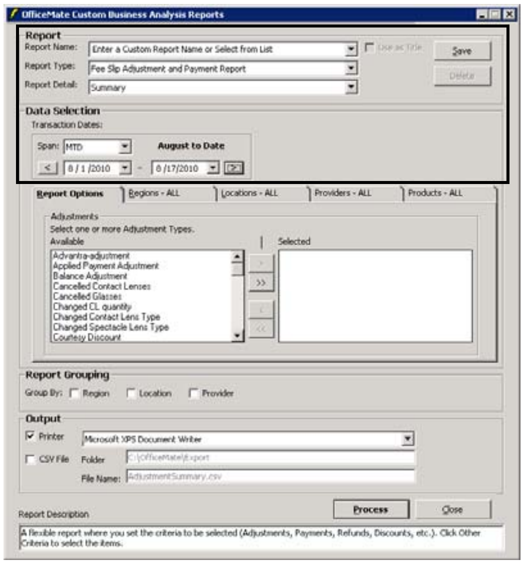
   The Custom Business Analysis Reports window opens.
4. To open previously saved report settings, go to To load saved custom report settings on page 572, and then skip to step 16.
5. Select a report from the **Report Type** drop-down menu.
   – *Fee Slip Adjustment and Payment Report.* Lists fee slip adjustments 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
Use as Title
Save
Delete
Data Selection
Transaction Dates:
August to Date
Report Options
Regions - ALL
Locations - ALL
Providers - ALL
Products - ALL
Adjustments
Select one or more Adjustment Types.
Available
Selected
Advantra-adjustment
Applied Payment Adjustment
Balance Adjustment
Cancelled Contact Lenses
Cancelled Glasses
Changed CL quantity
Changed Contact Lens Type
Changed Spectacle Lens Type
Courtesy Discount
Report Grouping
Output
Process
Close
Report Description

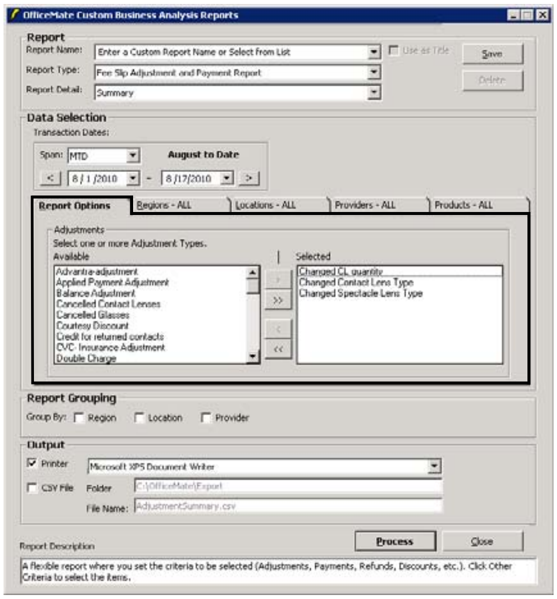
Report Name: Enter a Custom Report Name or Select from List
Report Type: Fee Slip Adjustment and Payment Report
Report Detail: Summary
Span: MTD
8 / 1 /2010 - 8 /17/2010
Group By: ☐ Region ☐ Location ☐ Provider
☑ Printer Microsoft XPS Document Writer
☐ CSV File Folder C:\OfficeMate\Export
File Name: AdjustmentSummary.csv

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.


OfficeMate Custom Business Analysis Reports
Report
Use as Title
Save
Delete
Data Selection
Transaction Dates:
August to Date
Report Options
Regions - ALL
Locations - ALL
Providers - ALL
Products - ALL
Adjustments
>
>>
<
<<
Report Grouping
Output
Process
Close

Report Name: Enter a Custom Report Name or Select From List
Report Type: Fee Slip Adjustment and Payment Report
Report Detail: Summary
Span: MTD
8/1/2010 - 8/17/2010

Select one or more Adjustment Types.

Available:
Advantra-adjustment
Applied Payment Adjustment
Balance Adjustment
Cancelled Contact Lenses
Cancelled Glasses
Courtesy Discount
Credit for returned contacts
CVC- Insurance Adjustment
Double Charge

Selected:
Changed CL quantity
Changed Contact Lens Type
Changed Spectacle Lens Type

Group By: ☐ Region ☐ Location ☐ Provider

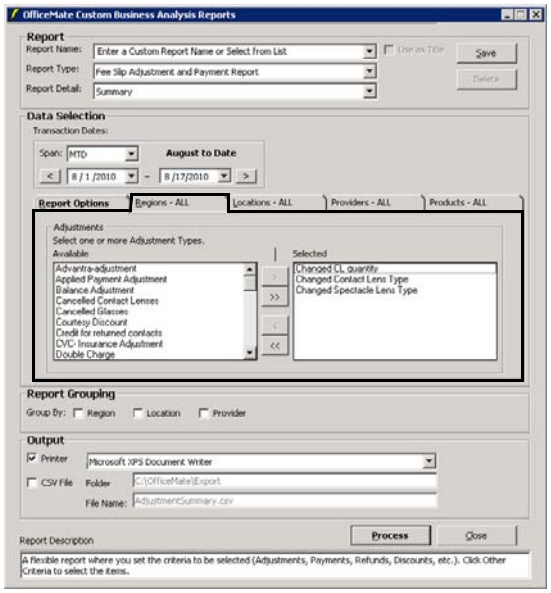
☑ Printer: Microsoft XPS Document Writer
☐ CSV File Folder: C:\OfficeMate\Export
File Name: AdjustmentSummary.csv

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.

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.


OfficeMate Custom Business Analysis Reports
Report
Use as Title
Save
Delete
Data Selection
Transaction Dates:
<
>
Report Options
Regions - ALL
Locations - ALL
Providers - ALL
Products - ALL
Adjustments
Select one or more Adjustment Types.
>
>>
<
<<
Report Grouping
Output
Process
Close

Report Name: Enter a Custom Report Name or Select from List
Report Type: Fee Slip Adjustment and Payment Report
Report Detail: Summary
Span: MTD
August to Date
8 / 1 /2010 - 8 /17/2010

Available
- Advantra-adjustment
- Applied Payment Adjustment
- Balance Adjustment
- Cancelled Contact Lenses
- Cancelled Glasses
- Courtesy Discount
- Credit for returned contacts
- CVC- Insurance Adjustment
- Double Charge

Selected
- Changed CL quantity
- Changed Contact Lens Type
- Changed Spectacle Lens Type

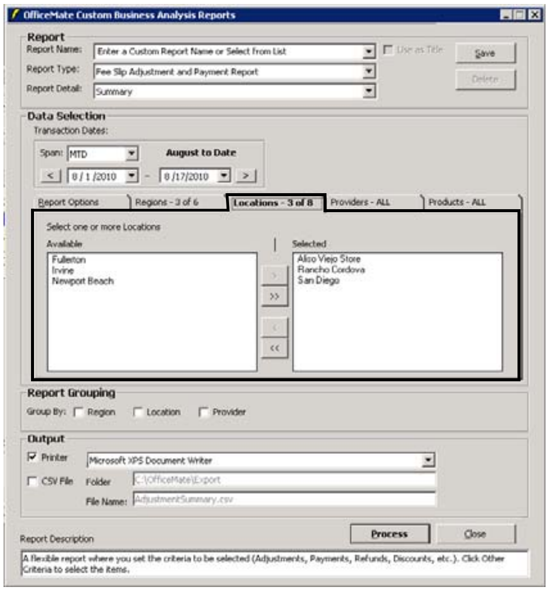
Group By: ☐ Region ☐ Location ☐ Provider
☑ Printer: Microsoft XPS Document Writer
☐ CSV File Folder: C:\OfficeMate\Export
File Name: AdjustmentSummary.csv

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.

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.


OfficeMate Custom Business Analysis Reports
Report
☐ Use as Title
Save
Delete
Data Selection
Transaction Dates:
<
>
Report Options
Regions - 3 of 6
Locations - 3 of 8
Providers - ALL
Products - ALL
>
>>
<
<<
Report Grouping
Process
Close

Report Name: Enter a Custom Report Name or Select From List
Report Type: Fee Slip Adjustment and Payment Report
Report Detail: Summary
Span: MTD August to Date
8/1/2010 - 8/17/2010

Select one or more Locations
Available: Fullerton, Irvine, Newport Beach
Selected: Aliso Viejo Store, Rancho Cordova, San Diego

Group By: ☐ Region ☐ Location ☐ Provider

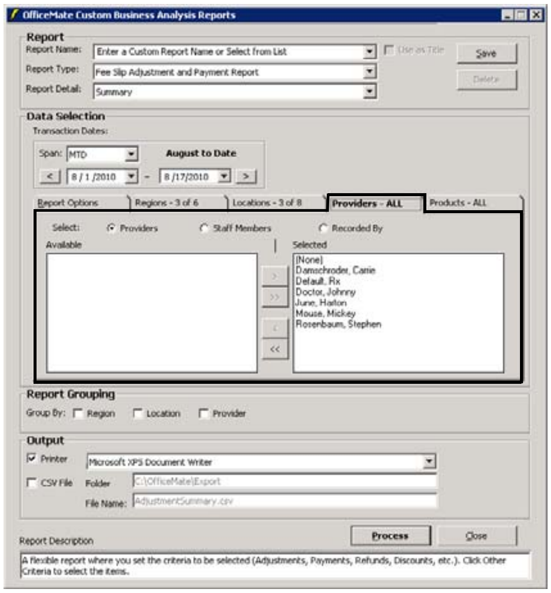
Output
☑ Printer Microsoft XPS Document Writer
☐ CSV File Folder C:\OfficeMate\Export
File Name: AdjustmentSummary.csv

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.

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.

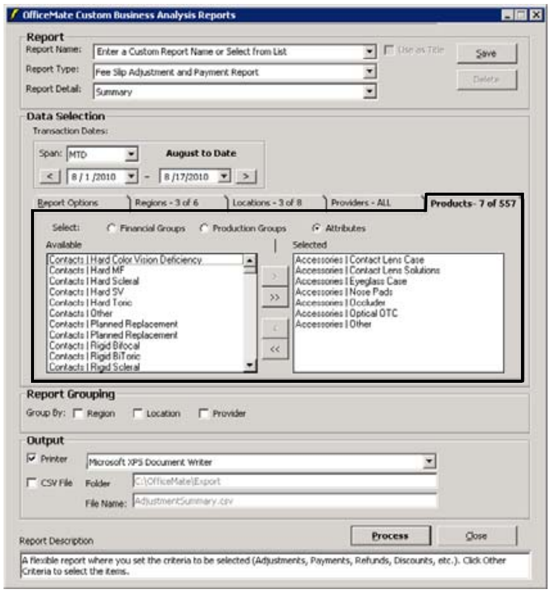

OfficeMate Custom Business Analysis Reports
Report
Save
Delete
Data Selection
Transaction Dates:
<
>
Report Options
Regions - 3 of 6
Locations - 3 of 8
Providers - ALL
Products - ALL
Available
>
>>
<
<<
Report Grouping
Output
Process
Close

Report Name: Enter a Custom Report Name or Select from List
☐ Use as Title
Report Type: Fee Slip Adjustment and Payment Report
Report Detail: Summary
Span: MTD
August to Date
8 / 1 /2010 - 8 /17/2010
Select: ● Providers ○ Staff Members ○ Recorded By
Selected
(None)
Damschroder, Carrie
Default, Rx
Doctor, Johnny
June, Harlon
Mouse, Mickey
Rosenbaum, Stephen
Group By: ☐ Region ☐ Location ☐ Provider
☑ Printer Microsoft XPS Document Writer
☐ CSV File Folder C:\OfficeMate\Export
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.

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.


OfficeMate Custom Business Analysis Reports
Report
☐ Use as Title
Save
Delete
Data Selection
Transaction Dates:
August to Date
<
>
Report Options
Regions - 3 of 6
Locations - 3 of 8
Providers - ALL
Products- 7 of 557
>
>>
<
<<
Report Grouping
Output
Process
Close

Report Name: Enter a Custom Report Name or Select from List
Report Type: Fee Slip Adjustment and Payment Report
Report Detail: Summary
Span: MTD
8 / 1 /2010 - 8 /17/2010
Select: ○ Financial Groups ○ Production Groups ● Attributes

Available:
Contacts | Hard Color Vision Deficiency
Contacts | Hard MF
Contacts | Hard Scleral
Contacts | Hard SV
Contacts | Hard Toric
Contacts | Other
Contacts | Planned Replacement
Contacts | Planned Replacement
Contacts | Rigid Bifocal
Contacts | Rigid BiToric
Contacts | Rigid Scleral

Selected:
Accessories | Contact Lens Case
Accessories | Contact Lens Solutions
Accessories | Eyeglass Case
Accessories | Nose Pads
Accessories | Occluder
Accessories | Optical OTC
Accessories | Other

Group By: ☐ Region ☐ Location ☐ Provider
☑ Printer Microsoft XPS Document Writer
☐ CSV File Folder C:\OfficeMate\Export
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.

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 570.

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 627.

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

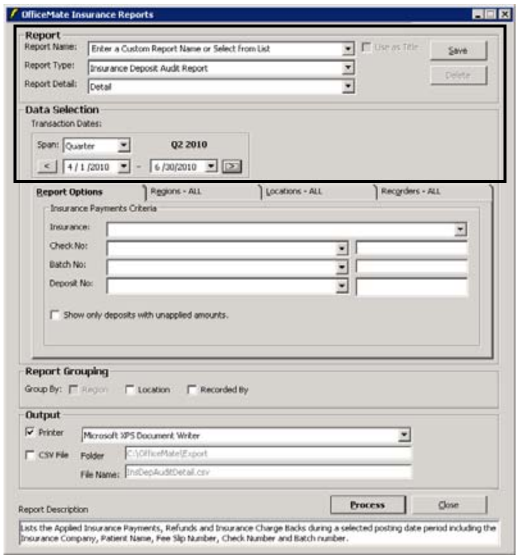
1. Open the Reports & Statements window. For more information on opening this window, go to Opening the Reports & Statements Window on page 542.
2. Click the **Custom** tab.
3. Select **Insurance Audit Reports** from the Report Name list.
4. Click **Open**.

   The Insurance Audit Reports window opens.
5. To open previously saved report settings, go to To load saved custom report settings on page 572, 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.

9. To load previously saved report settings, click **Load** and skip to step 16.

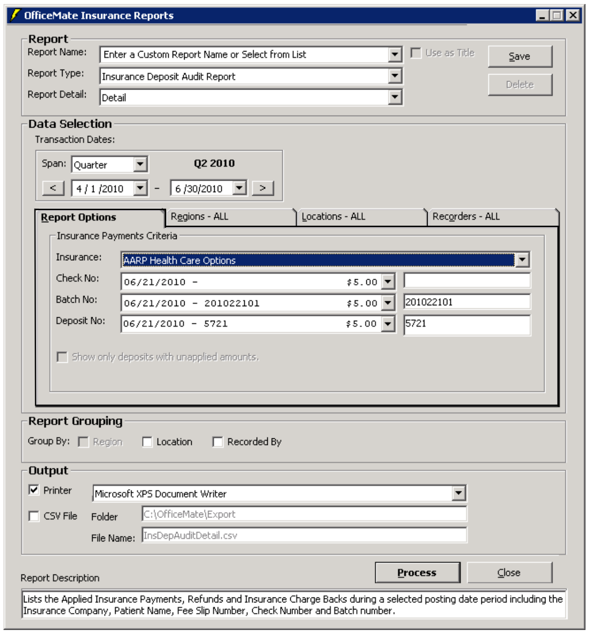
NOTE	Previously saved report settings do not affect the selection dates.


OfficeMate Insurance Reports
Report
☐ Use as Title
Save
Delete
Data Selection
Transaction Dates:
<
>
Report Options
Regions - ALL
Locations - ALL
Recorders - ALL
Insurance Payments Criteria
Insurance:
Check No:
Batch No:
Deposit No:
☐ Show only deposits with unapplied amounts.
Report Grouping
Group By: ☐ Region ☐ Location ☐ Recorded By
Output
Process
Close

Report Name: Enter a Custom Report Name or Select From List
Report Type: Insurance Deposit Audit Report
Report Detail: Detail
Span: Quarter
Q2 2010
4 / 1 /2010 - 6 /30/2010
☑ Printer: Microsoft XPS Document Writer
☐ CSV File Folder: C:\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.

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.

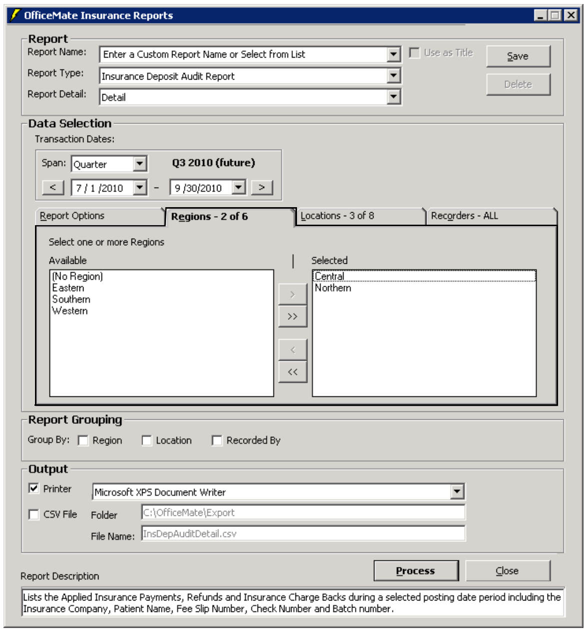

OfficeMate Insurance Reports
Report
Save
Delete
Data Selection
Report Options
Regions - ALL
Locations - ALL
Recorders - ALL
Insurance Payments Criteria
Report Grouping
Output
Process
Close

Report Name: Enter a Custom Report Name or Select from List
☐ Use as Title
Report Type: Insurance Deposit Audit Report
Report Detail: Detail
Transaction Dates:
Span: Quarter Q2 2010
4 / 1 /2010 - 6 /30/2010
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 - 5721 $5.00 5721
☐ Show only deposits with unapplied amounts.
Group By: ☐ Region ☐ Location ☐ Recorded By
☑ Printer Microsoft XPS Document Writer
☐ CSV File Folder C:\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
Save
Delete
Data Selection
Transaction Dates:
Report Options
Regions - 2 of 6
Locations - 3 of 8
Recorders - ALL
>
>>
<
<<
Report Grouping
Output
Process
Close

Report Name: Enter a Custom Report Name or Select from List
☐ Use as Title
Report Type: Insurance Deposit Audit Report
Report Detail: Detail

Span: Quarter Q3 2010 (future)
7 / 1 /2010 - 9 /30/2010

Select one or more Regions
Available: (No Region), Eastern, Southern, Western
Selected: Central, Northern

Group By: ☐ Region ☐ Location ☐ Recorded By

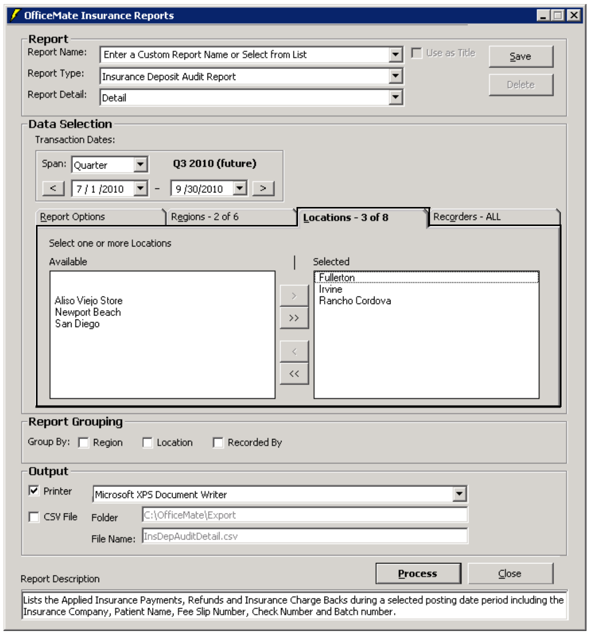
☑ Printer Microsoft XPS Document Writer
☐ CSV File Folder C:\OfficeMate\Export
File Name: InsDepAuditDetail.csv

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.


OfficeMate Insurance Reports
Report
Data Selection
Report Options
Regions - 2 of 6
Locations - 3 of 8
Recorders - ALL
>
>>
<
<<
Report Grouping
Output
Save
Delete
Process
Close

Report Name: Enter a Custom Report Name or Select from List ☐ Use as Title
Report Type: Insurance Deposit Audit Report
Report Detail: Detail

Transaction Dates:
Span: Quarter Q3 2010 (future)
7 / 1 /2010 - 9 /30/2010

Select one or more Locations

Available:
Aliso Viejo Store
Newport Beach
San Diego

Selected:
Fullerton
Irvine
Rancho Cordova

Group By: ☐ Region ☐ Location ☐ Recorded By

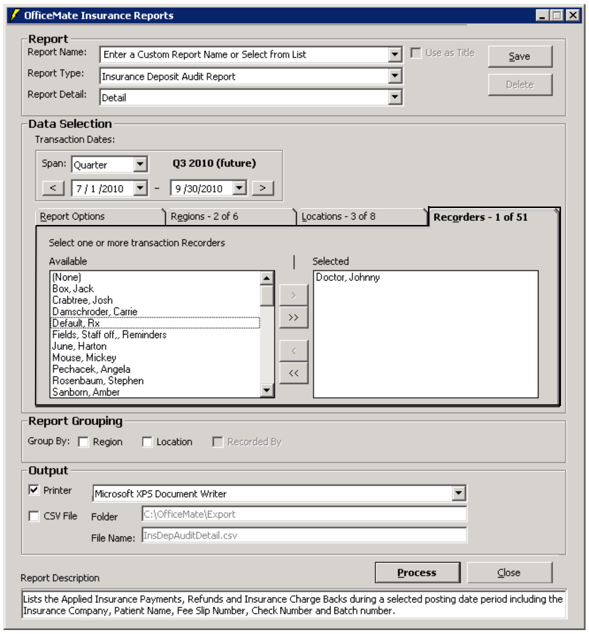
☑ Printer Microsoft XPS Document Writer
☐ CSV File Folder C:\OfficeMate\Export
File Name: InsDepAuditDetail.csv

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.

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.


OfficeMate Insurance Reports
Report
Use as Title
Save
Delete
Data Selection
Transaction Dates:
Report Options
Regions - 2 of 6
Locations - 3 of 8
Recorders - 1 of 51
>
>>
<
<<
Report Grouping
Output
Process
Close

Report Name: Enter a Custom Report Name or Select from List
Report Type: Insurance Deposit Audit Report
Report Detail: Detail

Span: Quarter
Q3 2010 (future)
7 / 1 /2010 - 9 /30/2010

Select one or more transaction Recorders

Available
(None)
Box, Jack
Crabtree, Josh
Damschroder, Carrie
Default, Rx
Fields, Staff off,, Reminders
June, Harton
Mouse, Mickey
Pechacek, Angela
Rosenbaum, Stephen
Sanborn, Amber

Selected
Doctor, Johnny

Group By: ☐ Region ☐ Location ☐ Recorded By

☑ Printer Microsoft XPS Document Writer
☐ CSV File Folder C:\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.

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 570.

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 627.

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

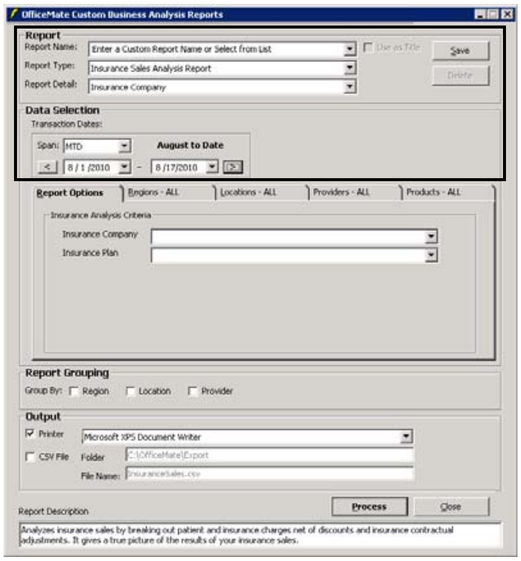
1. Open the Reports & Statements window. For more information on opening this window, go to Opening the Reports & Statements Window on page 542.
2. Click the **Custom** tab.
3. Select **Insurance Reports** from the Report Name list.
4. Click **Open**.

   The Custom Business Analysis Reports window opens.
5. To open previously saved report settings, go to To load saved custom report settings on page 572, 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.

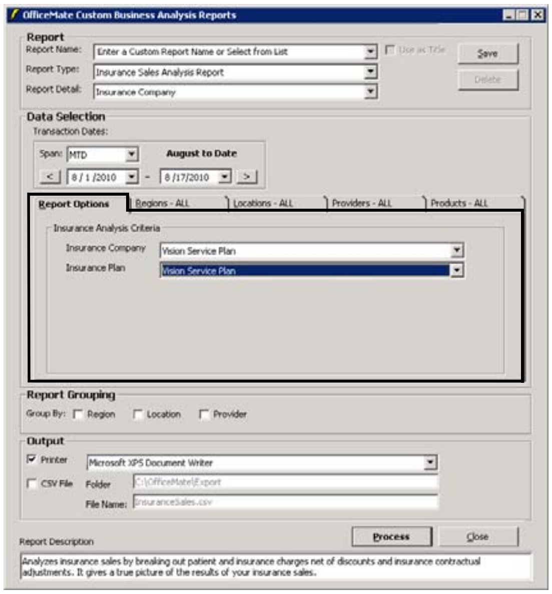

OfficeMate Custom Business Analysis Reports
Report
Use as Title
Save
Delete
Data Selection
Transaction Dates:
Report Options
Regions - ALL
Locations - ALL
Providers - ALL
Products - ALL
Insurance Analysis Criteria
Report Grouping
Output
Process
Close

Report Name: Enter a Custom Report Name or Select from List
Report Type: Insurance Sales Analysis Report
Report Detail: Insurance Company
Span: MTD August to Date
8 /1 /2010 – 8 /17/2010
Insurance Company:
Insurance Plan:
Group By: ☐ Region ☐ Location ☐ Provider
☑ Printer Microsoft XPS Document Writer
☐ CSV File Folder C:\OfficeMate\Export
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.

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.

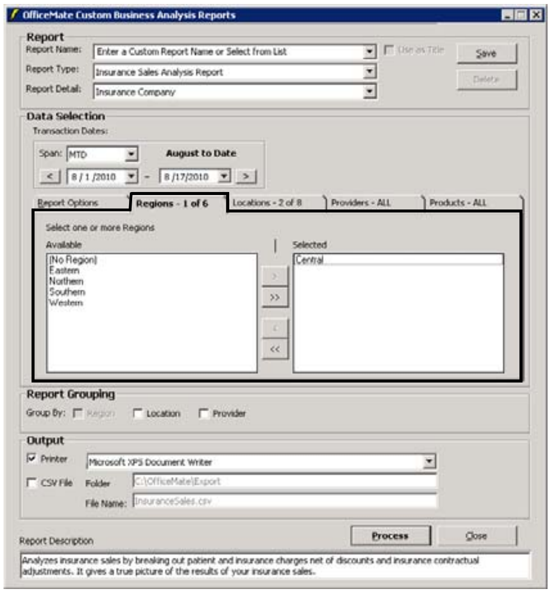

OfficeMate Custom Business Analysis Reports
Report
Use as Title
Save
Delete
Data Selection
Transaction Dates:
Report Options
Regions - ALL
Locations - ALL
Providers - ALL
Products - ALL
Insurance Analysis Criteria
Report Grouping
Output
Process
Close

Report Name: Enter a Custom Report Name or Select from List
Report Type: Insurance Sales Analysis Report
Report Detail: Insurance Company
Span: MTD August to Date
8 /1 /2010 – 8 /17/2010
Insurance Company: Vision Service Plan
Insurance Plan: Vision Service Plan
Group By: ☐ Region ☐ Location ☐ Provider
☑ Printer Microsoft XPS Document Writer
☐ CSV File Folder C:\OfficeMate\Export
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.

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 Custom Business Analysis Reports
Report
Use as Title
Save
Delete
Data Selection
Transaction Dates:
Report Options
Regions - 1 of 6
Locations - 2 of 8
Providers - ALL
Products - ALL
Select one or more Regions
>
>>
<
<<
Report Grouping
Process
Close

Report Name: Enter a Custom Report Name or Select from List
Report Type: Insurance Sales Analysis Report
Report Detail: Insurance Company

Span: MTD August to Date
8 / 1 /2010 - 8 /17/2010

Available
(No Region)
Eastern
Northern
Southern
Western

Selected
Central

Group By: ☐ Region ☐ Location ☐ Provider

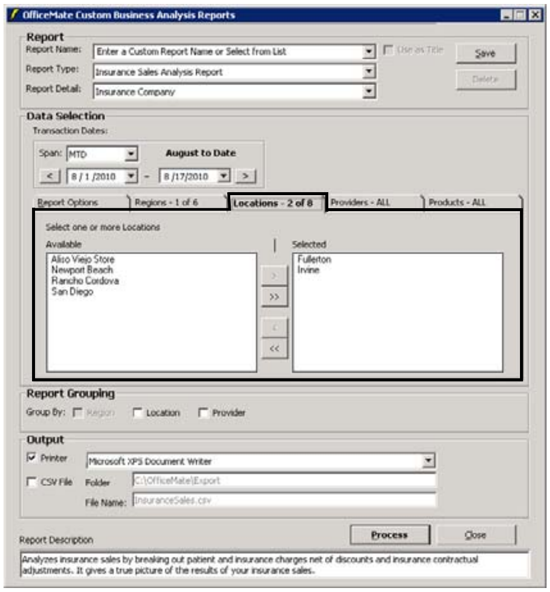
Output
☑ Printer Microsoft XPS Document Writer
☐ CSV File Folder C:\OfficeMate\Export
File Name: InsuranceSales.csv

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.

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.


OfficeMate Custom Business Analysis Reports
Report
☐ Use as Title
Save
Delete
Data Selection
Transaction Dates:
<
>
Report Options
Regions - 1 of 6
Locations - 2 of 8
Providers - ALL
Products - ALL
Select one or more Locations
>
>>
<
<<
Report Grouping
Group By: ☐ Region ☐ Location ☐ Provider
Output
Process
Close

Report Name: Enter a Custom Report Name or Select from List
Report Type: Insurance Sales Analysis Report
Report Detail: Insurance Company

Span: MTD August to Date
8 / 1 /2010 - 8 /17/2010

Available:
Aliso Viejo Store
Newport Beach
Rancho Cordova
San Diego

Selected:
Fullerton
Irvine

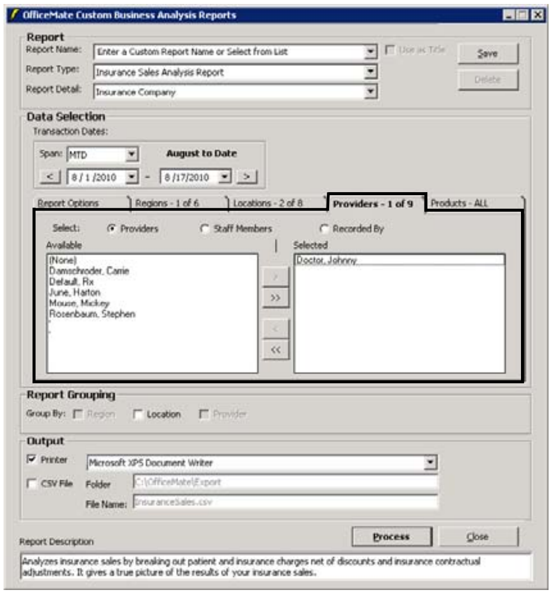
☑ Printer: Microsoft XPS Document Writer
☐ CSV File Folder: C:\OfficeMate\Export
File Name: InsuranceSales.csv

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.

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
☐ Use as Title
Save
Delete
Data Selection
Transaction Dates:
<
>
Report Options
Regions - 1 of 6
Locations - 2 of 8
Providers - 1 of 9
Products - ALL
>
>>
<
<<
Report Grouping
Output
Process
Close
Report Description

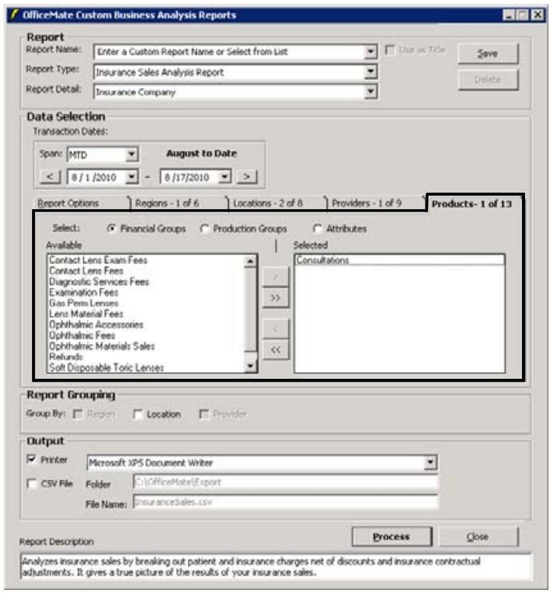
Report Name: Enter a Custom Report Name or Select from List
Report Type: Insurance Sales Analysis Report
Report Detail: Insurance Company
Span: MTD
August to Date
8 / 1 /2010 - 8 /17/2010
Select: ● Providers ○ Staff Members ○ Recorded By
Available: (None), Damschroder, Carrie, Default, Rx, June, Harton, Mouse, Mickey, Rosenbaum, Stephen
Selected: Doctor, Johnny
Group By: ☐ Region ☐ Location ☐ Provider
☑ Printer: Microsoft XPS Document Writer
☐ CSV File
Folder: C:\OfficeMate\Export
File Name: InsuranceSales.csv

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.


OfficeMate Custom Business Analysis Reports
Report
Use as Title
Save
Delete
Data Selection
Transaction Dates:
<
>
Report Options
Regions - 1 of 6
Locations - 2 of 8
Providers - 1 of 9
Products- 1 of 13
Select:
Available
Selected
>
>>
<
<<
Report Grouping
Output
Process
Close
Report Description

Report Name: Enter a Custom Report Name or Select from List
Report Type: Insurance Sales Analysis Report
Report Detail: Insurance Company
Span: MTD
August to Date
8/1/2010 - 8/17/2010
Select: ● Financial Groups ○ Production Groups ○ Attributes
Available:
Contact Lens Exam Fees
Contact Lens Fees
Diagnostic Services Fees
Examination Fees
Gas Perm Lenses
Lens Material Fees
Ophthalmic Accessories
Ophthalmic Fees
Ophthalmic Materials Sales
Refunds
Soft Disposable Toric Lenses
Selected:
Consultations
Group By: ☐ Region ☐ Location ☐ Provider
☑ Printer Microsoft XPS Document Writer
☐ CSV File Folder C:\OfficeMate\Export
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.

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 570.

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 627.

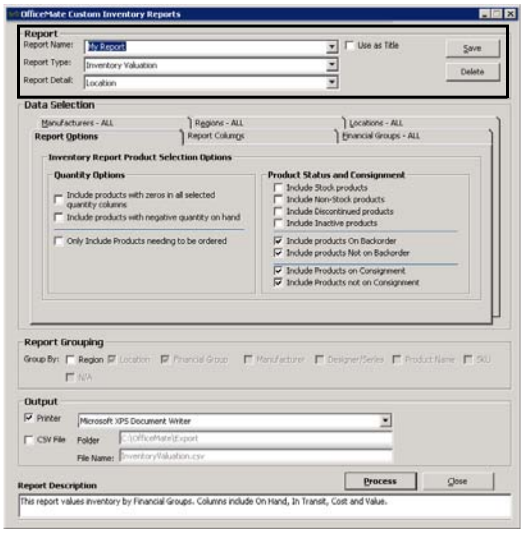
18. To export the data into a CSV file, perform the following steps:
    a. Select the **CSV File** check box.
    b. Type a folder location in the **Folder** text box.
    c. Type a name for the file in the **File Name** text box.
    d. Click **Process**.
    e. Click **View File** to view the data 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 542.
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 572, 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.


OfficeMate Custom Inventory Reports
Save
Delete
Data Selection
Manufacturers - ALL
Regions - ALL
Locations - ALL
Report Options
Report Columns
Financial Groups - ALL
Process
Close

Report

Report Name: My Report ☐ Use as Title

Report Type: Inventory Valuation

Report Detail: Location

Inventory Report Product Selection Options

Quantity Options

- ☐ Include products with zeros in all selected quantity columns
- ☐ Include products with negative quantity on hand
- ☐ Only Include Products needing to be ordered

Product Status and Consignment

- ☐ Include Stock products
- ☐ Include Non-Stock products
- ☐ Include Discontinued products
- ☐ Include Inactive products
- ☑ Include products On Backorder
- ☑ Include products Not on Backorder
- ☑ Include Products on Consignment
- ☑ Include Products not on Consignment

Report Grouping

Group By: ☐ Region ☑ Location ☑ Financial Group ☐ Manufacturer ☐ Designer/Series ☐ Product Name ☐ SKU ☐ N/A

Output

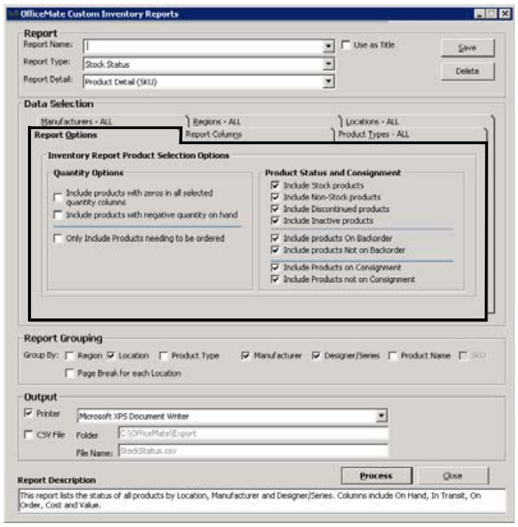
☑ Printer: Microsoft XPS Document Writer

☐ CSV File Folder: C:\OfficeMate\Export File Name: InventoryValuation.csv

Report Description

This report values inventory by Financial Groups. Columns include On Hand, In Transit, Cost and Value.

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.


OfficeMate Custom Inventory Reports
Save
Delete
Data Selection
Manufacturers - ALL
Regions - ALL
Locations - ALL
Report Options
Report Columns
Product Types - ALL
Process
Close

Report

Report Name: ☐ Use as Title

Report Type: Stock Status

Report Detail: Product Detail (SKU)

Inventory Report Product Selection Options

Quantity Options

- ☐ Include products with zeros in all selected quantity columns
- ☐ Include products with negative quantity on hand
- ☐ Only Include Products needing to be ordered

Product Status and Consignment

- ☑ Include Stock products
- ☑ Include Non-Stock products
- ☑ Include Discontinued products
- ☑ Include Inactive products
- ☑ Include products On Backorder
- ☑ Include products Not on Backorder
- ☑ Include Products on Consignment
- ☑ Include Products not on Consignment

Report Grouping

Group By: ☐ Region ☑ Location ☐ Product Type ☑ Manufacturer ☑ Designer/Series ☐ Product Name ☐ SKU ☐ Page Break for each Location

Output

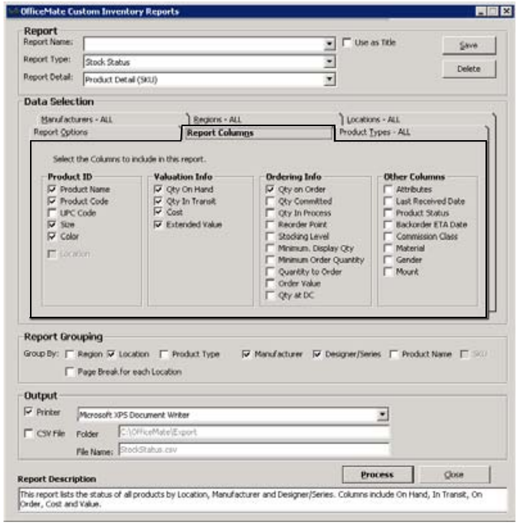
☑ Printer: Microsoft XPS Document Writer

☐ CSV File Folder: C:\OfficeMate\Export File Name: StockStatus.csv

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.

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
Save
Delete
Data Selection
Manufacturers - ALL
Regions - ALL
Locations - ALL
Report Options
Report Columns
Product Types - ALL
Report Grouping
Output
Report Description
Process
Close

Report Name:
☐ Use as Title
Report Type: Stock Status
Report Detail: Product Detail (SKU)

Select the Columns to include in this report.

Product ID
☑ Product Name
☑ Product Code
☐ UPC Code
☑ Size
☑ Color
☐ Location

Valuation Info
☑ Qty On Hand
☑ Qty In Transit
☑ Cost
☑ Extended Value

Ordering Info
☑ Qty on Order
☐ Qty Committed
☐ Qty In Process
☐ Reorder Point
☐ Stocking Level
☐ Minimum. Display Qty
☐ Minimum Order Quantity
☐ Quantity to Order
☐ Order Value
☐ Qty at DC

Other Columns
☐ Attributes
☐ Last Received Date
☐ Product Status
☐ Backorder ETA Date
☐ Commission Class
☐ Material
☐ Gender
☐ Mount

Group By: ☐ Region ☑ Location ☐ Product Type ☑ Manufacturer ☑ Designer/Series ☐ Product Name ☐ SKU
☐ Page Break for each Location

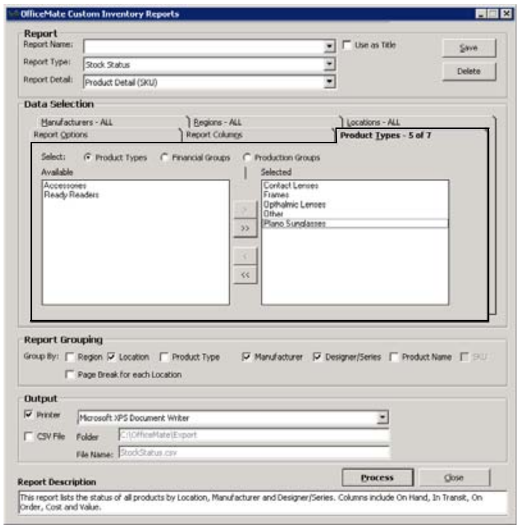
☑ Printer Microsoft XPS Document Writer
☐ CSV File Folder C:\OfficeMate\Export
File Name: StockStatus.csv

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.


OfficeMate Custom Inventory Reports
Report
Save
Delete
Data Selection
Manufacturers - ALL
Regions - ALL
Locations - ALL
Report Options
Report Columns
Product Types - 5 of 7
Available
Selected
>
>>
<
<<
Report Grouping
Output
Process
Close

Report Name:
☐ Use as Title
Report Type: Stock Status
Report Detail: Product Detail (SKU)

Select: ● Product Types ○ Financial Groups ○ Production Groups

Available: Accessories, Ready Readers

Selected: Contact Lenses, Frames, Opthalmic Lenses, Other, Plano Sunglasses

Group By: ☐ Region ☑ Location ☐ Product Type ☑ Manufacturer ☑ Designer/Series ☐ Product Name ☐ SKU
☐ Page Break for each Location

☑ Printer Microsoft XPS Document Writer
☐ CSV File Folder C:\OfficeMate\Export
File Name: StockStatus.csv

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.

11. Refine the report results by selecting the manufacturers you want to include, as needed:

    a. Click the **Manufacturers** tab.

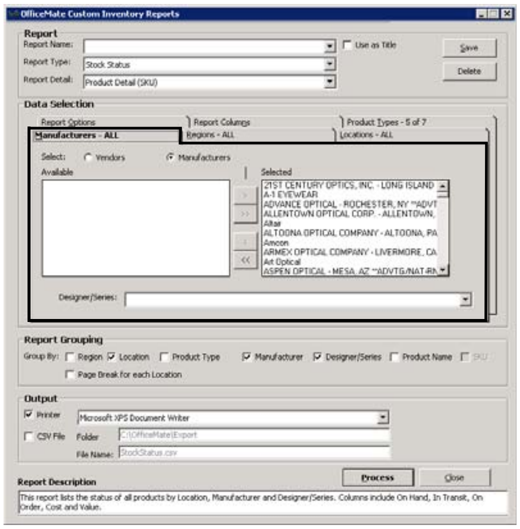
    b. Select either the **Manufacturers** or **Vendors** radio button to narrow the report results by manufacturer or vendor.

    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.


OfficeMate Custom Inventory Reports
Report
Save
Delete
Data Selection
Report Options
Report Columns
Product Types - 5 of 7
Manufacturers - ALL
Regions - ALL
Locations - ALL
Available
Selected
>
>>
<
<<
Report Grouping
Output
Process
Close

Report Name:
☐ Use as Title
Report Type: Stock Status
Report Detail: Product Detail (SKU)

Select: ○ Vendors ● Manufacturers

Selected:
21ST CENTURY OPTICS, INC. - LONG ISLAND
A-1 EYEWEAR
ADVANCE OPTICAL - ROCHESTER, NY **ADVT
ALLENTOWN OPTICAL CORP. - ALLENTOWN,
Altair
ALTOONA OPTICAL COMPANY - ALTOONA, PA
Amcon
ARMEX OPTICAL COMPANY - LIVERMORE, CA
Art Optical
ASPEN OPTICAL - MESA, AZ **ADVTG/NAT-RN

Designer/Series:

Group By: ☐ Region ☑ Location ☐ Product Type ☑ Manufacturer ☑ Designer/Series ☐ Product Name ☐ SKU
☐ Page Break for each Location

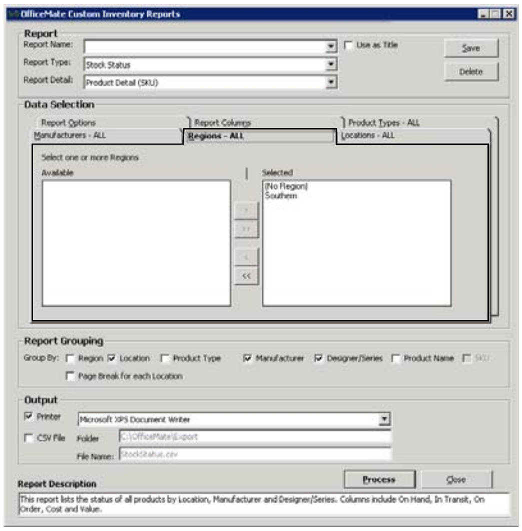
☑ Printer: Microsoft XPS Document Writer
☐ CSV File Folder: C:\OfficeMate\Export
File Name: StockStatus.csv

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.

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.


OfficeMate Custom Inventory Reports
Report
Save
Delete
Data Selection
Report Options
Report Columns
Product Types - ALL
Manufacturers - ALL
Regions - ALL
Locations - ALL
Select one or more Regions
Available
>
>>
<
<<
Report Grouping
Output
Process
Close

Report Name:
☐ Use as Title
Report Type: Stock Status
Report Detail: Product Detail (SKU)

Selected:
(No Region)
Southern

Group By: ☐ Region ☑ Location ☐ Product Type ☑ Manufacturer ☑ Designer/Series ☐ Product Name ☐ SKU
☐ Page Break for each Location

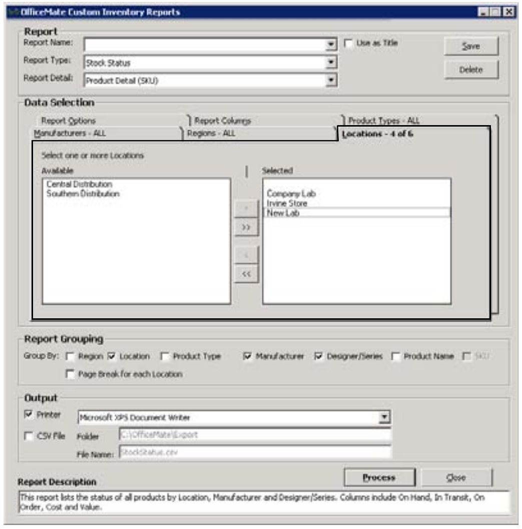
☑ Printer Microsoft XPS Document Writer
☐ CSV File Folder C:\OfficeMate\Export
File Name: StockStatus.csv

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.

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.


OfficeMate Custom Inventory Reports
Report
Save
Delete
Data Selection
Report Options
Report Columns
Product Types - ALL
Manufacturers - ALL
Regions - ALL
Locations - 4 of 6
Select one or more Locations
>>
<<
Report Grouping
Output
Process
Close

Report Name:
☐ Use as Title
Report Type: Stock Status
Report Detail: Product Detail (SKU)

Available
Central Distribution
Southern Distribution

Selected
Company Lab
Irvine Store
New Lab

Group By: ☐ Region ☑ Location ☐ Product Type ☑ Manufacturer ☑ Designer/Series ☐ Product Name ☐ SKU
☐ Page Break for each Location

☑ Printer Microsoft XPS Document Writer
☐ CSV File Folder C:\OfficeMate\Export
File Name: StockStatus.csv

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.

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 570.
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 627.

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

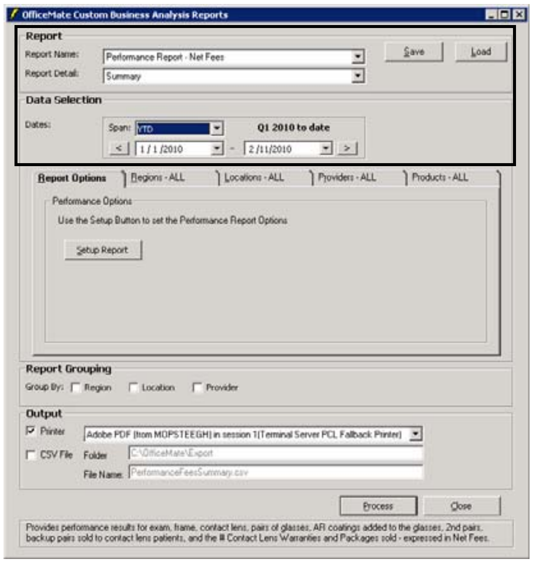
1. Open the Reports & Statements window. For more information on opening this window, go to Opening the Reports & Statements Window on page 542.
2. Click the **Custom** tab.
3. Select **Performance Reports** from the Report Name list.
4. Click **Open**.

   The Custom Business Analysis Reports window opens.
5. To open previously saved report settings, go to To load saved custom report settings on page 572, 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.


OfficeMate Custom Business Analysis Reports
Save
Load
Report Options
Regions - ALL
Locations - ALL
Providers - ALL
Products - ALL
Performance Options
Setup Report
Process
Close

Report

Report Name: Performance Report - Net Fees

Report Detail: Summary

Data Selection

Dates: Span: YTD Q1 2010 to date

< 1 / 1 /2010 - 2 /11/2010 >

Use the Setup Button to set the Performance Report Options

Report Grouping

Group By: ☐ Region ☐ Location ☐ Provider

Output

☑ Printer Adobe PDF (from MOPSTEEGH) in session 1(Terminal Server PCL Fallback Printer)

☐ CSV File Folder C:\OfficeMate\Export

File Name: PerformanceFeesSummary.csv

Provides performance results for exam, frame, contact lens, pairs of glasses, AR coatings added to the glasses, 2nd pairs, backup pairs sold to contact lens patients, and the # Contact Lens Warranties and Packages sold - expressed in Net Fees.

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.

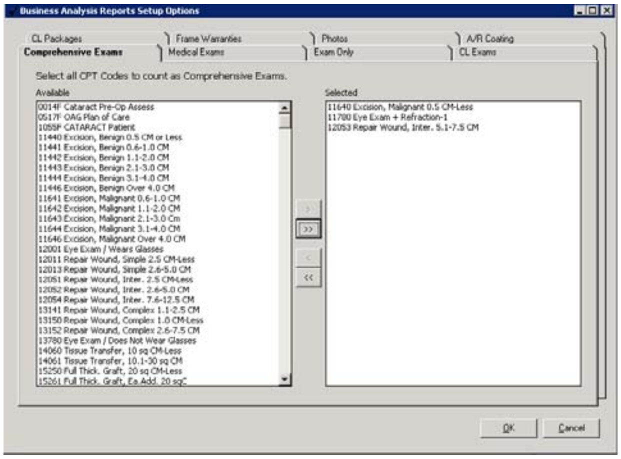
   c. Click the various tabs on the Business Analysis Reports Setup Options window.
   d. Select items that you want to include as quantities or fees in the column represented by the tab.

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 90. • 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 140. For information on adding attributes to products, go to To maintain product attributes on page 270. • 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**.


Business Analysis Reports Setup Options
CL Packages
Frame Warranties
Photos
A/R Coating
Comprehensive Exams
Medical Exams
Exam Only
CL Exams
Available
Selected
>
>>
<
<<
OK
Cancel

Select all CPT Codes to count as Comprehensive Exams.

Available:

0014F Cataract Pre-Op Assess
0517F OAG Plan of Care
1055F CATARACT Patient
11440 Excision, Benign 0.5 CM or Less
11441 Excision, Benign 0.6-1.0 CM
11442 Excision, Benign 1.1-2.0 CM
11443 Excision, Benign 2.1-3.0 CM
11444 Excision, Benign 3.1-4.0 CM
11446 Excision, Benign Over 4.0 CM
11641 Excision, Malignant 0.6-1.0 CM
11642 Excision, Malignant 1.1-2.0 CM
11643 Excision, Malignant 2.1-3.0 Cm
11644 Excision, Malignant 3.1-4.0 CM
11646 Excision, Malignant Over 4.0 CM
12001 Eye Exam / Wears Glasses
12011 Repair Wound, Simple 2.5 CM-Less
12013 Repair Wound, Simple 2.6-5.0 CM
12051 Repair Wound, Inter. 2.5 CM-Less
12052 Repair Wound, Inter. 2.6-5.0 CM
12054 Repair Wound, Inter. 7.6-12.5 CM
13141 Repair Wound, Complex 1.1-2.5 CM
13150 Repair Wound, Complex 1.0 CM-Less
13152 Repair Wound, Complex 2.6-7.5 CM
13780 Eye Exam / Does Not Wear Glasses
14060 Tissue Transfer, 10 sq CM-Less
14061 Tissue Transfer, 10.1-30 sq CM
15250 Full Thick. Graft, 20 sq CM-Less
15261 Full Thick. Graft, Ea Add. 20 sqC

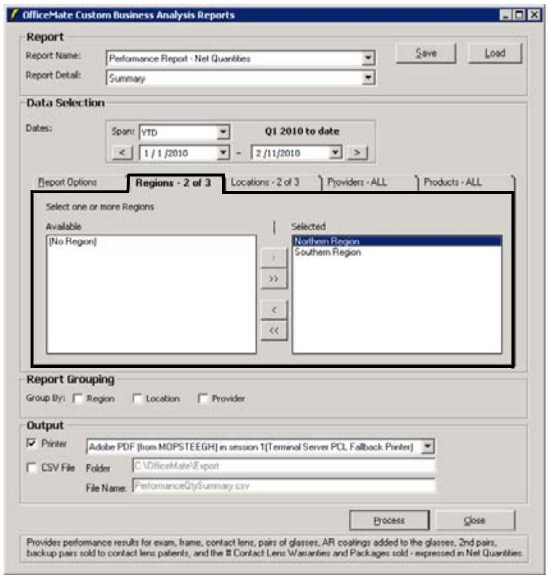
Selected:

11640 Excision, Malignant 0.5 CM-Less
11700 Eye Exam + Refraction-1
12053 Repair Wound, Inter. 5.1-7.5 CM

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.


OfficeMate Custom Business Analysis Reports
Report
Save
Load
Data Selection
Dates:
<
>
Report Options
Regions - 2 of 3
Locations - 2 of 3
Providers - ALL
Products - ALL
Available
Selected
>
>>
<
<<
Report Grouping
Output
Process
Close

Report Name: Performance Report - Net Quantities
Report Detail: Summary

Span: YTD Q1 2010 to date
1 / 1 /2010 - 2 /11/2010

Select one or more Regions

Available: [No Region]

Selected: Northern Region, Southern Region

Group By: ☐ Region ☐ Location ☐ Provider

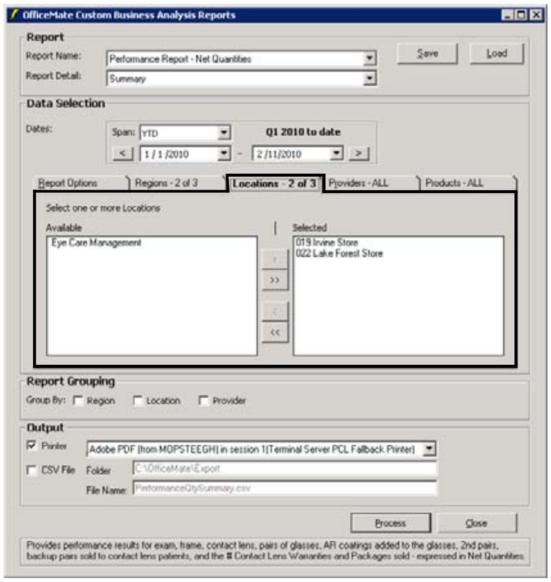
☑ Printer Adobe PDF (from MOPSTEEGH) in session 1(Terminal Server PCL Fallback Printer)
☐ CSV File Folder C:\OfficeMate\Export
File Name: PerformanceQtySummary.csv

Provides performance results for exam, frame, contact lens, pairs of glasses, AR coatings added to the glasses, 2nd pairs, backup pairs sold to contact lens patients, and the # Contact Lens Warranties and Packages sold - expressed in Net Quantities.

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.


OfficeMate Custom Business Analysis Reports
Report
Save
Load
Data Selection
Report Options
Regions - 2 of 3
Locations - 2 of 3
Providers - ALL
Products - ALL
Select one or more Locations
>
>>
<
<<
Report Grouping
Output
Process
Close

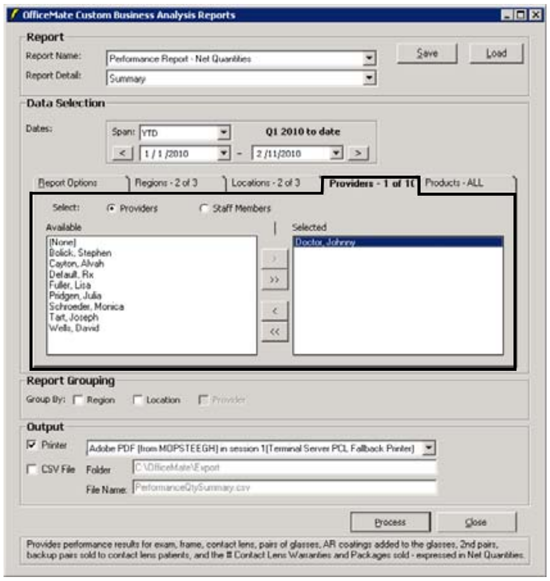
Report Name: Performance Report - Net Quantities
Report Detail: Summary
Dates: Span: YTD Q1 2010 to date
1 / 1 /2010 - 2 /11/2010
Available: Eye Care Management
Selected: 019 Irvine Store
022 Lake Forest Store
Group By: ☐ Region ☐ Location ☐ Provider
☑ Printer Adobe PDF (from MOPSTEEGH) in session 1(Terminal Server PCL Fallback Printer)
☐ CSV File Folder C:\OfficeMate\Export
File Name: PerformanceQtySummary.csv

Provides performance results for exam, frame, contact lens, pairs of glasses, AR coatings added to the glasses, 2nd pairs, backup pairs sold to contact lens patients, and the # Contact Lens Warranties and Packages sold - expressed in Net Quantities.

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.



OfficeMate Custom Business Analysis Reports

Report
Report Name: Performance Report - Net Quantities
Report Detail: Summary

Data Selection
Dates: Span: YTD
Q1 2010 to date
1 / 1 /2010 - 2 /11/2010

Select: ● Providers ○ Staff Members

Available
[None]
Bolick, Stephen
Cayton, Alvah
Default, Rx
Fuller, Lisa
Pridgen, Julia
Schroeder, Monica
Tart, Joseph
Wells, David

Selected
Doctor, Johnny

Report Grouping
Group By: ☐ Region ☐ Location ☐ Provider

Output
☑ Printer Adobe PDF (from MOPSTEEGH) in session 1(Terminal Server PCL Fallback Printer)
☐ CSV File Folder C:\OfficeMate\Export
File Name: PerformanceQtySummary.csv

Provides performance results for exam, frame, contact lens, pairs of glasses, AR coatings added to the glasses, 2nd pairs, backup pairs sold to contact lens patients, and the # Contact Lens Warranties and Packages sold - expressed in Net Quantities.

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 570.

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 627.

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 542.
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 572, 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.

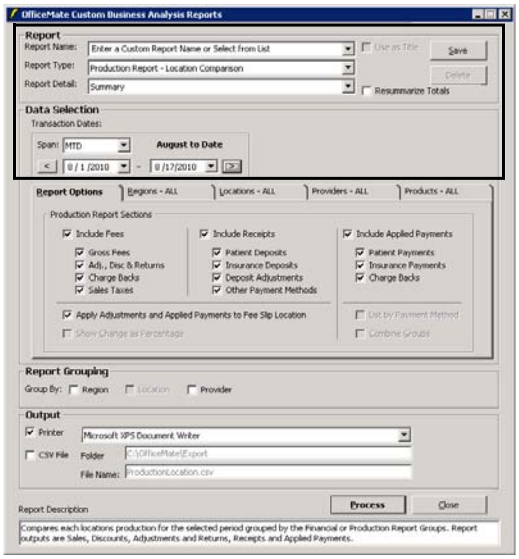
NOTES

- 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.



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

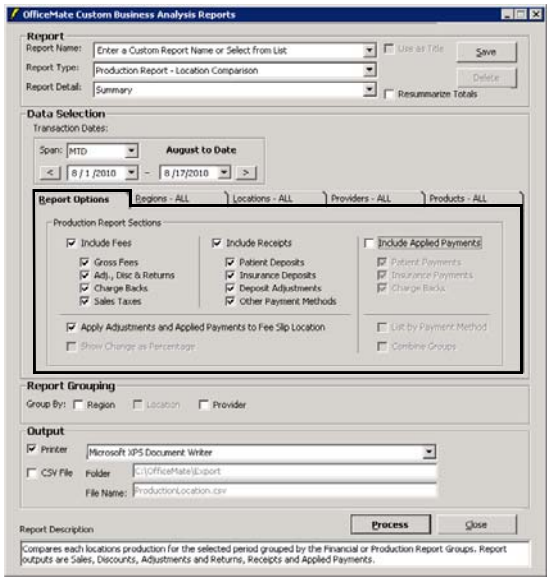
Report Grouping
Group By: ☐ Region ☐ Location ☐ Provider

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.

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
Save
Delete
Data Selection
Transaction Dates:
Report Options
Regions - ALL
Locations - ALL
Providers - ALL
Products - ALL
Production Report Sections
Report Grouping
Output
Process
Close

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

Span: MTD
August to Date
8 / 1 /2010 - 8 /17/2010

☑ 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

Group By: ☐ Region ☐ Location ☐ Provider

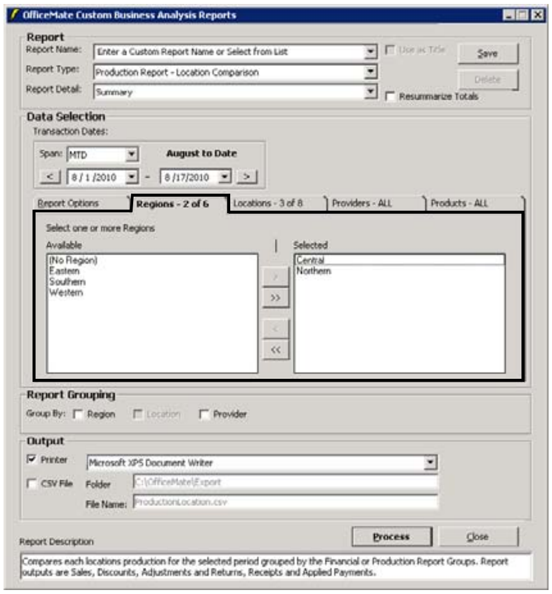
☑ Printer: Microsoft XPS Document Writer
☐ CSV File
Folder: C:\OfficeMate\Export
File Name: ProductionLocation.csv

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.



OfficeMate Custom Business Analysis Reports

Report
Report Name: Enter a Custom Report Name or Select from List
Report Type: Production Report - Location Comparison
Report Detail: Summary
☐ Use as Title
☐ Resummarize Totals

Data Selection
Transaction Dates:
Span: MTD
August to Date
8 / 1 /2010 - 8 /17/2010

Regions - 2 of 6
Select one or more Regions
Available: (No Region), Eastern, Southern, Western
Selected: Central, Northern

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.

13. Refine the report results by selecting the locations you want to include, as needed:

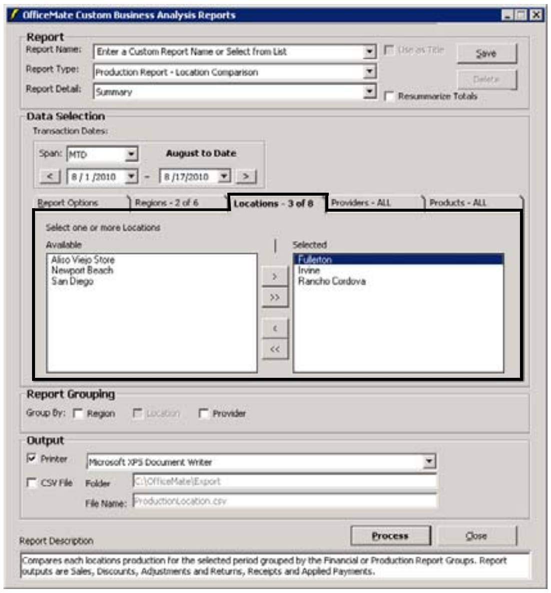
    a. Click the **Locations** tab.

    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.



OfficeMate Custom Business Analysis Reports

Report

Report Name: Enter a Custom Report Name or Select from List

Report Type: Production Report - Location Comparison

Report Detail: Summary

☐ Use as Title

☐ Resummarize Totals

Data Selection

Transaction Dates:

Span: MTD August to Date

8 / 1 /2010 - 8 /17/2010

Report Options | Regions - 2 of 6 | Locations - 3 of 8 | Providers - ALL | Products - ALL

Select one or more Locations

Available: Aliso Viejo Store, Newport Beach, San Diego

Selected: Fullerton, Irvine, Rancho Cordova

Report Grouping

Group By: ☐ Region ☐ Location ☐ Provider

Output

☑ Printer Microsoft XPS Document Writer

☐ CSV File Folder C:\OfficeMate\Export

File Name: ProductionLocation.csv

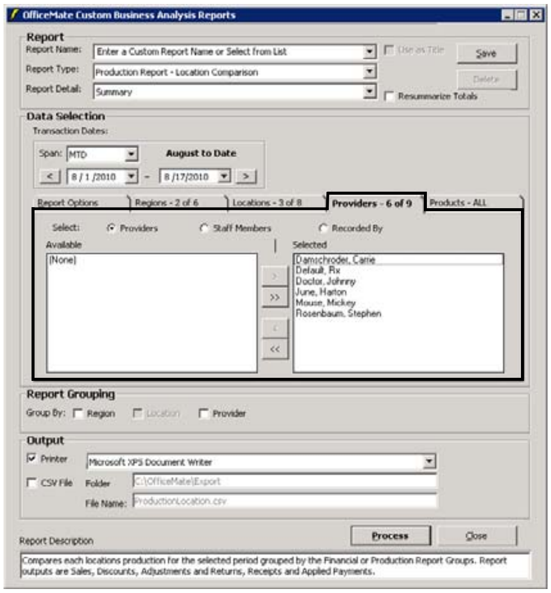
Report Description

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.

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.

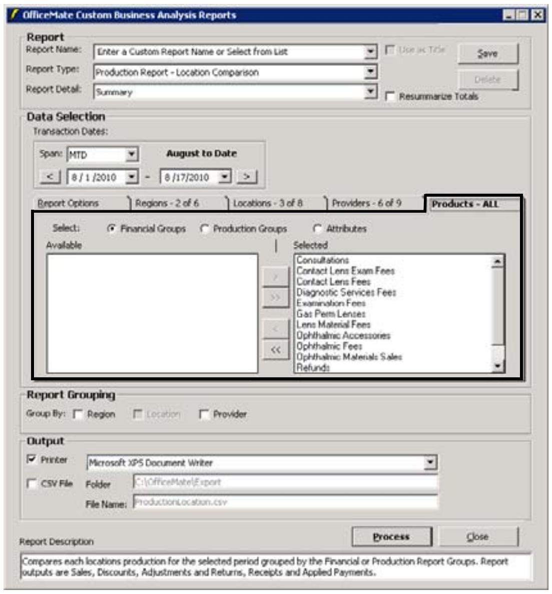

OfficeMate Custom Business Analysis Reports
Report
Use as Title
Save
Delete
Data Selection
Transaction Dates:
<
>
Report Options
Regions - 2 of 6
Locations - 3 of 8
Providers - 6 of 9
Products - ALL
>
>>
<
<<
Report Grouping
Output
Process
Close

Report Name: Enter a Custom Report Name or Select from List
Report Type: Production Report - Location Comparison
Report Detail: Summary
☐ Resummarize Totals
Span: MTD
August to Date
8 / 1 /2010 - 8 /17/2010
Select: ● Providers ○ Staff Members ○ Recorded By
Available: (None)
Selected:
Damschroder, Carrie
Default, Rx
Doctor, Johnny
June, Harton
Mouse, Mickey
Rosenbaum, Stephen
Group By: ☐ Region ☐ Location ☐ Provider
☑ 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.

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.


OfficeMate Custom Business Analysis Reports
Report
Save
Delete
Data Selection
Transaction Dates:
Report Options
Regions - 2 of 6
Locations - 3 of 8
Providers - 6 of 9
Products - ALL
Available
Selected
>
>>
<
<<
Report Grouping
Output
Process
Close

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
Span: MTD August to Date
8 / 1 /2010 - 8 /17/2010
Select: ● Financial Groups ○ Production Groups ○ Attributes
Selected: Consultations, Contact Lens Exam Fees, Contact Lens Fees, Diagnostic Services Fees, Examination Fees, Gas Perm Lenses, Lens Material Fees, Ophthalmic Accessories, Ophthalmic Fees, Ophthalmic Materials Sales, Refunds
Group By: ☐ Region ☐ Location ☐ Provider
☑ 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.

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 570.

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.

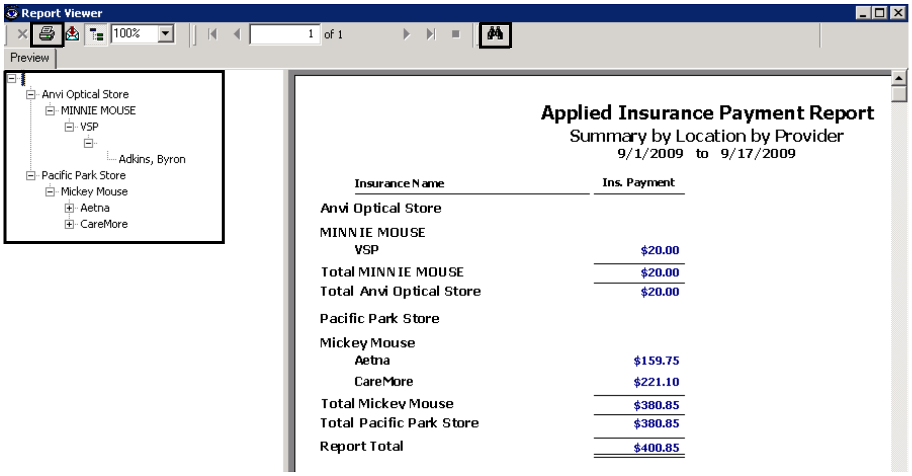
NOTE	For more information about the Report Viewer window, go to To use the Report Viewer window on page 627.

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.



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

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.

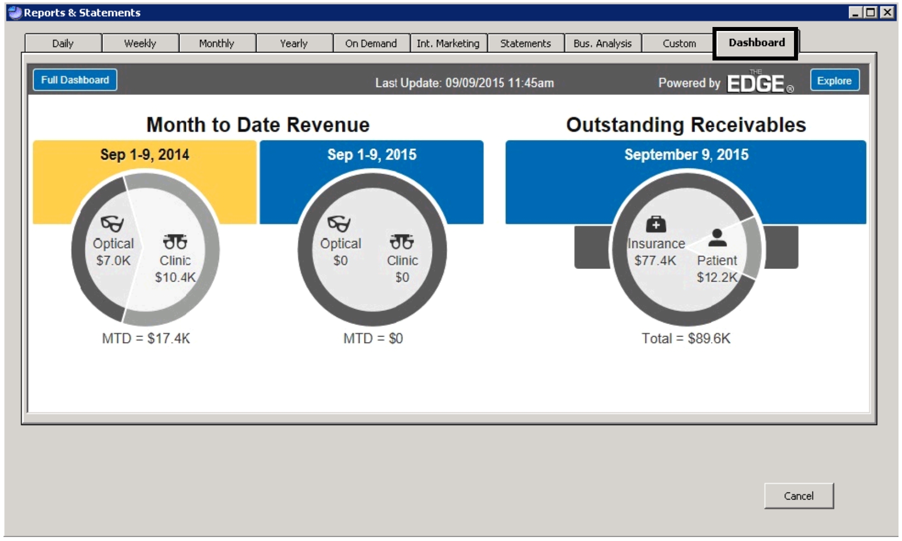
You can view a business insights financial dashboard, *powered by* The EDGE®, directly from within OfficeMate. This dashboard gives you an overview of month-to-date and year-to-date total clinic and optical revenue, revenue per exam, capture rates, average frame sales, and outstanding receivables in 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 542.

> **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.

To understand the terms and values used in the new business insights dashboard, *powered by* The EDGE, view our corresponding knowledge base articles.


Reports & Statements
Daily
Weekly
Monthly
Yearly
On Demand
Int. Marketing
Statements
Bus. Analysis
Custom
Dashboard
Full Dashboard
Last Update: 09/09/2015 11:45am
Powered by EDGE
Explore
Month to Date Revenue
Sep 1-9, 2014
Optical $7.0K
Clinic $10.4K
MTD = $17.4K
Sep 1-9, 2015
Optical $0
Clinic $0
MTD = $0
Outstanding Receivables
September 9, 2015
Insurance $77.4K
Patient $12.2K
Total = $89.6K
Cancel

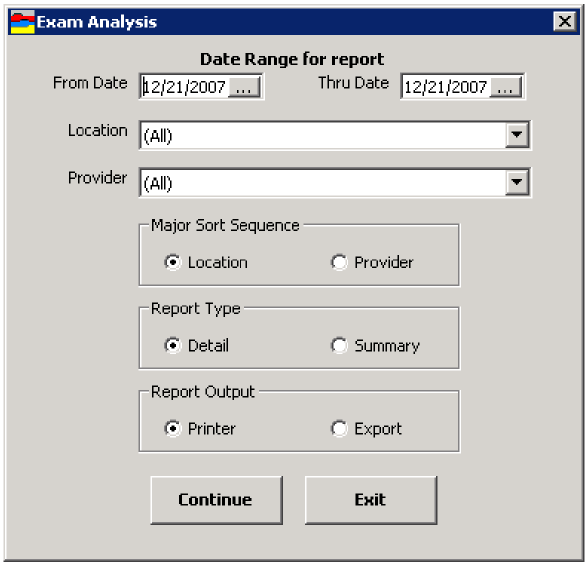
Creating & Printing the Exam Analysis Report

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.



From Date 12/21/2007 Thru Date 12/21/2007

Location (All)

Provider (All)

Major Sort Sequence: ● Location ○ Provider

Report Type: ● Detail ○ Summary

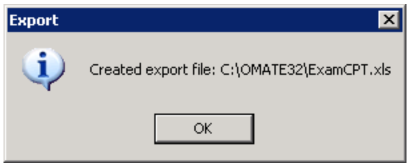
Report Output: ● Printer ○ Export

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 97-2003 Data Only (*.xls)** format from the **Save as type** drop-down menu.

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.



Created export file: C:\OMATE32\ExamCPT.xls

Viewing the Report History

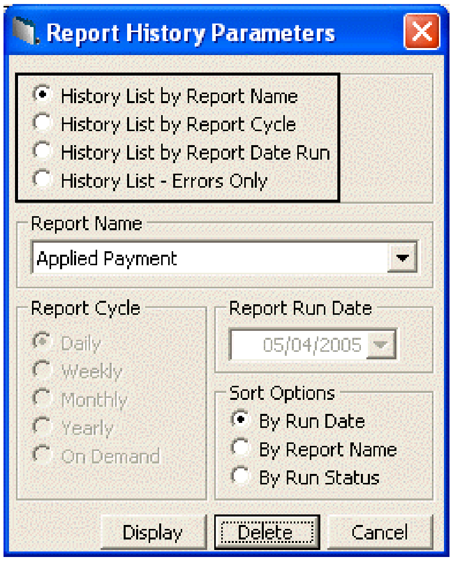
Follow the instructions below to view when a report was created and whether or not the report was created successfully.

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 542.
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



Report History Parameters

● History List by Report Name
○ History List by Report Cycle
○ History List by Report Date Run
○ History List - Errors Only

Report Name: Applied Payment

Report Cycle
● Daily
○ Weekly
○ Monthly
○ Yearly
○ On Demand

Report Run Date: 05/04/2005

Sort Options
● By Run Date
○ By Report Name
○ By Run Status

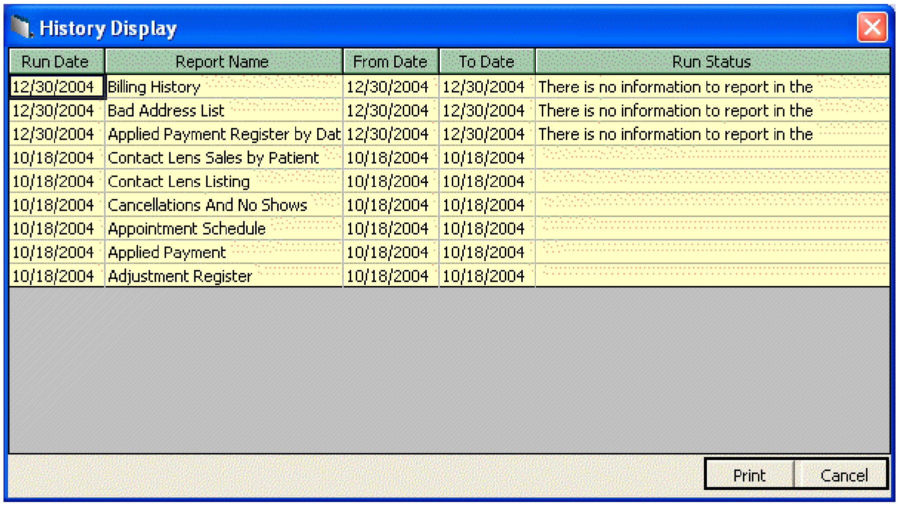
4. If you selected to view the history list by report name, select a report name from the **Report Name** drop-down menu.
5. If you selected to view the history list by report cycle, select an appropriate **Report Cycle** radio button.
6. If you selected to view the history list by date run, select or 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

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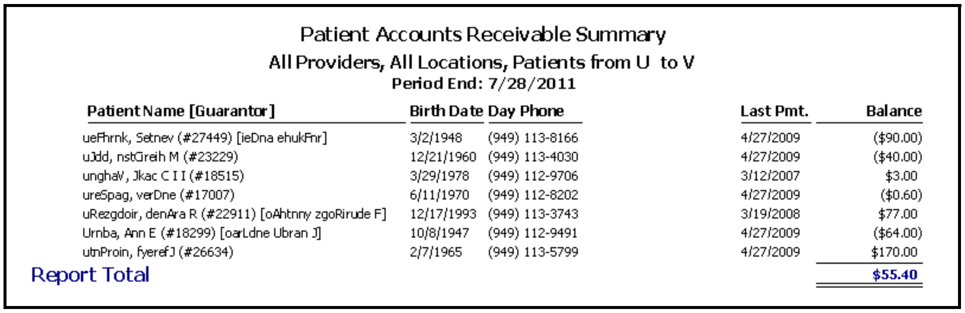
Accounts Receivable

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 574.



Patient Accounts Receivable Summary

All Providers, All Locations, Patients from U to V

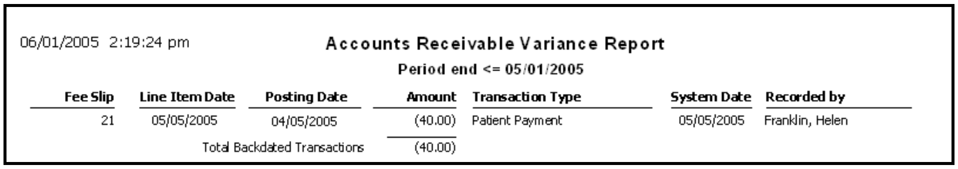
Period End: 7/28/2011

Patient Name [Guarantor]	Birth Date	Day Phone	Last Pmt.	Balance
ueFhrnk, Setnev (#27449) [ieDna ehukFnr]	3/2/1948	(949) 113-8166	4/27/2009	($90.00)
uJdd, nstGreih M (#23229)	12/21/1960	(949) 113-4030	4/27/2009	($40.00)
unghaV, Jkac C I I (#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 Ubran J]	10/8/1947	(949) 112-9491	4/27/2009	($64.00)
utnProin, 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

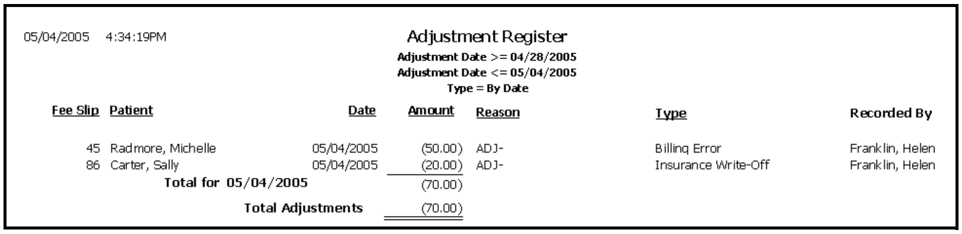
Fee Slip	Line Item Date	Posting Date	Amount	Transaction Type	System Date	Recorded by
21	05/05/2005	04/05/2005	(40.00)	Patient Payment	05/05/2005	Franklin, Helen
	Total Backdated Transactions		(40.00)			

> **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

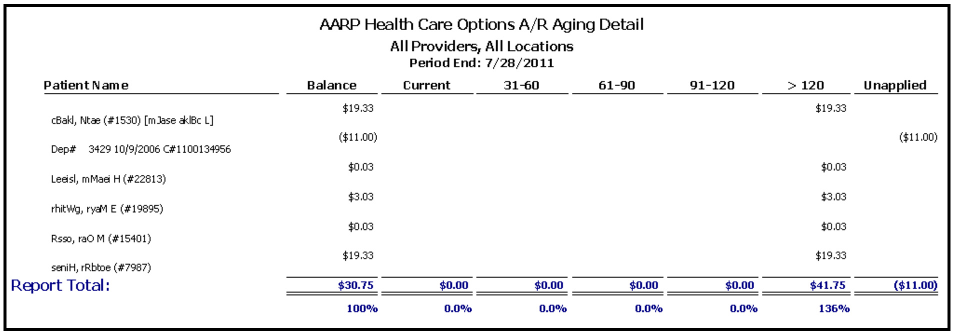
Adjustment Date >= 04/28/2005
Adjustment Date <= 05/04/2005
Type = By Date

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 574.



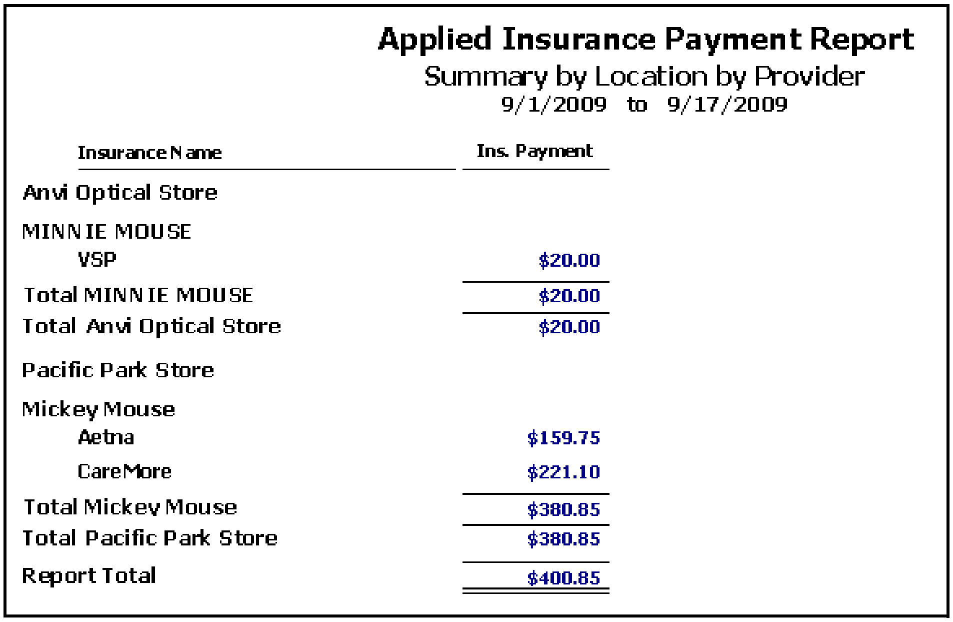
AARP Health Care Options A/R Aging Detail
All Providers, All Locations
Period End: 7/28/2011

Patient Name	Balance	Current	31-60	61-90	91-120	> 120	Unapplied
cBakl, Ntae (#1530) [mJase aklBc L]	$19.33					$19.33	
Dep# 3429 10/9/2006 C#1100134956	($11.00)						($11.00)
Leeisl, mMaei H (#22813)	$0.03					$0.03	
rhitWg, ryaM E (#19895)	$3.03					$3.03	
Rsso, raO M (#15401)	$0.03					$0.03	
seniH, rRbtoe (#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 568.



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

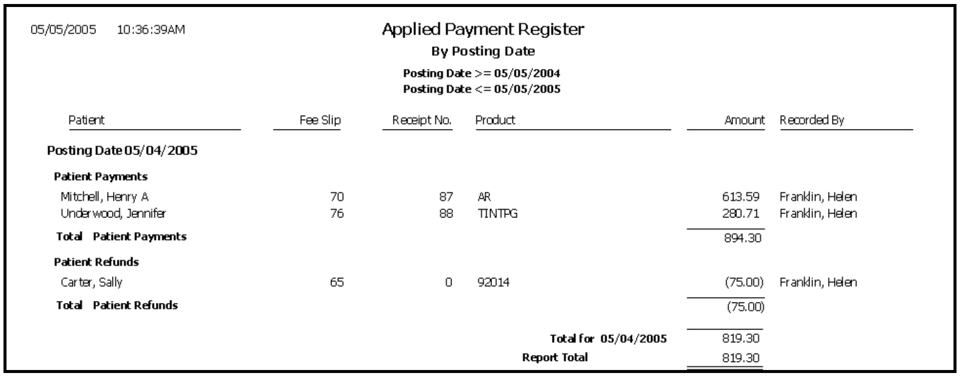
Applied Payment

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 568.

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.

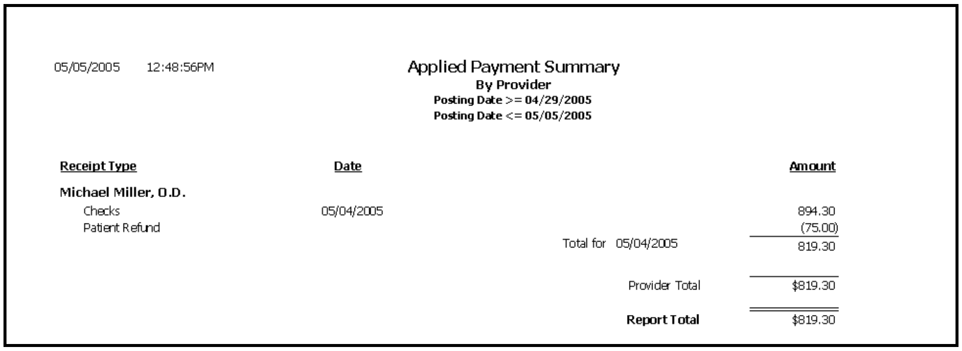


```
05/05/2005    10:36:39AM              Applied Payment Register
                                          By Posting Date
                                    Posting Date >= 05/05/2004
                                    Posting Date <= 05/05/2005

   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                                                      ------
                                                                                 894.30
  Patient Refunds
   Carter, Sally                       65             0  92014                  (75.00)  Franklin, Helen
   Total   Patient Refunds                                                      -------
                                                                                (75.00)
                                                                                 ------
                                                    Total for  05/04/2005        819.30
                                                 Report Total                    819.30
```

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.

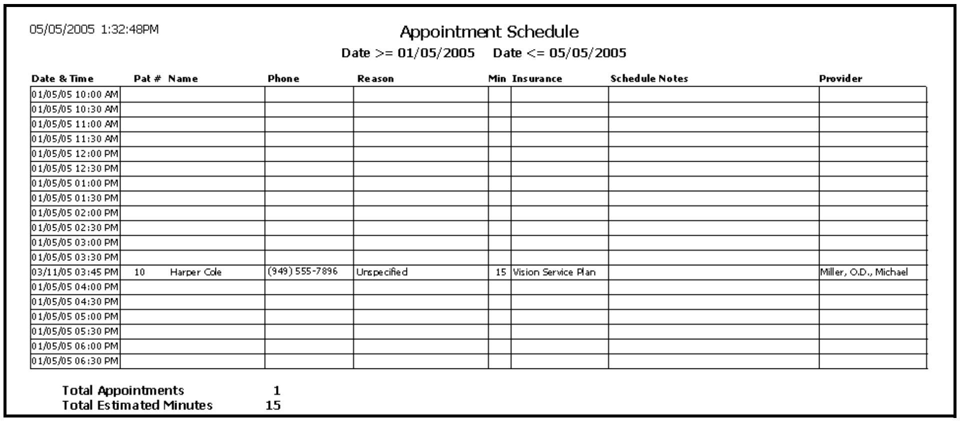


```
05/05/2005     12:48:56PM              Applied Payment Summary
                                             By Provider
                                     Posting Date >= 04/29/2005
                                     Posting Date <= 05/05/2005

Receipt Type                    Date                                              Amount

Michael Miller, O.D.
    Checks                      05/04/2005                                        894.30
    Patient Refund                                                               (75.00)
                                                                                 -------
                                                       Total for   05/04/2005     819.30

                                                                                 -------
                                                            Provider Total       $819.30
                                                                                 =======
                                                              Report Total       $819.30
```

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.



05/05/2005 1:32:48PM

Appointment Schedule

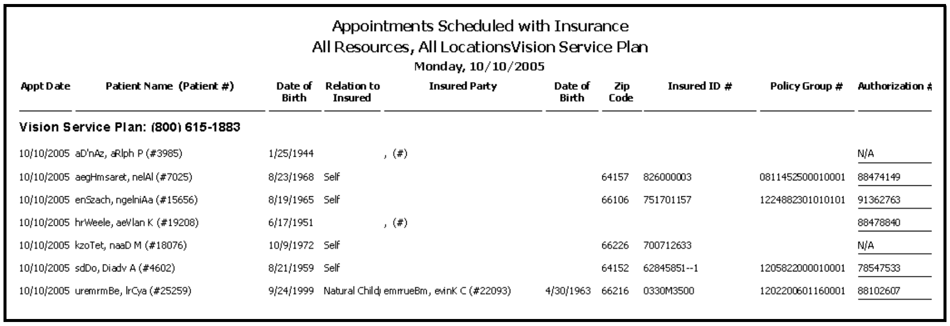
Date >= 01/05/2005 Date <= 05/05/2005

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 Cole	(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 580.



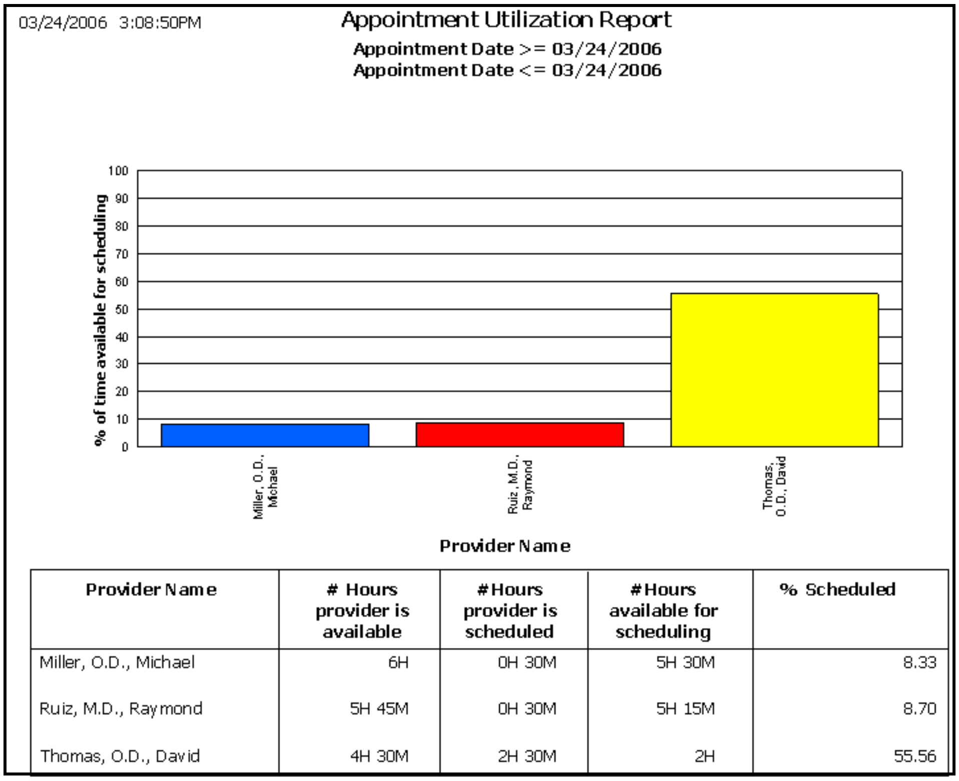
Appointments Scheduled with Insurance
All Resources, All LocationsVision Service Plan
Monday, 10/10/2005

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	aD'nAz, aRlph P (#3985)	1/25/1944		, (#)					N/A
10/10/2005	aegHmsaret, nelAl (#7025)	8/23/1968	Self			64157	826000003	0811452500010001	88474149
10/10/2005	enSzach, ngelniAa (#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, Diadv A (#4602)	8/21/1959	Self			64152	62845851--1	1205822000010001	78547533
10/10/2005	uremrmBe, lrCya (#25259)	9/24/1999	Natural Child	emrueBm, evinK 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.



03/24/2006 3:08:50PM

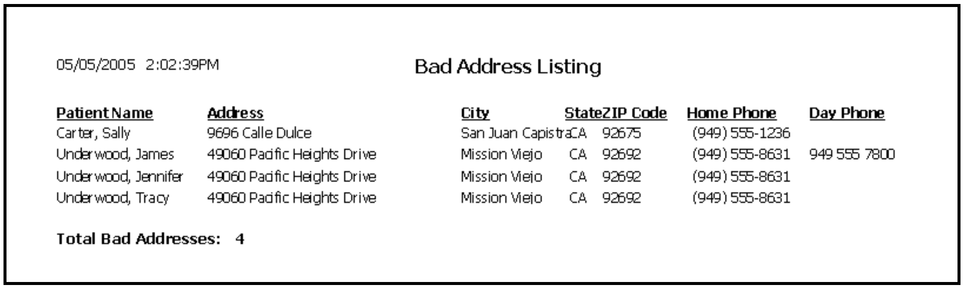
Appointment Utilization Report

Appointment Date >= 03/24/2006
Appointment Date <= 03/24/2006

Provider Name	# Hours provider is available	#Hours provider is scheduled	#Hours available for scheduling	% Scheduled
Miller, O.D., Michael	6H	0H 30M	5H 30M	8.33
Ruiz, M.D., Raymond	5H 45M	0H 30M	5H 15M	8.70
Thomas, O.D., David	4H 30M	2H 30M	2H	55.56

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

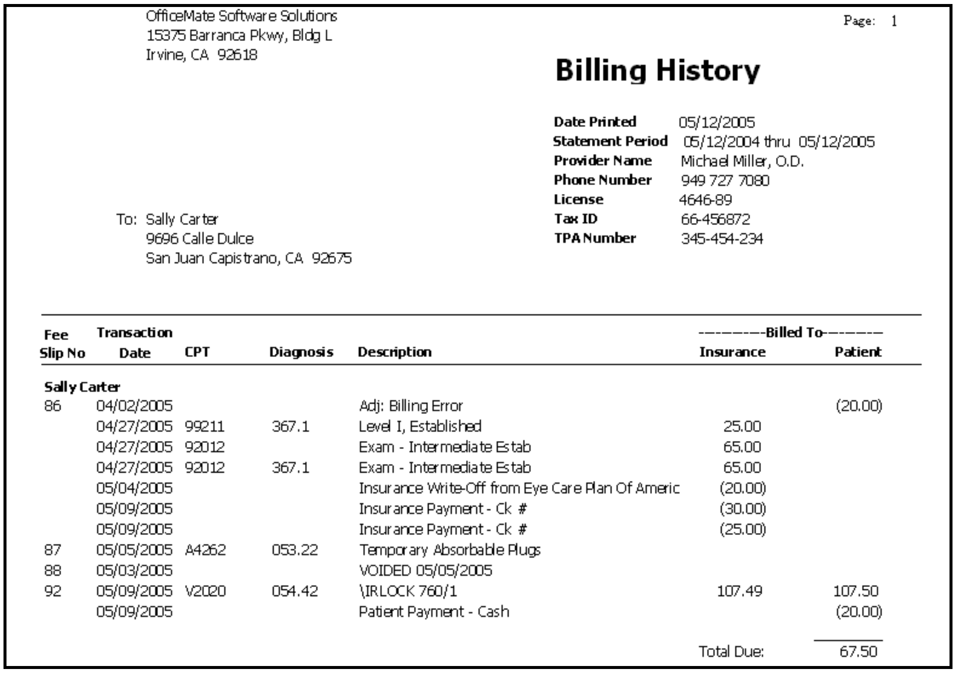
Patient Name	Address	City	State	ZIP Code	Home Phone	Day Phone
Carter, Sally	9696 Calle Dulce	San Juan Capistra	CA	92675	(949) 555-1236	
Underwood, James	49060 Pacific Heights Drive	Mission Viejo	CA	92692	(949) 555-8631	949 555 7800
Underwood, Jennifer	49060 Pacific Heights Drive	Mission Viejo	CA	92692	(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

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

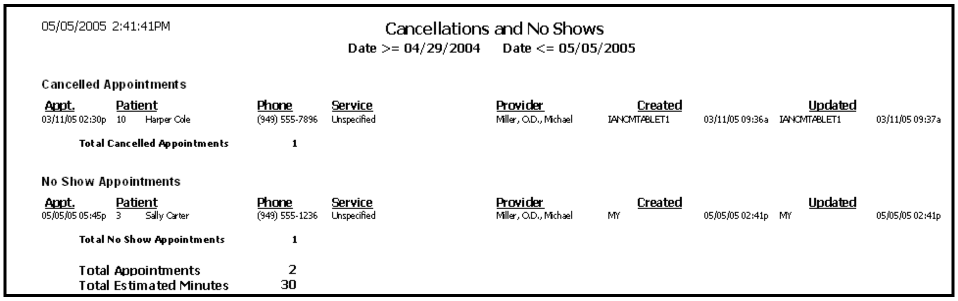
To: Sally Carter
9696 Calle Dulce
San Juan Capistrano, CA 92675

Fee Slip No	**Transaction Date**	**CPT**	**Diagnosis**	**Description**	**---------Billed To--------** **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) 555-7896	Unspecified	Miller, O.D., Michael	IANCMTABLET1	03/11/05 09:36a	IANCMTABLET1	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

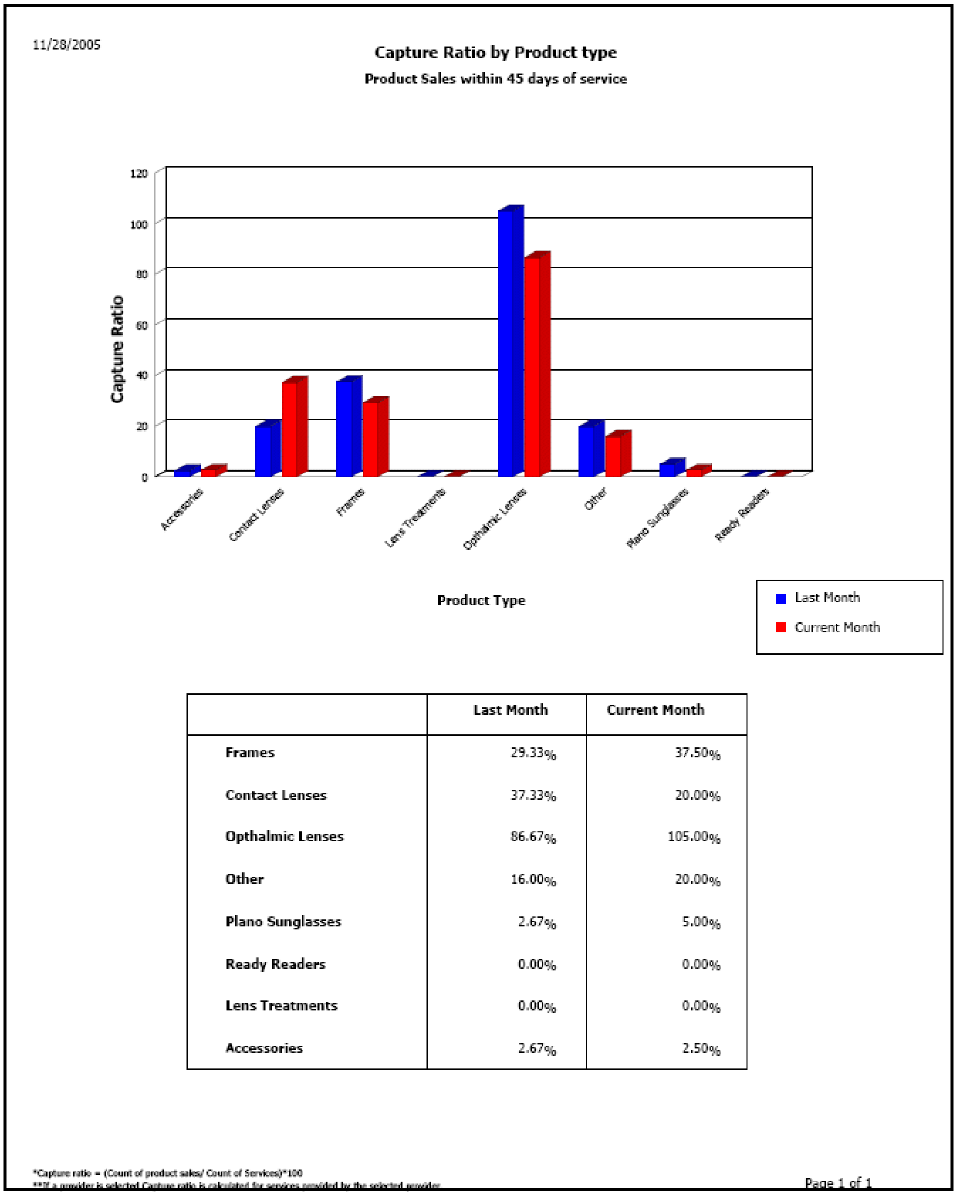
Total No Show Appointments 1

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.


Capture Ratio
0
20
40
60
80
100
120
Accessories
Contact Lenses
Frames
Lens Treatments
Opthalmic Lenses
Other
Plano Sunglasses
Ready Readers
Product Type
Last Month
Current Month

11/28/2005

Capture Ratio by Product type

Product Sales within 45 days of service

	Last Month	Current Month
Frames	29.33%	37.50%
Contact Lenses	37.33%	20.00%
Opthalmic Lenses	86.67%	105.00%
Other	16.00%	20.00%
Plano Sunglasses	2.67%	5.00%
Ready Readers	0.00%	0.00%
Lens Treatments	0.00%	0.00%
Accessories	2.67%	2.50%

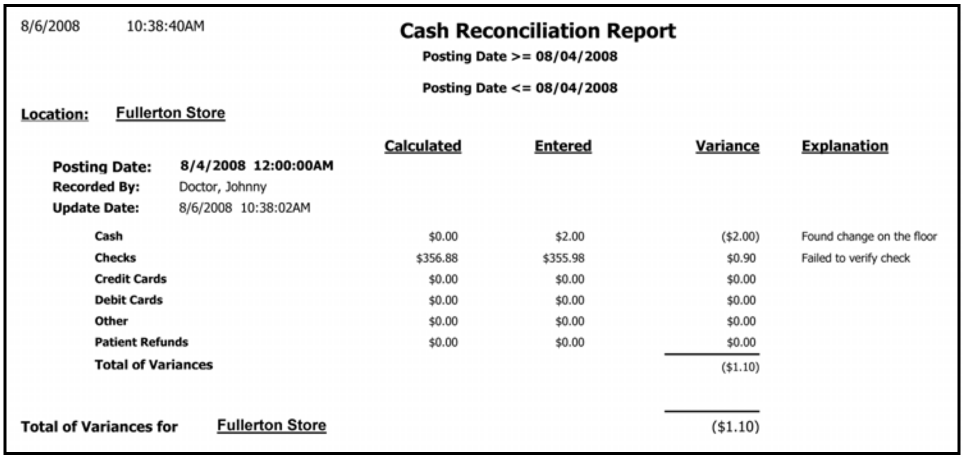
*Capture ratio = (Count of product sales/ Count of Services)*100
**If a provider is selected Capture ratio is calculated for services provided by the selected provider

Page 1 of 1

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.

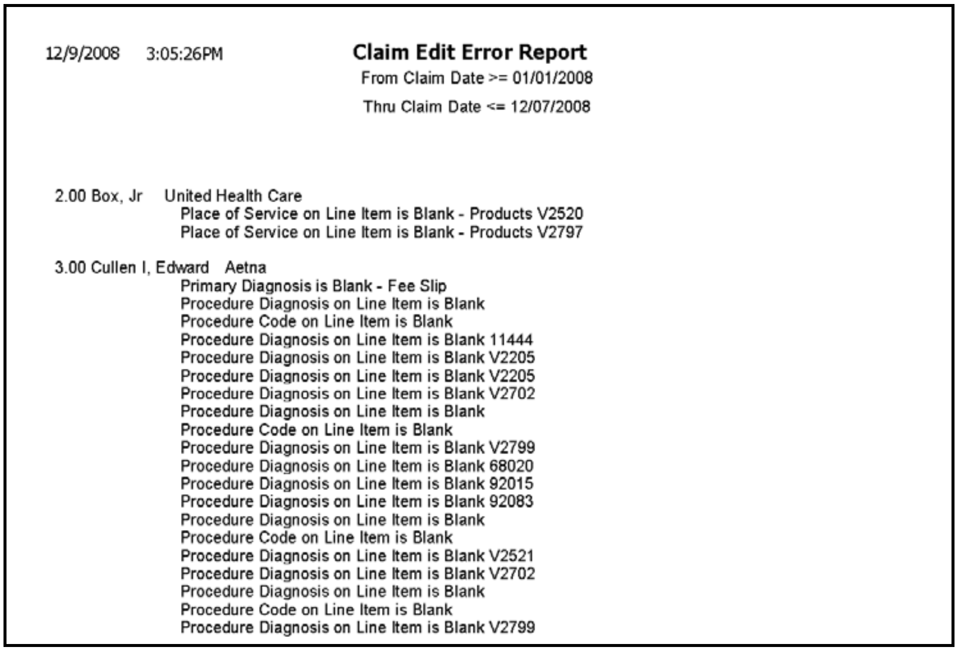


```
8/6/2008     10:38:40AM              Cash Reconciliation Report
                                     Posting Date >= 08/04/2008

                                     Posting Date <= 08/04/2008

Location:    Fullerton Store

                                     Calculated      Entered       Variance     Explanation
  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 568.

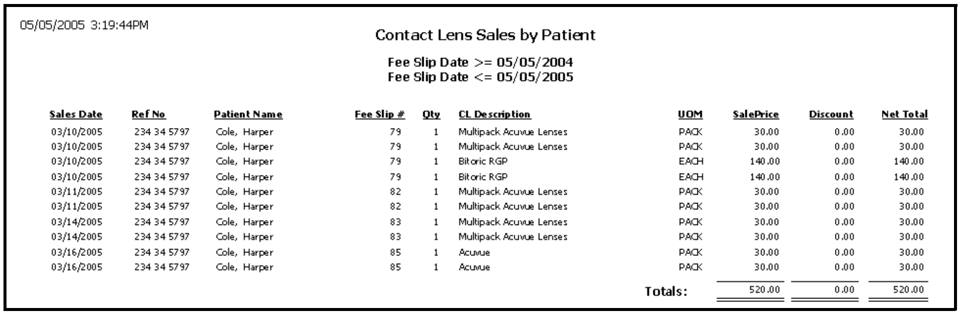
Contact Lens Listing

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 568.

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	Bitoric RGP	EACH	140.00	0.00	140.00
03/10/2005	234 34 5797	Cole, Harper	79	1	Bitoric 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:	520.00	0.00	520.00

Conversion Exception

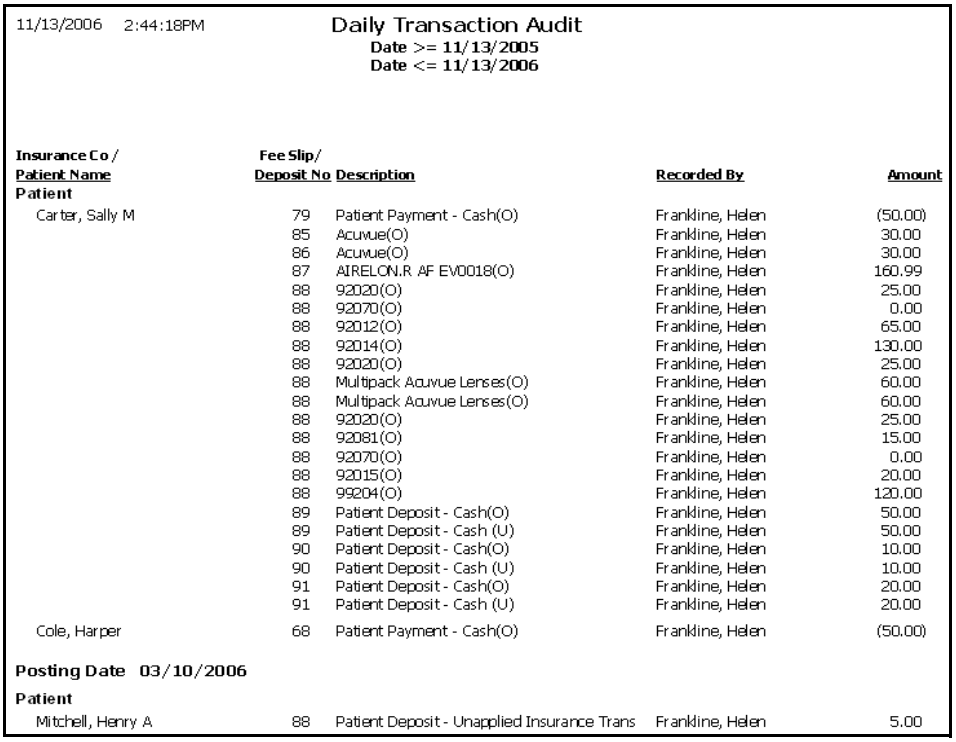
The Conversion Exception report lists posting errors in backdated or changed fee slips. This report displays the actual dates on which items were recorded and the posting dates. Eyefinity suggests creating this report if you are upgrading from version 3.x.

❖ 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.



11/13/2006 2:44:18PM

Daily Transaction Audit

Date >= 11/13/2005
Date <= 11/13/2006

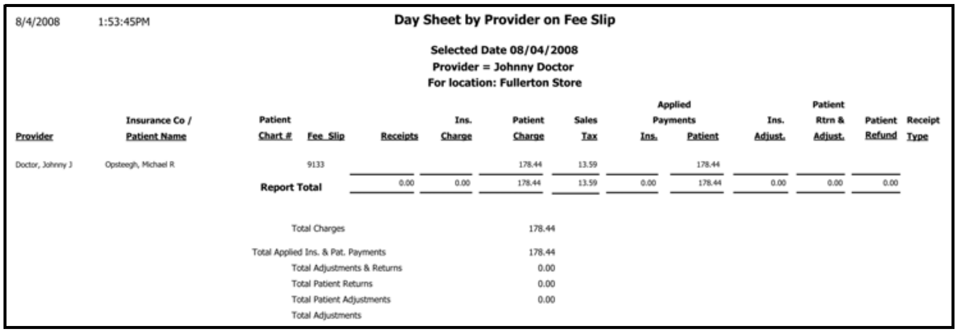
Insurance Co / Patient Name	Fee Slip/ Deposit No	Description	Recorded By	Amount
Patient				
Carter, Sally M	79	Patient Payment - Cash(O)	Frankline, Helen	(50.00)
	85	Acuvue(O)	Frankline, Helen	30.00
	86	Acuvue(O)	Frankline, Helen	30.00
	87	AIRELON.R AF EV0018(O)	Frankline, Helen	160.99
	88	92020(O)	Frankline, 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.



8/4/2008 1:53:45PM

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.	Applied Payments Patient	Ins. Adjust.	Patient Rtrn & Adjust.	Patient Refund	Receipt Type
Doctor, Johnny J	Opsteegh, 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	

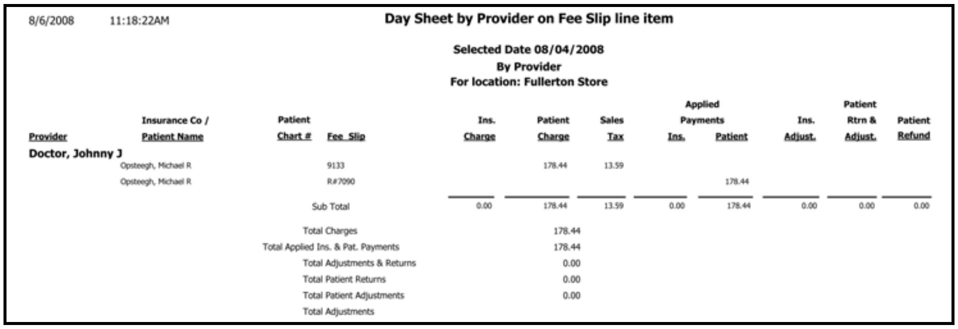
NOTES

- 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.	Applied Payments Patient	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	

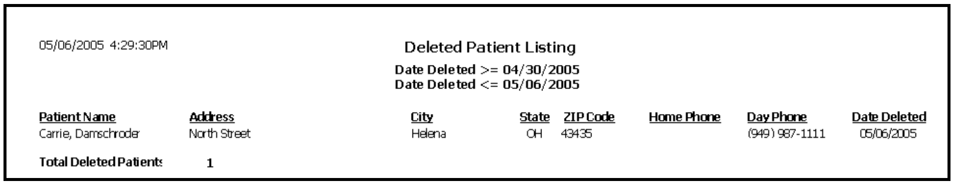
NOTES

- 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

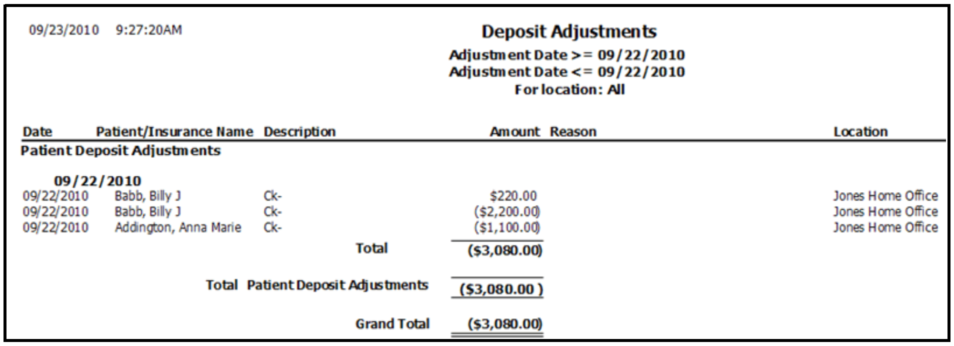
Patient Name	Address	City	State	ZIP Code	Home Phone	Day Phone	Date Deleted
Carrie, Damschroder	North Street	Helena	OH	43435		(949) 987-1111	05/06/2005

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

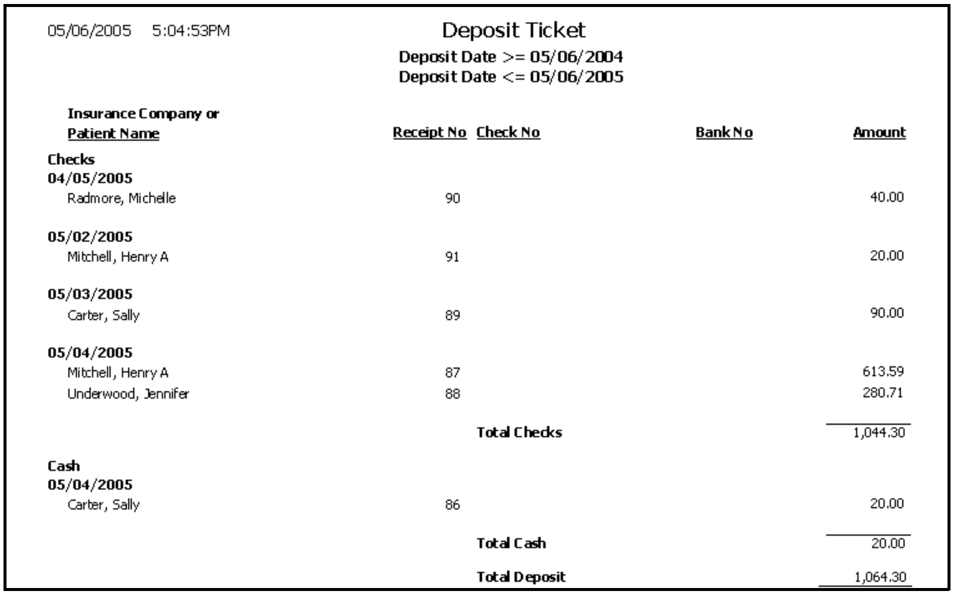
Adjustment Date >= 09/22/2010
Adjustment Date <= 09/22/2010
For location: All

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.



05/06/2005 5:04:53PM

Deposit Ticket

Deposit Date >= 05/06/2004
Deposit Date <= 05/06/2005

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.

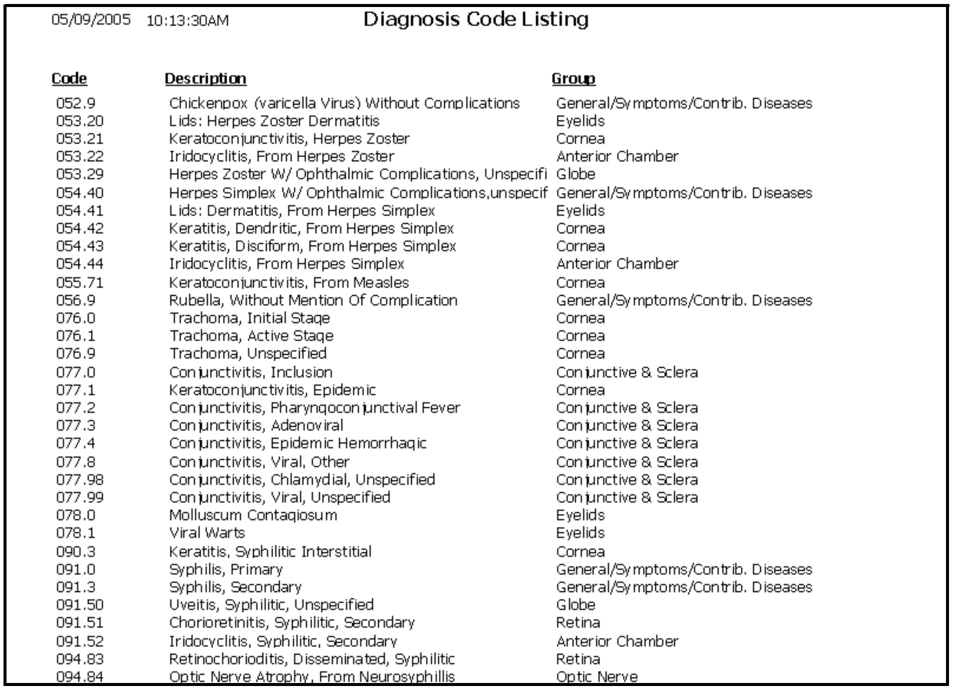
Deposit Ticket Summary with Variance

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.



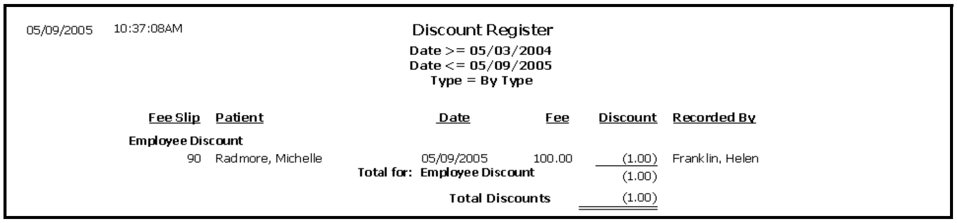
05/09/2005 10:13:30AM Diagnosis Code Listing

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	Retinochorioditis, 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.



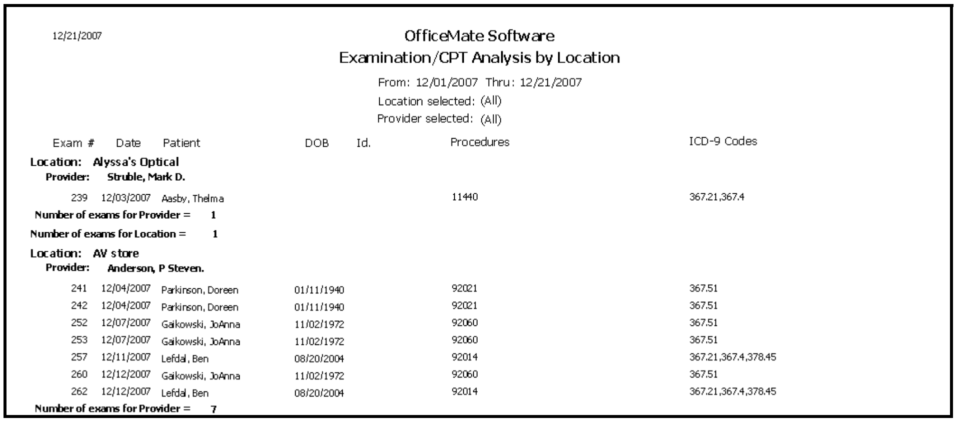
```
05/09/2005    10:37:08AM                         Discount Register
                                                Date >= 05/03/2004
                                                Date <= 05/09/2005
                                                  Type = By Type

                  Fee Slip  Patient                          Date         Fee    Discount   Recorded By
               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 628 for more information.



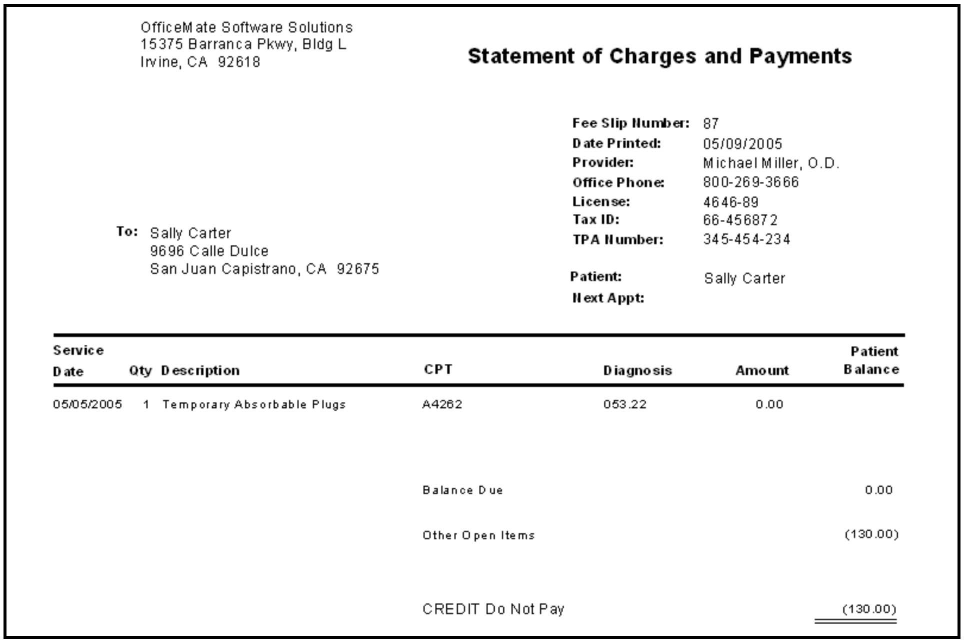
```
   12/21/2007                            OfficeMate Software
                                  Examination/CPT Analysis by Location
                                   From: 12/01/2007  Thru: 12/21/2007
                                   Location selected: (All)
                                   Provider selected: (All)

   Exam #   Date     Patient              DOB    Id.        Procedures              ICD-9 Codes
 Location:  Alyssa's Optical
   Provider:    Struble, Mark D.
      239  12/03/2007  Aasby, Thelma                        11440                   367.21,367.4
  Number of exams for Provider =    1
 Number of exams for Location =     1
 Location:  AV store
   Provider:    Anderson, P Steven.
      241  12/04/2007  Parkinson, Doreen   01/11/1940       92021                   367.51
      242  12/04/2007  Parkinson, Doreen   01/11/1940       92021                   367.51
      252  12/07/2007  Gaikowski, JoAnna   11/02/1972       92060                   367.51
      253  12/07/2007  Gaikowski, JoAnna   11/02/1972       92060                   367.51
      257  12/11/2007  Lefdal, Ben         08/20/2004       92014                   367.21,367.4,378.45
      260  12/12/2007  Gaikowski, JoAnna   11/02/1972       92060                   367.51
      262  12/12/2007  Lefdal, Ben         08/20/2004       92014                   367.21,367.4,378.45
  Number of exams for Provider =    7
```

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

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

To: Sally Carter
9696 Calle Dulce
San Juan Capistrano, CA 92675

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	

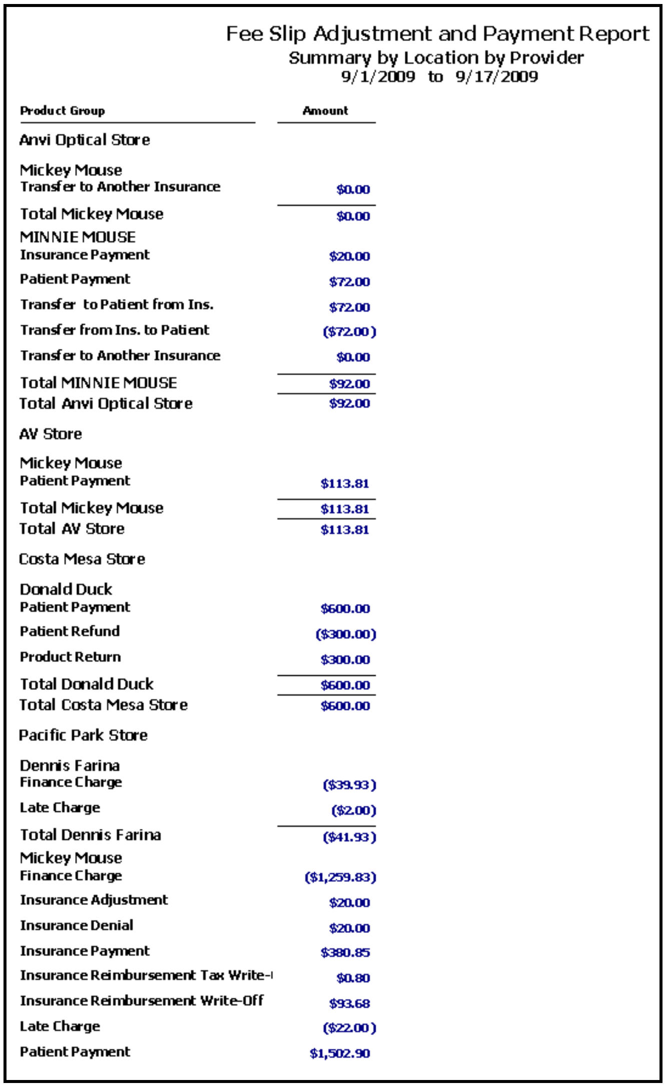
Balance Due 0.00

Other Open Items (130.00)

CREDIT Do Not Pay (130.00)

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 637. To create the Fee Slip Adjustment and Payment report, go to Creating & Printing Custom Reports on page 568.



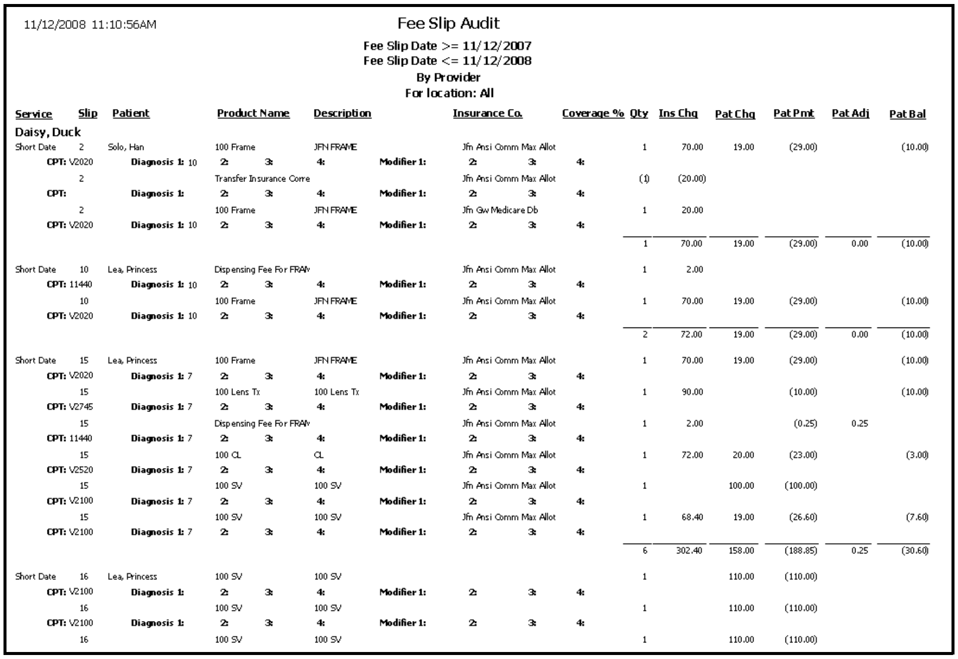
Fee Slip Adjustment and Payment Report
Summary by Location by Provider
9/1/2009 to 9/17/2009

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-	$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.

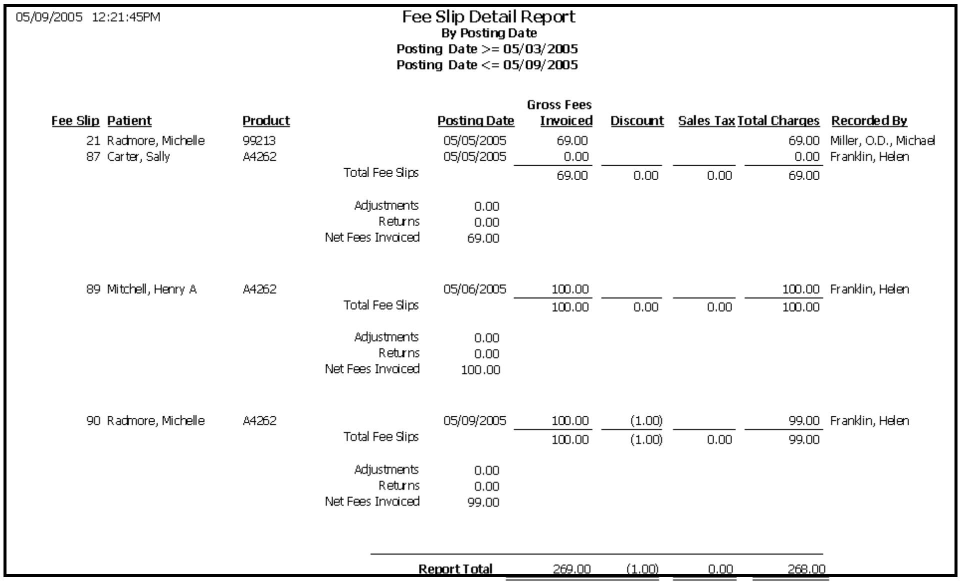


```
11/12/2008 11:10:56AM                                     Fee Slip Audit
                                               Fee Slip Date >= 11/12/2007
                                               Fee Slip Date <= 11/12/2008
                                                       By Provider
                                                    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             JFN FRAME                      Jfn Ansi Comm 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 Comm Max Allot             (1)  (20.00)
      CPT:            Diagnosis 1:      2:     3:      4:          Modifier 1:          2:       3:       4:
            2                    100 Frame             JFN FRAME                      Jfn Gw Medicare Db                   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 FRAM                              Jfn Ansi Comm Max Allot              1     2.00
      CPT: 11440      Diagnosis 1: 10   2:     3:      4:          Modifier 1:          2:       3:       4:
            10                   100 Frame             JFN FRAME                      Jfn Ansi Comm 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             JFN FRAME                      Jfn Ansi Comm 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 Comm 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 FRAM                              Jfn Ansi Comm 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 Comm 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 Comm 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 Comm 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   (30.60)

Short Date  16    Lea, Princess  100 SV                100 SV                                                              1            110.00  (110.00)
      CPT: V2100      Diagnosis 1:      2:     3:      4:          Modifier 1:          2:       3:       4:
            16                   100 SV                100 SV                                                              1            110.00  (110.00)
      CPT: V2100      Diagnosis 1:      2:     3:      4:          Modifier 1:          2:       3:       4:
            16                   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.



```
05/09/2005  12:21:45PM                          Fee Slip Detail Report
                                                   By Posting Date
                                             Posting Date >= 05/03/2005
                                             Posting Date <= 05/09/2005

                                                                         Gross Fees
Fee Slip  Patient             Product                      Posting Date   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
```

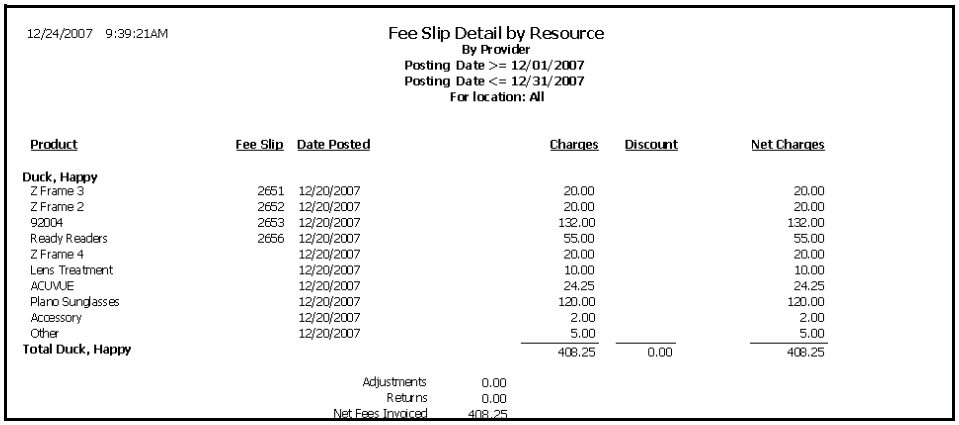
NOTES

- 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

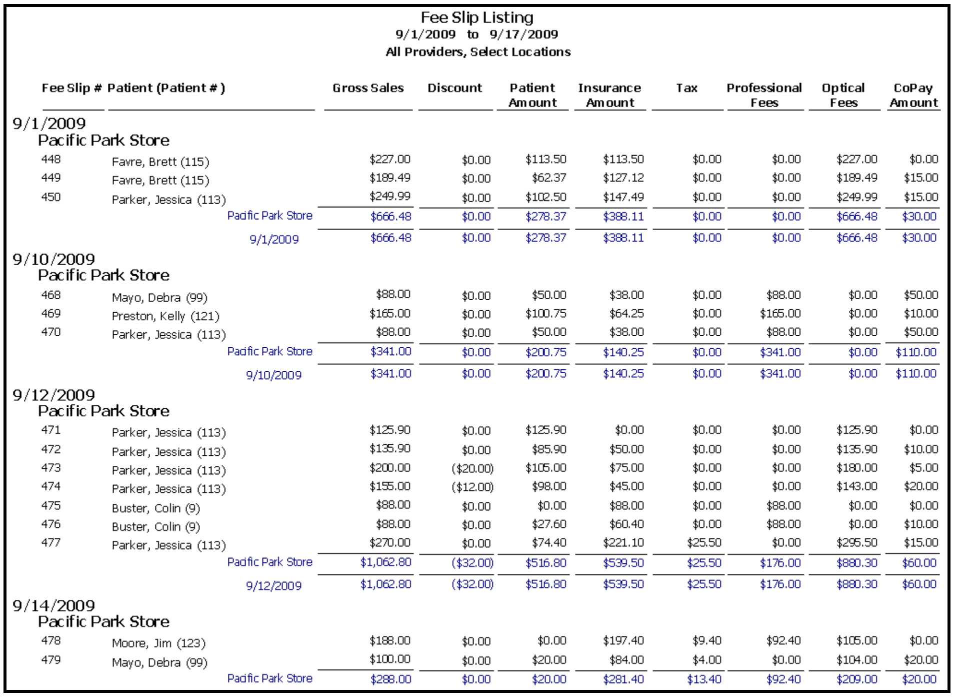
Fee Slip Detail by Resource
By Provider
Posting Date >= 12/01/2007
Posting Date <= 12/31/2007
For location: All

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
Plano Sunglasses		12/20/2007	120.00		120.00
Accessory		12/20/2007	2.00		2.00
Other		12/20/2007	5.00		5.00
Total Duck, Happy			408.25	0.00	408.25

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 568.



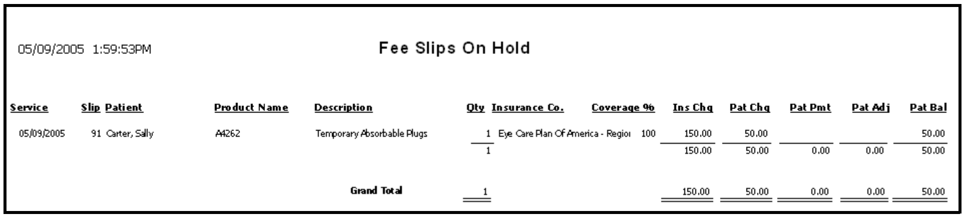
Fee Slip Listing
9/1/2009 to 9/17/2009
All Providers, Select Locations

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

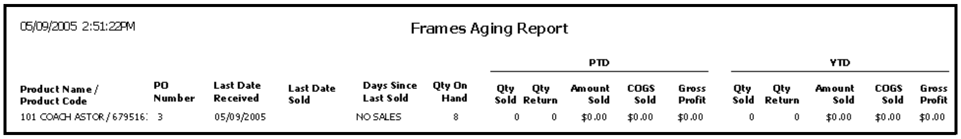
Service	Slip	Patient	Product Name	Description	Qty	Insurance Co.	Coverage %	Ins Chg	Pat Chg	Pat Pmt	Pat Adj	Pat Bal
05/09/2005	91	Carter, Sally	A4262	Temporary Absorbable Plugs	1	Eye Care Plan Of America - Regio	100	150.00	50.00			50.00
					1			150.00	50.00	0.00	0.00	50.00
				Grand Total	1			150.00	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 2:51:22PM

Frames Aging Report

						PTD					YTD				
Product Name / Product Code	PO Number	Last Date Received	Last Date Sold	Days Since Last Sold	Qty On Hand	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

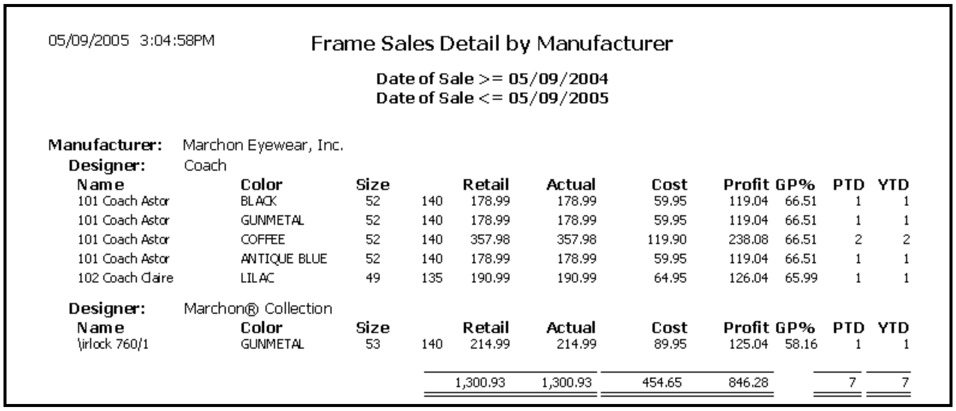
Frame Listing

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 568.

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

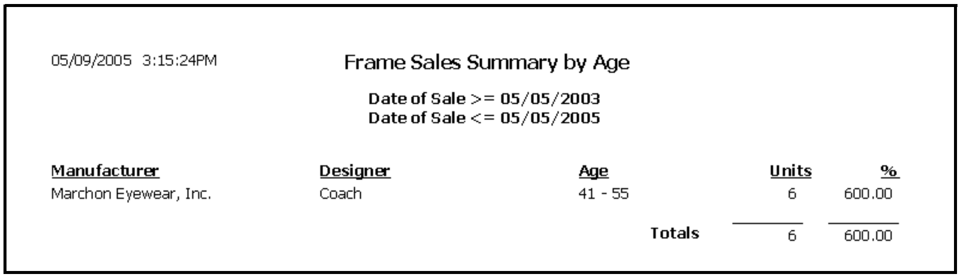
Designer: Marchon® Collection

Name	Color	Size		Retail	Actual	Cost	Profit	GP%	PTD	YTD
\irlock 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

Manufacturer	Designer	Age	Units	%
Marchon Eyewear, Inc.	Coach	41 - 55	6	600.00
		Totals	6	600.00

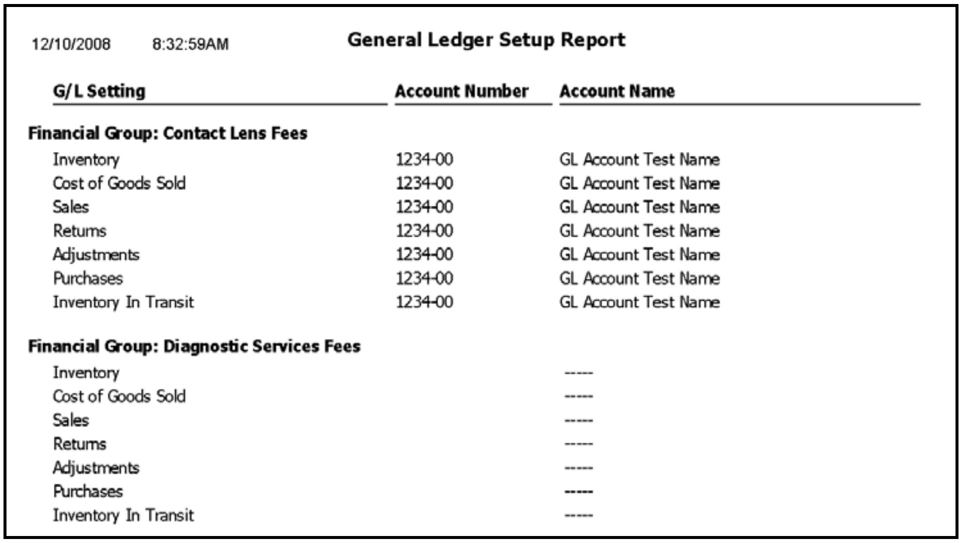
Frame Stock Status

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 606.

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

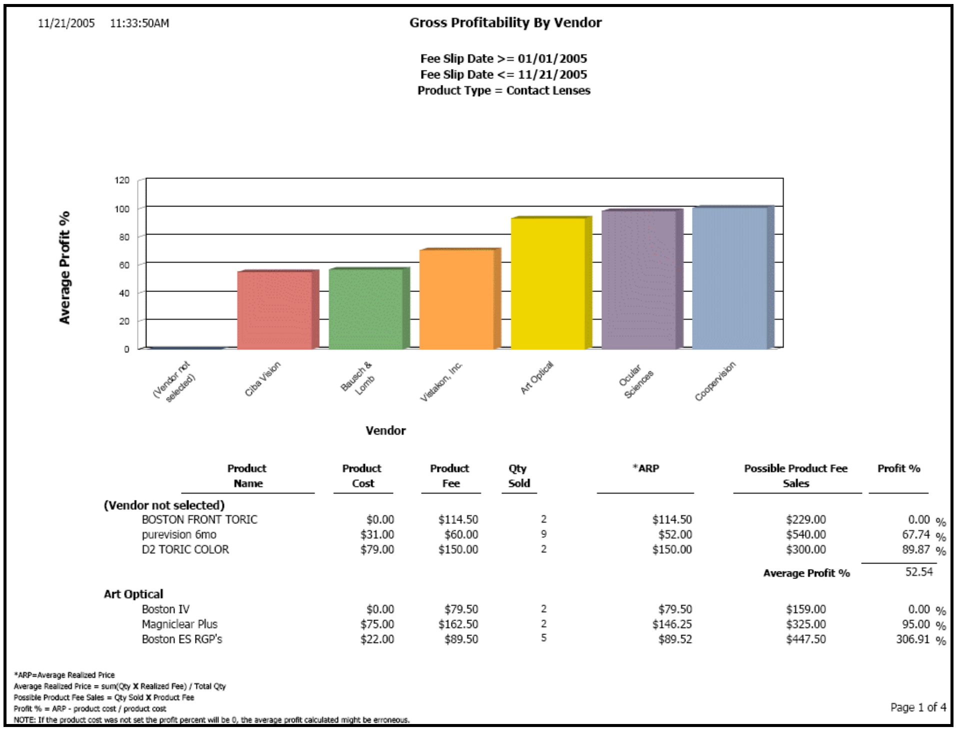
General Ledger Setup Report

G/L Setting	Account Number	Account Name
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.



11/21/2005 11:33:50AM

Gross Profitability By Vendor

Fee Slip Date >= 01/01/2005
Fee Slip Date <= 11/21/2005
Product Type = Contact Lenses

Product Name	Product Cost	Product Fee	Qty Sold	*ARP	Possible Product Fee Sales	Profit %
(Vendor not selected)						
BOSTON FRONT TORIC	$0.00	$114.50	2	$114.50	$229.00	0.00 %
purevision 6mo	$31.00	$60.00	9	$52.00	$540.00	67.74 %
D2 TORIC COLOR	$79.00	$150.00	2	$150.00	$300.00	89.87 %
					Average Profit %	52.54
Art Optical						
Boston IV	$0.00	$79.50	2	$79.50	$159.00	0.00 %
Magniclear Plus	$75.00	$162.50	2	$146.25	$325.00	95.00 %
Boston ES RGP's	$22.00	$89.50	5	$89.52	$447.50	306.91 %

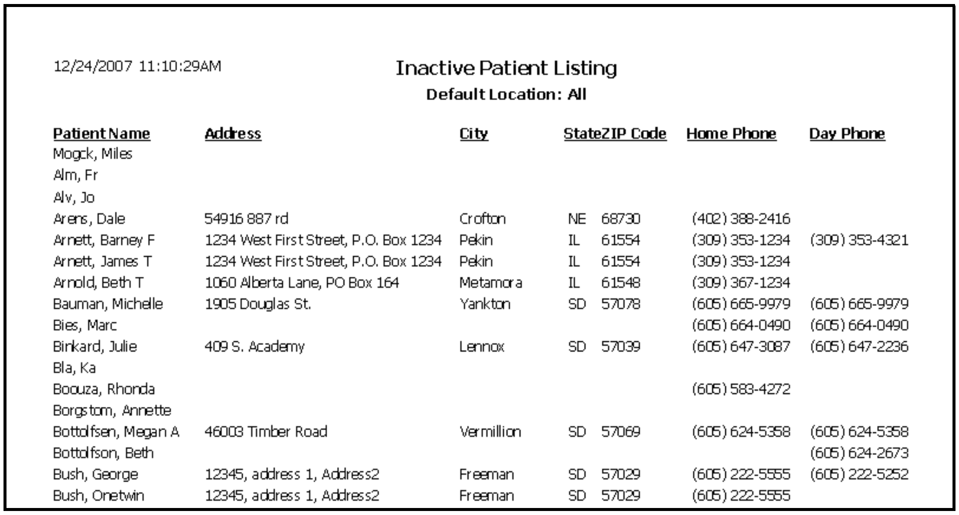
*ARP=Average Realized Price
Average Realized Price = sum(Qty **X** Realized Fee) / Total Qty
Possible Product Fee Sales = Qty Sold **X** Product Fee
Profit % = ARP - product cost / product cost
NOTE: If the product cost was not set the profit percent will be 0, the average profit calculated might be erroneous.

Page 1 of 4

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	StateZIP 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	
Borgstom, Annette					
Bottolfsen, Megan A	46003 Timber Road	Vermillion	SD 57069	(605) 624-5358	(605) 624-5358
Bottolfson, 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 574.

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 574.

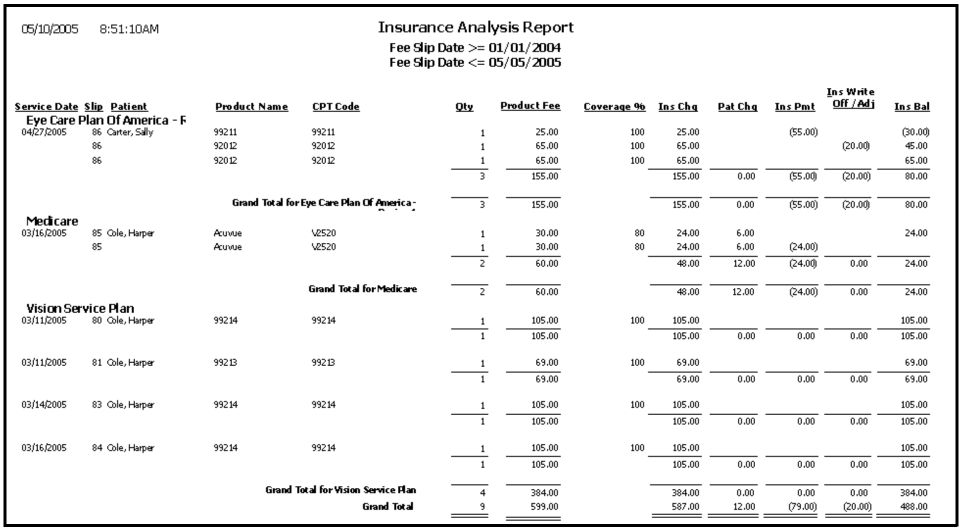
Insurance Aging Summary

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 574.

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

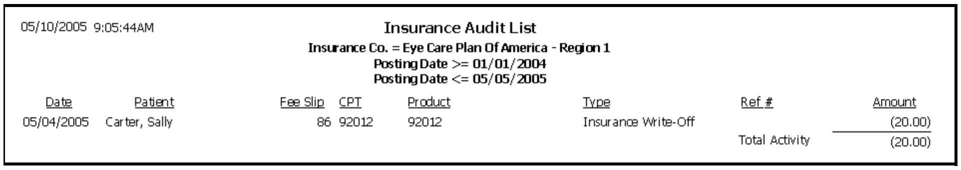
Insurance Analysis Report
Fee Slip Date >= 01/01/2004
Fee Slip Date <= 05/05/2005

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	99211	99211	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		155.00	0.00	(55.00)	(20.00)	80.00
				Grand Total for Eye Care Plan Of America -	3	155.00		155.00	0.00	(55.00)	(20.00)	80.00
Medicare												
03/16/2005	85	Cole, Harper	Acuvue	V2520	1	30.00	80	24.00	6.00			24.00
	85		Acuvue	V2520	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	99214	99214	1	105.00	100	105.00				105.00
					1	105.00		105.00	0.00	0.00	0.00	105.00
03/11/2005	81	Cole, Harper	99213	99213	1	69.00	100	69.00				69.00
					1	69.00		69.00	0.00	0.00	0.00	69.00
03/14/2005	83	Cole, Harper	99214	99214	1	105.00	100	105.00				105.00
					1	105.00		105.00	0.00	0.00	0.00	105.00
03/16/2005	84	Cole, Harper	99214	99214	1	105.00	100	105.00				105.00
					1	105.00		105.00	0.00	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

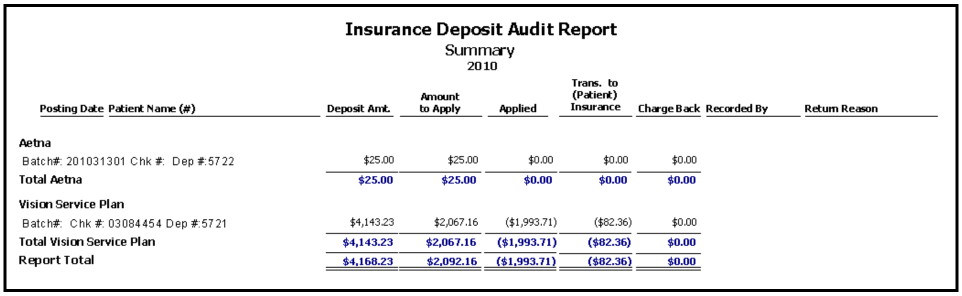
Date	Patient	Fee Slip	CPT	Product	Type	Ref #	Amount
05/04/2005	Carter, Sally	86	92012	92012	Insurance Write-Off		(20.00)
						Total Activity	(20.00)

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 600.

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 580.



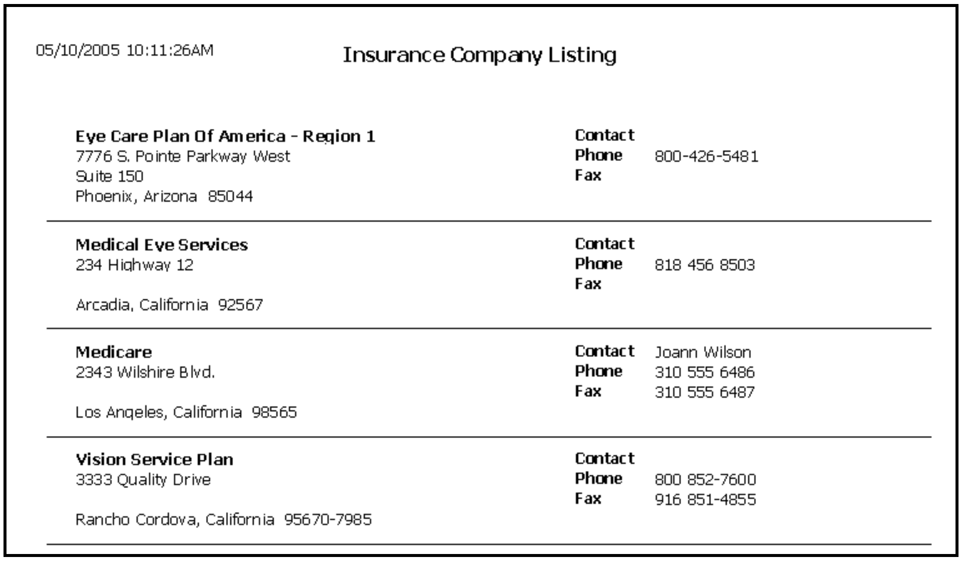
Insurance Deposit Audit Report
Summary
2010

Posting Date	Patient Name (#)	Deposit Amt.	Amount to Apply	Applied	Trans. to (Patient) Insurance	Charge Back	Recorded By	Return Reason
Aetna								
Batch#: 201031301 Chk #: Dep #:5722		$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 #:5721		$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
7776 S. Pointe Parkway West
Suite 150
Phoenix, Arizona 85044

Contact
Phone 800-426-5481
Fax

Medical Eye Services
234 Highway 12

Arcadia, California 92567

Contact
Phone 818 456 8503
Fax

Medicare
2343 Wilshire Blvd.

Los Angeles, California 98565

Contact Joann Wilson
Phone 310 555 6486
Fax 310 555 6487

Vision Service Plan
3333 Quality Drive

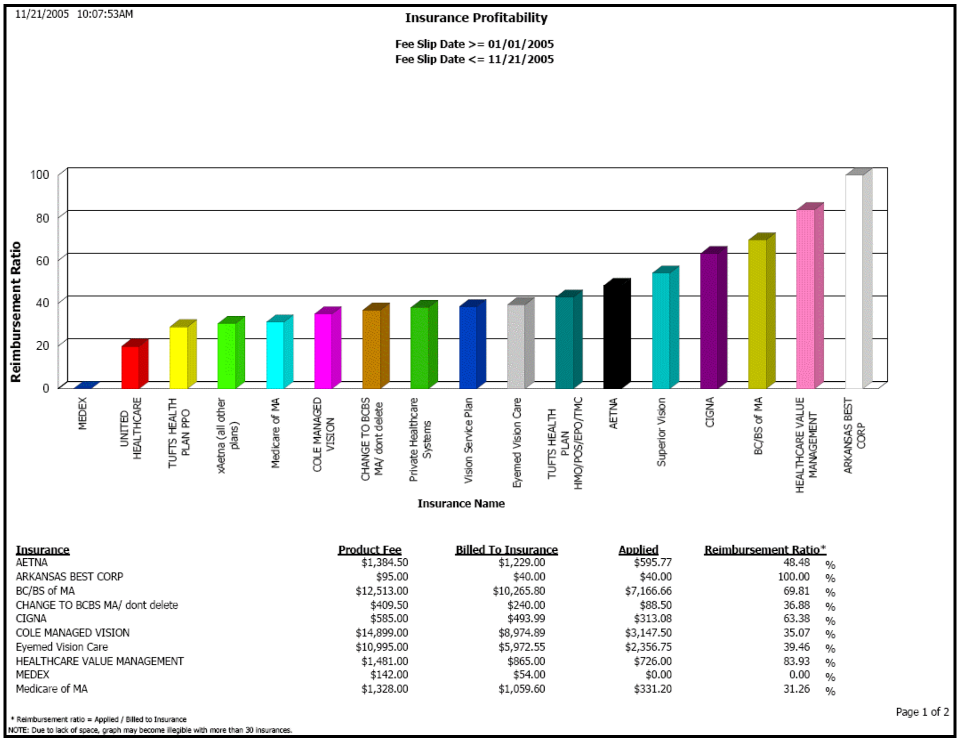
Rancho Cordova, California 95670-7985

Contact
Phone 800 852-7600
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.



11/21/2005 10:07:53AM

Insurance Profitability

Fee Slip Date >= 01/01/2005
Fee Slip Date <= 11/21/2005

Reimbursement Ratio
100
80
60
40
20
0
MEDEX
UNITED HEALTHCARE
TUFTS HEALTH PLAN PPO
xAetna (all other plans)
Medicare of MA
COLE MANAGED VISION
CHANGE TO BCBS MA/ dont delete
Private Healthcare Systems
Vision Service Plan
Eyemed Vision Care
TUFTS HEALTH PLAN HMO/POS/EPO/TMC
AETNA
Superior Vision
CIGNA
BC/BS of MA
HEALTHCARE VALUE MANAGEMENT
ARKANSAS BEST CORP
Insurance Name

Insurance	Product Fee	Billed To Insurance	Applied	Reimbursement Ratio*	
AETNA	$1,384.50	$1,229.00	$595.77	48.48	%
ARKANSAS BEST CORP	$95.00	$40.00	$40.00	100.00	%
BC/BS of MA	$12,513.00	$10,265.80	$7,166.66	69.81	%
CHANGE TO BCBS MA/ dont delete	$409.50	$240.00	$88.50	36.88	%
CIGNA	$585.00	$493.99	$313.08	63.38	%
COLE MANAGED VISION	$14,899.00	$8,974.89	$3,147.50	35.07	%
Eyemed Vision Care	$10,995.00	$5,972.55	$2,356.75	39.46	%
HEALTHCARE VALUE MANAGEMENT	$1,481.00	$865.00	$726.00	83.93	%
MEDEX	$142.00	$54.00	$0.00	0.00	%
Medicare of MA	$1,328.00	$1,059.60	$331.20	31.26	%

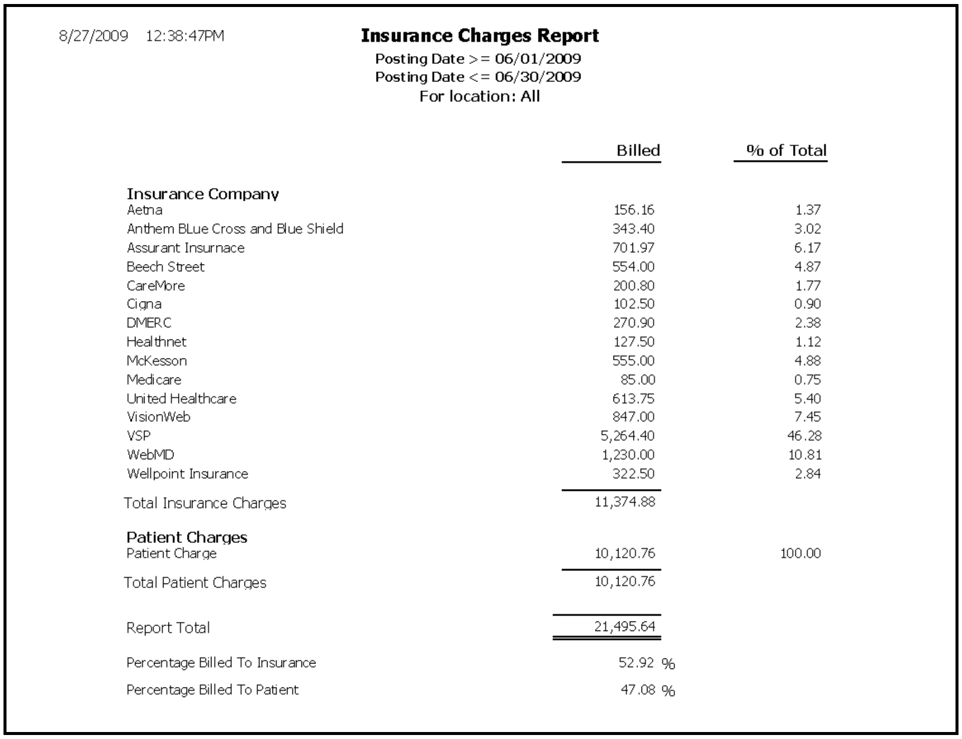
Page 1 of 2

* Reimbursement ratio = Applied / Billed to Insurance
NOTE: Due to lack of space, graph may become illegible with more than 30 insurances.

Insurance Charges

The Insurance Charges report lists the amounts billed to insurance companies and patients. Eyefinity suggests creating this report on demand.

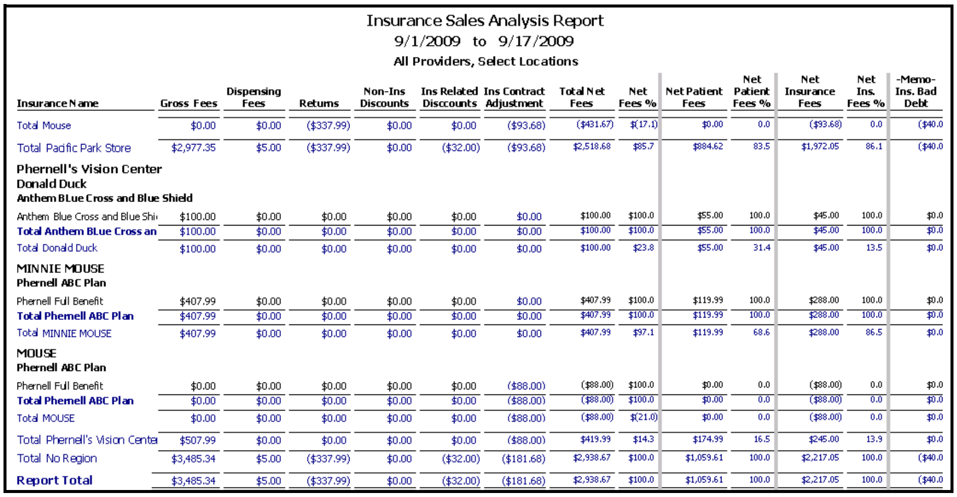
❖ To create the Insurance Charges report, set the posting date parameters.



```
8/27/2009    12:38:47PM              Insurance Charges Report
                                    Posting Date >= 06/01/2009
                                    Posting Date <= 06/30/2009
                                       For location: All

                                                       Billed        % of Total

Insurance Company
Aetna                                                  156.16             1.37
Anthem BLue Cross and Blue Shield                      343.40             3.02
Assurant Insurnace                                     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                             11,374.88

Patient Charges
Patient Charge                                      10,120.76           100.00
Total Patient Charges                               10,120.76

Report Total                                        21,495.64

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 568.



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 Disccounts	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)	($431.67)	$(17.1)	$0.00	0.0	($93.68)	0.0	($40.0
Total Pacific Park Store	$2,977.35	$5.00	($337.99)	$0.00	($32.00)	($93.68)	$2,518.68	$85.7	$884.62	83.5	$1,972.05	86.1	($40.0
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	$0.0
Total Anthem BLue Cross an	$100.00	$0.00	$0.00	$0.00	$0.00	$0.00	$100.00	$100.0	$55.00	100.0	$45.00	100.0	$0.0
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	$0.0
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	$0.0
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	$0.0
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	$0.0
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	$0.0
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	$0.0
Total MOUSE	$0.00	$0.00	$0.00	$0.00	$0.00	($88.00)	($88.00)	$(21.0)	$0.00	0.0	($88.00)	0.0	$0.0
Total Phernell's Vision Cente	$507.99	$0.00	$0.00	$0.00	$0.00	($88.00)	$419.99	$14.3	$174.99	16.5	$245.00	13.9	$0.0
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	($40.0
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	($40.0

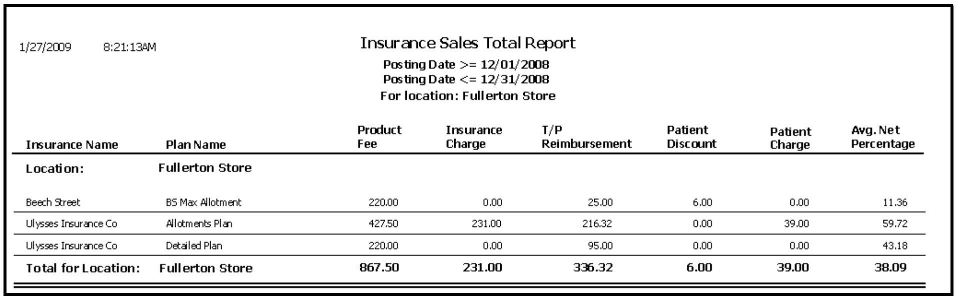
NOTES

- 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 toe 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

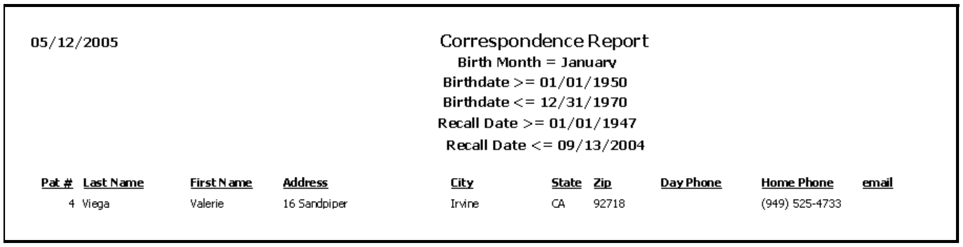
Insurance Name	Plan Name	Product Fee	Insurance Charge	T/P Reimbursement	Patient Discount	Patient Charge	Avg. Net Percentage
Location:	**Fullerton Store**						
Beech Street	BS Max Allotment	220.00	0.00	25.00	6.00	0.00	11.36
Ulysses Insurance Co	Allotments Plan	427.50	231.00	216.32	0.00	39.00	59.72
Ulysses 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

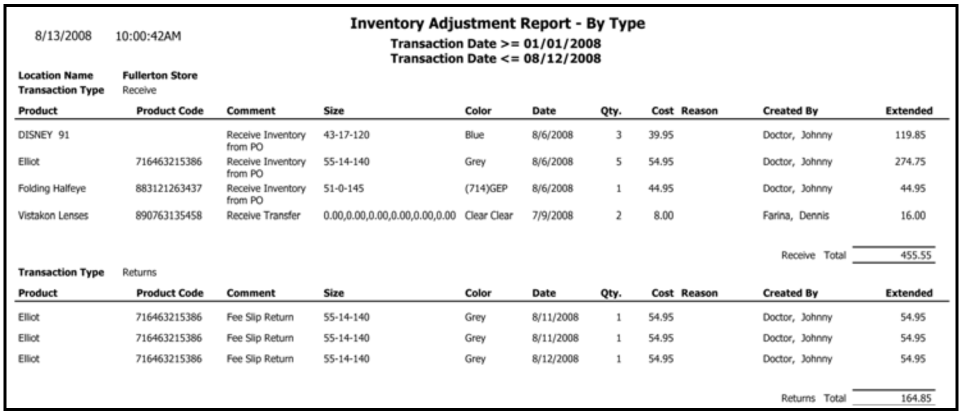
Correspondence Report
Birth Month = January
Birthdate >= 01/01/1950
Birthdate <= 12/31/1970
Recall Date >= 01/01/1947
Recall Date <= 09/13/2004

Pat #	Last Name	First Name	Address	City	State	Zip	Day Phone	Home Phone	email
4	Viega	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.



8/13/2008 10:00:42AM

Inventory Adjustment Report - By Type

Transaction Date >= 01/01/2008
Transaction Date <= 08/12/2008

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	0.00,0.00,0.00,0.00,0.00,0.00	Clear Clear	7/9/2008	2	8.00		Farina, Dennis	16.00
									Receive Total	455.55

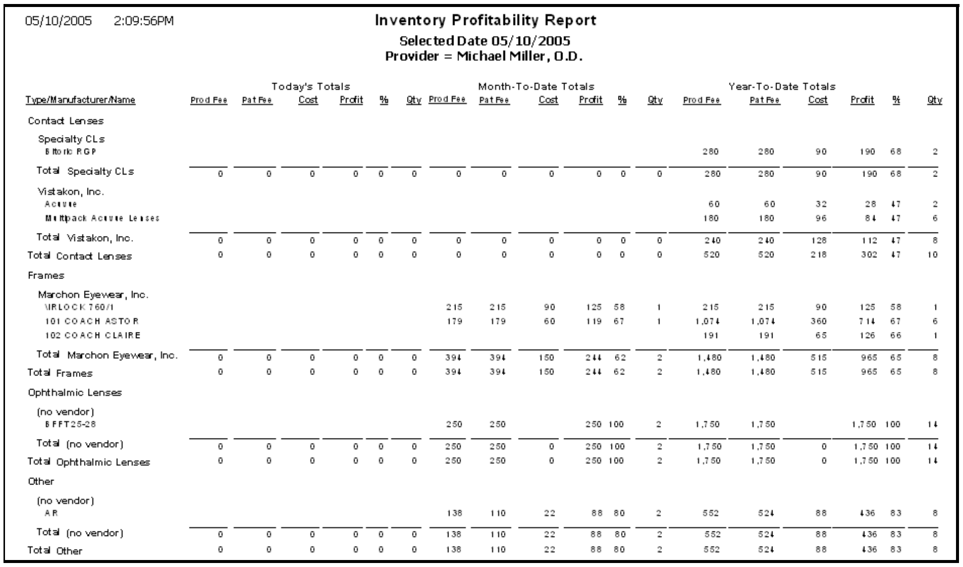
Transaction Type Returns

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.



05/10/2005 2:09:56PM

Inventory Profitability Report

Selected Date 05/10/2005
Provider = Michael Miller, O.D.

	Today's Totals						Month-To-Date Totals						Year-To-Date Totals					
Type/Manufacturer/Name	Prod Fee	Pat Fee	Cost	Profit	%	Qty	Prod Fee	Pat Fee	Cost	Profit	%	Qty	Prod Fee	Pat Fee	Cost	Profit	%	Qty
Contact Lenses																		
Specialty CLs																		
Bitoric RGP													280	280	90	190	68	2
Total Specialty CLs	0	0	0	0	0	0	0	0	0	0	0	0	280	280	90	190	68	2
Vistakon, Inc.																		
Acuvue													60	60	32	28	47	2
Multipack Acuvue 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.																		
AIRLOCK 760/1							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)																		
BFFT25-28							250	250		250	100	2	1,750	1,750		1,750	100	14
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)																		
AR							138	110	22	88	80	2	552	524	88	436	83	8
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

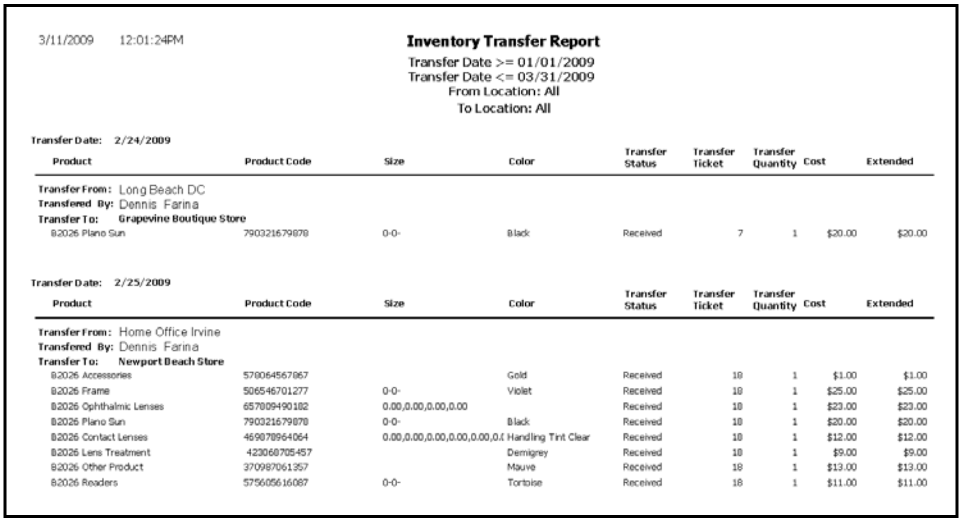
NOTES

- 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

Transfer From: Long Beach DC
Transfered By: Dennis Farina
Transfer To: **Grapevine Boutique Store**

Product	Product Code	Size	Color	Transfer Status	Transfer Ticket	Transfer Quantity	Cost	Extended
B2026 Plano Sun	790321679878	0-0-	Black	Received	7	1	$20.00	$20.00

Transfer Date: 2/25/2009

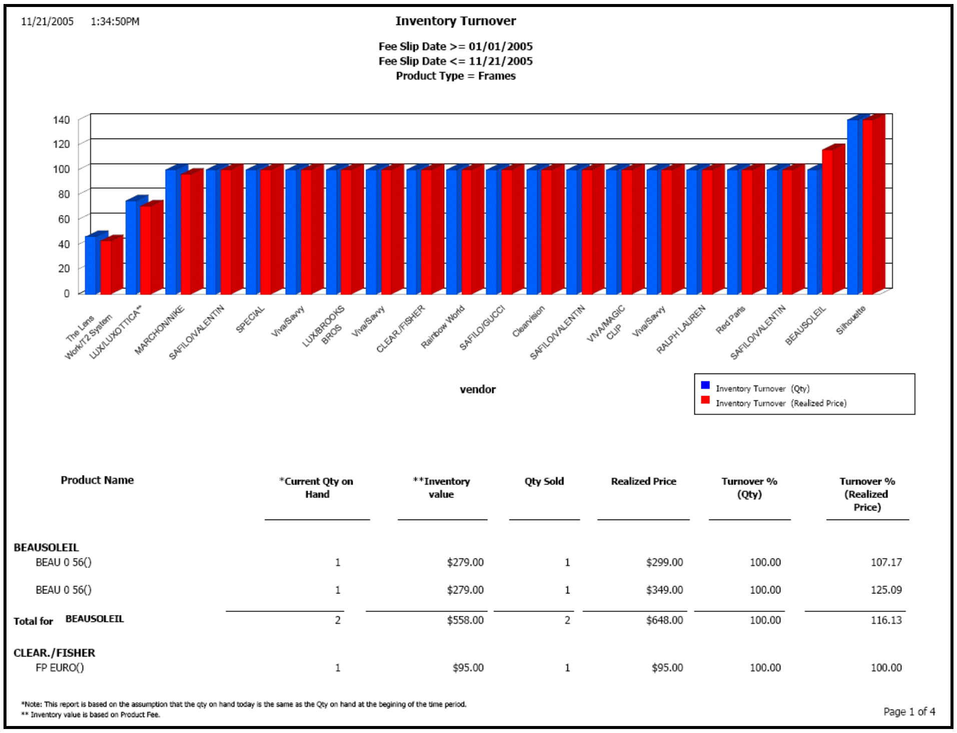
Transfer From: Home Office Irvine
Transfered By: Dennis Farina
Transfer To: **Newport Beach Store**

Product	Product Code	Size	Color	Transfer Status	Transfer Ticket	Transfer Quantity	Cost	Extended
B2026 Accessories	578064567867		Gold	Received	18	1	$1.00	$1.00
B2026 Frame	506546701277	0-0-	Violet	Received	18	1	$25.00	$25.00
B2026 Ophthalmic Lenses	657009490182	0.00,0.00,0.00,0.00		Received	18	1	$23.00	$23.00
B2026 Plano Sun	790321679878	0-0-	Black	Received	18	1	$20.00	$20.00
B2026 Contact Lenses	469878964064	0.00,0.00,0.00,0.00,0.00,0.(	Handling Tint Clear	Received	18	1	$12.00	$12.00
B2026 Lens Treatment	423068705457		Demigrey	Received	18	1	$9.00	$9.00
B2026 Other Product	370987061357		Mauve	Received	18	1	$13.00	$13.00
B2026 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.



11/21/2005 1:34:50PM

Inventory Turnover

Fee Slip Date >= 01/01/2005
Fee Slip Date <= 11/21/2005
Product Type = Frames

140
120
100
80
60
40
20
0
The Lens Work/T2 System
LUX/LUXOTTICA**
MARCHON/NIKE
SAFILO/VALENTIN
SPECIAL
Viva/Savvy
LUX/BROOKS BROS
Viva/Savvy
CLEAR./FISHER
Rainbow World
SAFILO/GUCCI
Clearvision
SAFILO/VALENTIN
VIVA/MAGIC CLIP
Viva/Savvy
RALPH LAUREN
Red Paris
SAFILO/VALENTIN
BEAUSOLEIL
Silhouette
vendor
Inventory Turnover (Qty)
Inventory Turnover (Realized Price)

Product Name	*Current Qty on Hand	**Inventory value	Qty Sold	Realized Price	Turnover % (Qty)	Turnover % (Realized Price)
BEAUSOLEIL						
BEAU 0 56()	1	$279.00	1	$299.00	100.00	107.17
BEAU 0 56()	1	$279.00	1	$349.00	100.00	125.09
Total for BEAUSOLEIL	2	$558.00	2	$648.00	100.00	116.13
CLEAR./FISHER						
FP EURO()	1	$95.00	1	$95.00	100.00	100.00

*Note: This report is based on the assumption that the qty on hand today is the same as the Qty on hand at the begining of the time period.
** Inventory value is based on Product Fee.

Page 1 of 4

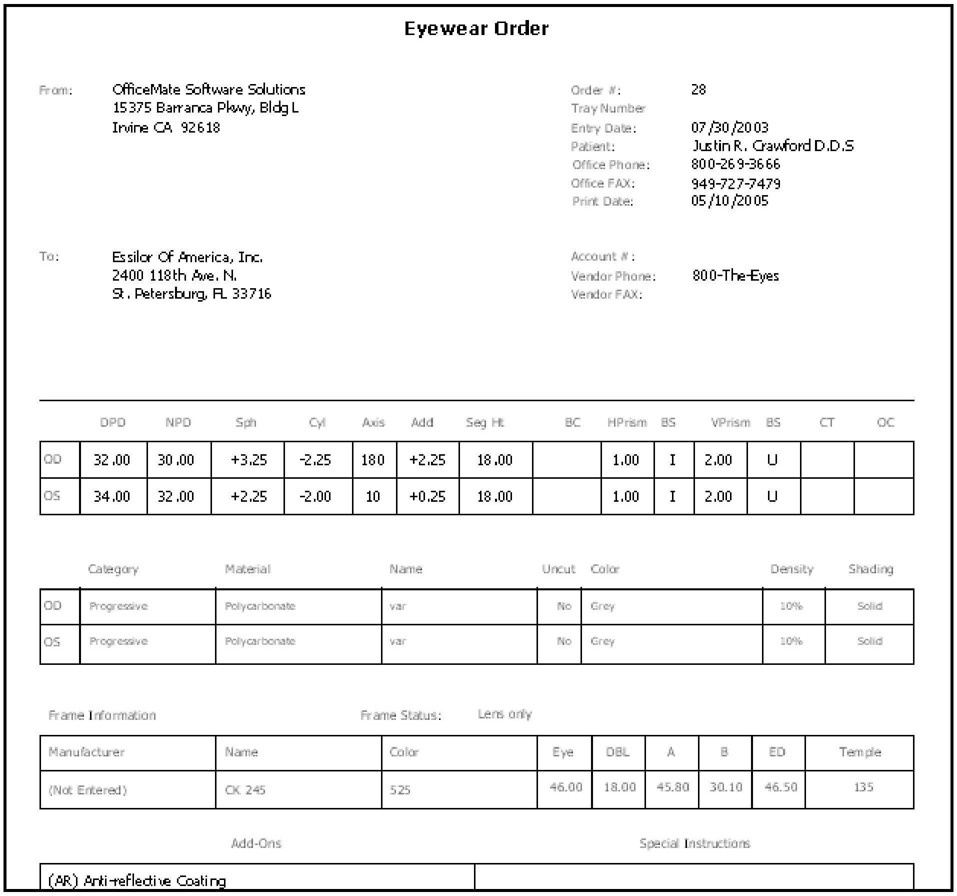
Inventory Valuation

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 606.

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 #:
Vendor Phone: 800-The-Eyes
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	

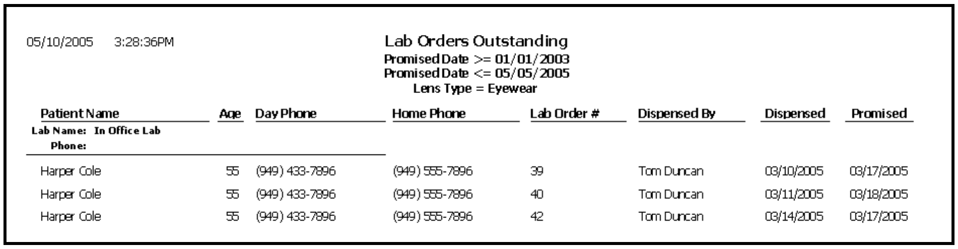
Lab Orders Outstanding

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

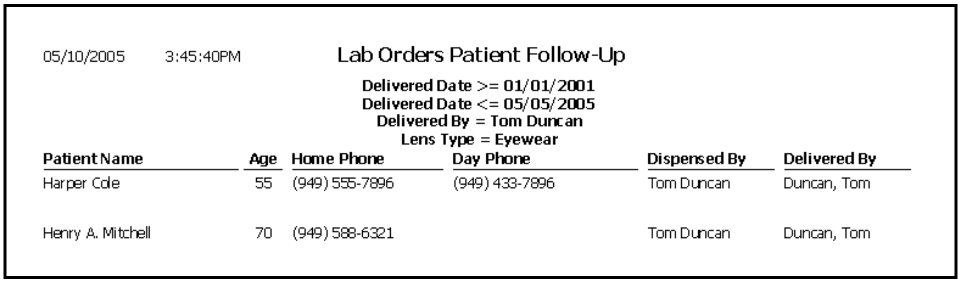
Patient Name	Age	Day Phone	Home Phone	Lab Order #	Dispensed By	Dispensed	Promised
Lab Name: In Office Lab **Phone:**							
Harper Cole	55	(949) 433-7896	(949) 555-7896	39	Tom Duncan	03/10/2005	03/17/2005
Harper Cole	55	(949) 433-7896	(949) 555-7896	40	Tom Duncan	03/11/2005	03/18/2005
Harper Cole	55	(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

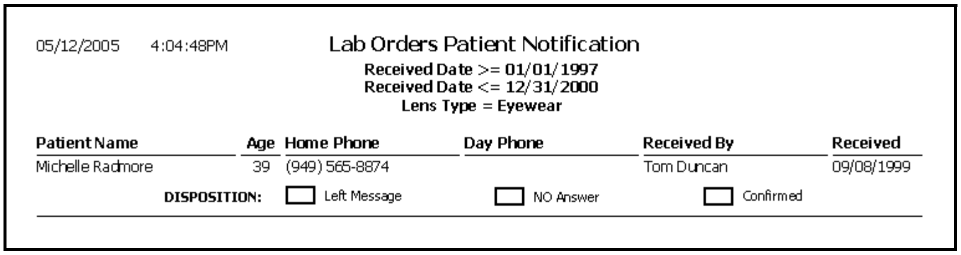
Patient Name	Age	Home Phone	Day Phone	Dispensed By	Delivered By
Harper Cole	55	(949) 555-7896	(949) 433-7896	Tom Duncan	Duncan, Tom
Henry A. Mitchell	70	(949) 588-6321		Tom Duncan	Duncan, Tom

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

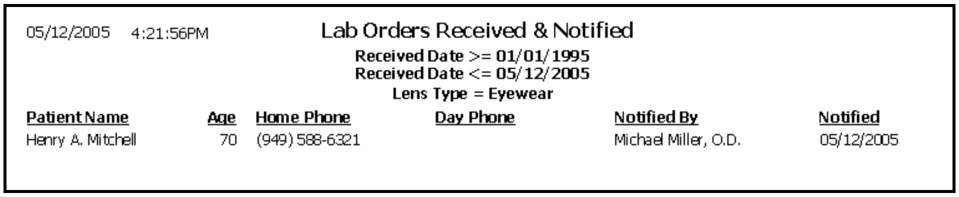
DISPOSITION: ☐ Left Message ☐ NO Answer ☐ Confirmed

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

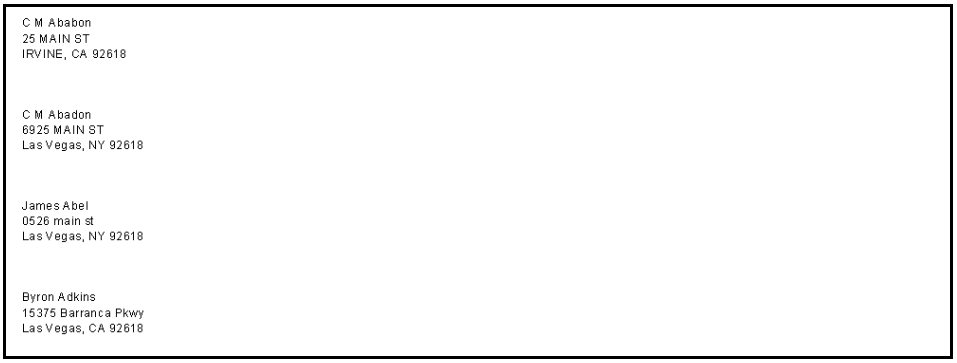
Received Date >= 01/01/1995
Received Date <= 05/12/2005
Lens Type = Eyewear

Patient Name	**Age**	**Home Phone**	**Day Phone**	**Notified By**	**Notified**
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 Ababon
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 606.

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 568.

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 693, for more information on creating the Discount Register report, go to Discount Register on page 651, and for more information on creating the Adjustment Register report, go to Adjustment Register on page 637. • 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.

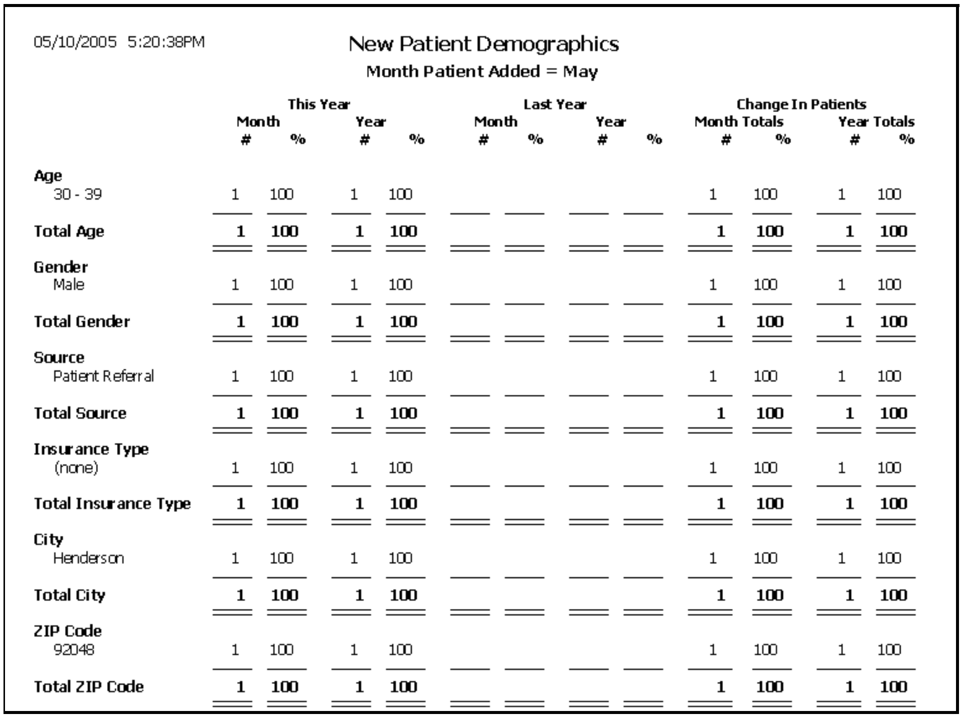
Monthly Production Summary

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 619.

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

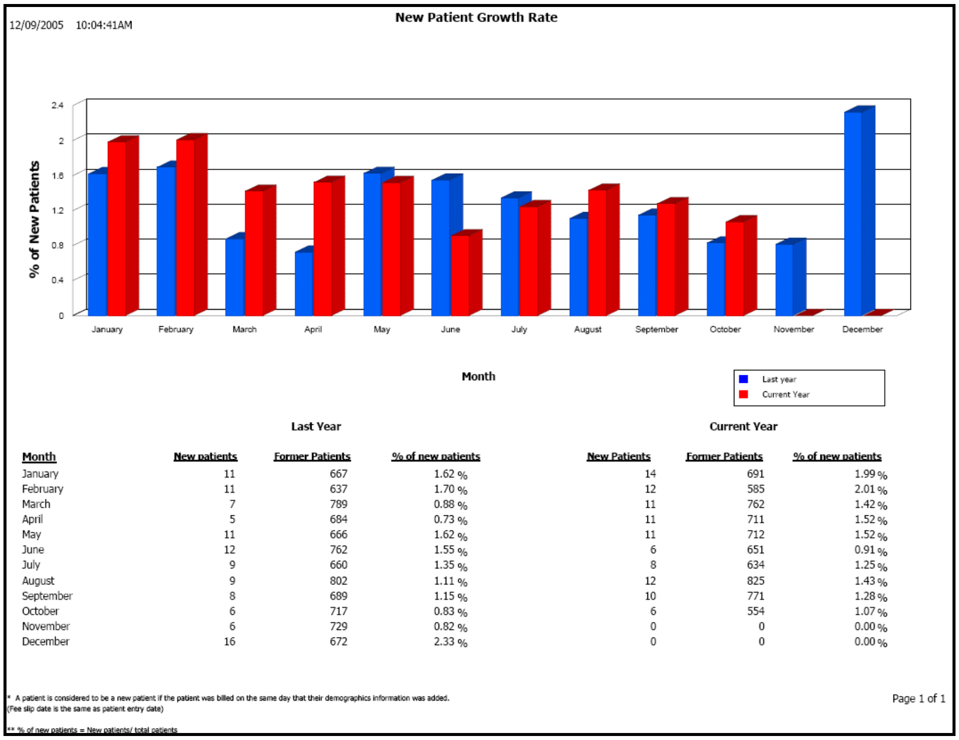
New Patient Demographics

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.



12/09/2005 10:04:41AM

New Patient Growth Rate

	Last Year			Current Year		
Month	**New patients**	**Former Patients**	**% of new patients**	**New Patients**	**Former Patients**	**% of new patients**
January	11	667	1.62 %	14	691	1.99 %
February	11	637	1.70 %	12	585	2.01 %
March	7	789	0.88 %	11	762	1.42 %
April	5	684	0.73 %	11	711	1.52 %
May	11	666	1.62 %	11	712	1.52 %
June	12	762	1.55 %	6	651	0.91 %
July	9	660	1.35 %	8	634	1.25 %
August	9	802	1.11 %	12	825	1.43 %
September	8	689	1.15 %	10	771	1.28 %
October	6	717	0.83 %	6	554	1.07 %
November	6	729	0.82 %	0	0	0.00 %
December	16	672	2.33 %	0	0	0.00 %

* A patient is considered to be a new patient if the patient was billed on the same day that their demographics information was added.
(Fee slip date is the same as patient entry date)

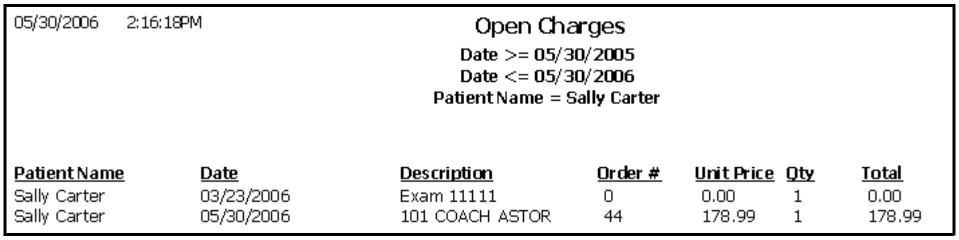
Page 1 of 1

** % of new patients = New patients/ total patients

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

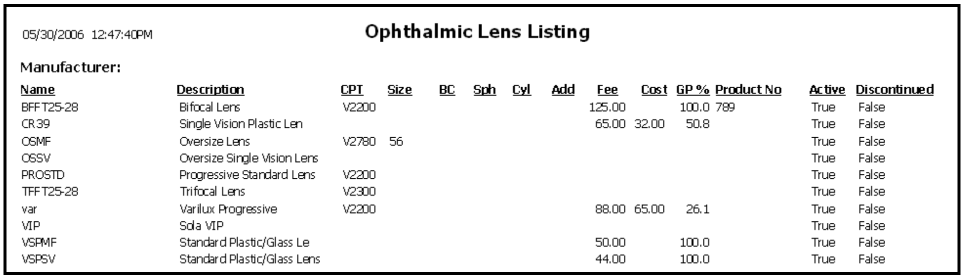
Open Charges
Date >= 05/30/2005
Date <= 05/30/2006
Patient Name = Sally Carter

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	Sph	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	Oversize Lens	V2780	56									True	False
OSSV	Oversize Single Vision Lens											True	False
PROSTD	Progressive Standard Lens	V2200										True	False
TFFT25-28	Trifocal Lens	V2300										True	False
var	Varilux 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

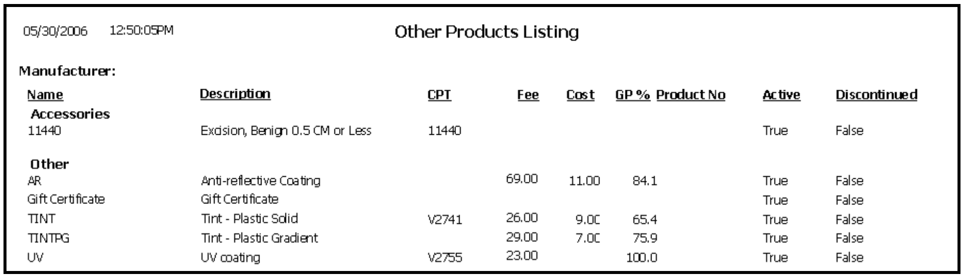
Order Recommendation

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 606.

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	Excision, Benign 0.5 CM or Less	11440					True	False
Other								
AR	Anti-reflective Coating		69.00	11.00	84.1		True	False
Gift Certificate	Gift Certificate						True	False
TINT	Tint - Plastic Solid	V2741	26.00	9.0C	65.4		True	False
TINTPG	Tint - Plastic Gradient		29.00	7.0C	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 574.

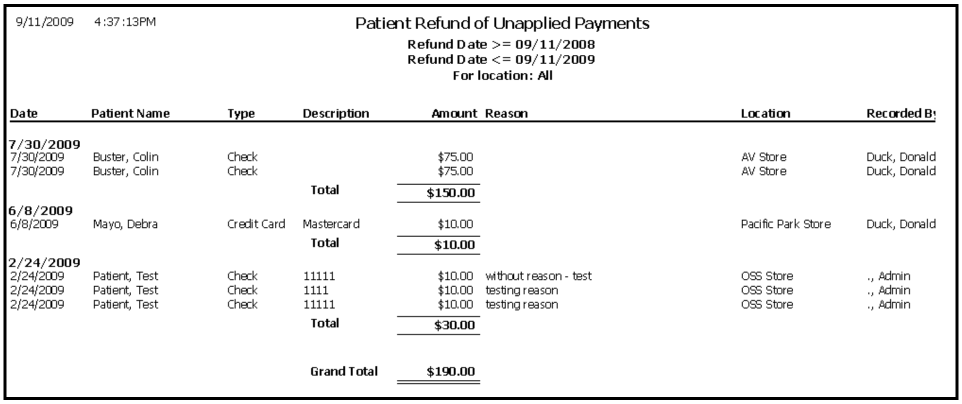
Patient Aging - Summary

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 574.

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

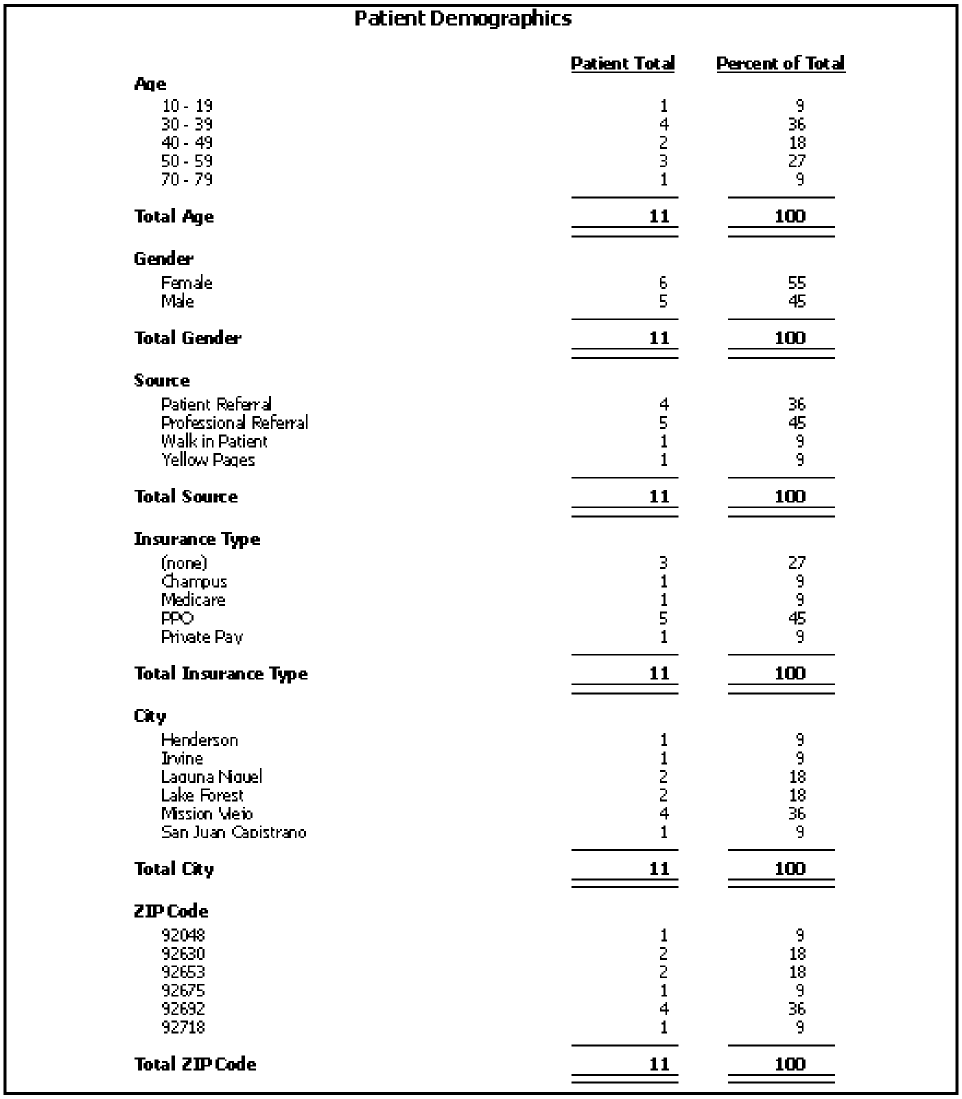
Patient Refund of Unapplied Payments

Refund Date >= 09/11/2008
Refund Date <= 09/11/2009
For location: All

Date	Patient Name	Type	Description	Amount	Reason	Location	Recorded B
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	1111	$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.



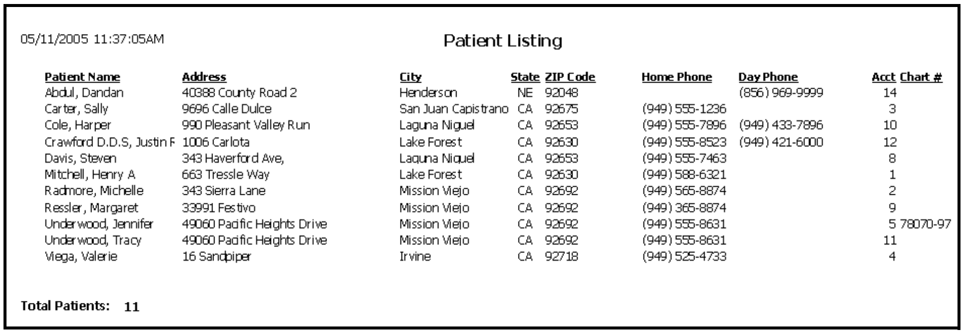
Patient Demographics

	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

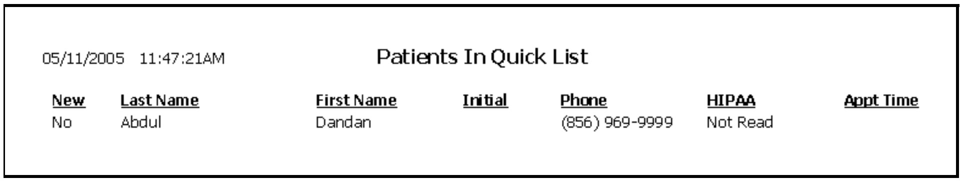
Patient Listing

Patient Name	Address	City	State	ZIP Code	Home Phone	Day Phone	Acct	Chart #
Abdul, Dandan	40388 County Road 2	Henderson	NE	92048		(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) 588-6321		1	
Radmore, Michelle	343 Sierra Lane	Mission Viejo	CA	92692	(949) 565-8874		2	
Ressler, Margaret	33991 Festivo	Mission Viejo	CA	92692	(949) 365-8874		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	
Viega, 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.



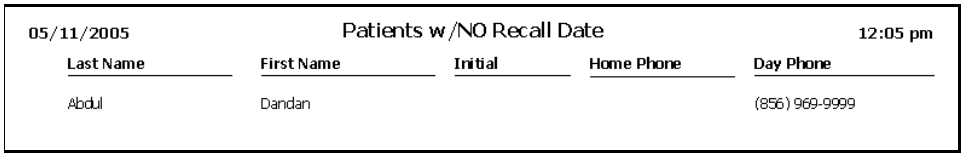
05/11/2005 11:47:21AM

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

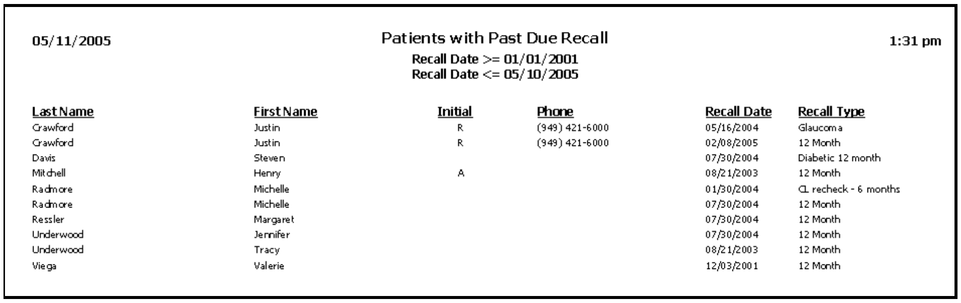
12:05 pm

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

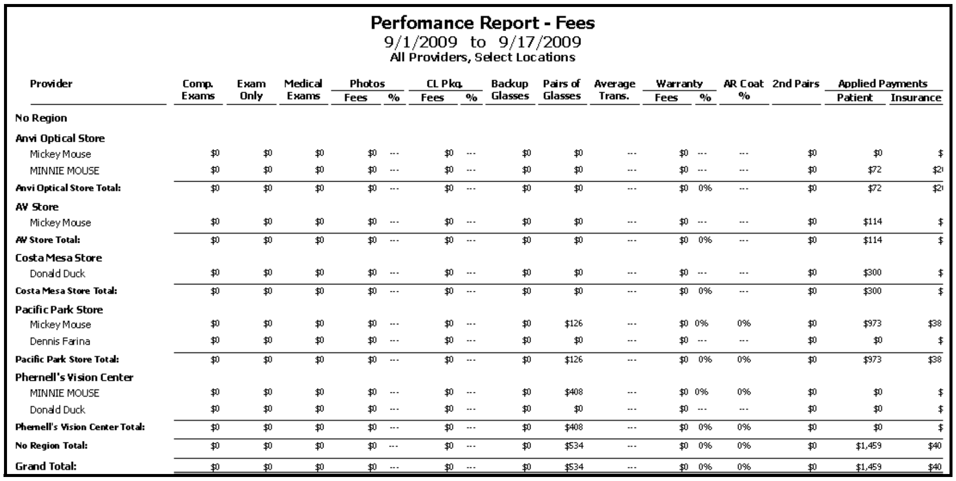
Last Name	First Name	Initial	Phone	Recall Date	Recall Type
Crawford	Justin	R	(949) 421-6000	05/16/2004	Glaucoma
Crawford	Justin	R	(949) 421-6000	02/08/2005	12 Month
Davis	Steven			07/30/2004	Diabetic 12 month
Mitchell	Henry	A		08/21/2003	12 Month
Radmore	Michelle			01/30/2004	CL recheck - 6 months
Radmore	Michelle			07/30/2004	12 Month
Ressler	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 568.

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.



Perfomance Report - Fees
9/1/2009 to 9/17/2009
All Providers, Select Locations

Provider	Comp. Exams	Exam Only	Medical Exams	Photos		CL Pkg.		Backup Glasses	Pairs of Glasses	Average Trans.	Warranty		AR Coat %	2nd Pairs	Applied Payments	
				Fees	%	Fees	%				Fees	%			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	$2
Anvi Optical Store Total:	$0	$0	$0	$0	---	$0	---	$0	$0	---	$0	0%	---	$0	$72	$2
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 94.
- 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.

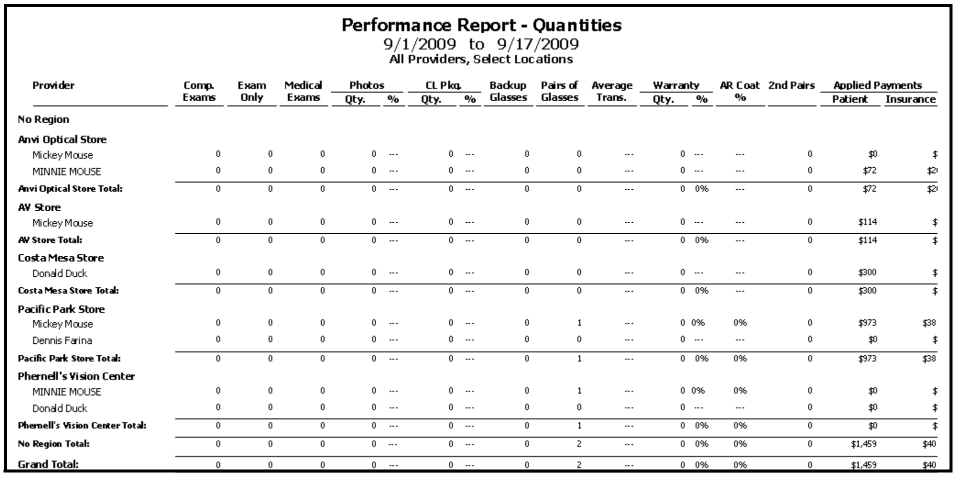
- The Backup Glasses column represents the backup glasses net fees generated. Glasses are considered to be “backup glasses” when a contact lens exam is billed and one or more pairs of glasses or plano sunglasses are also purchased on the same fee slip. Refunds are related to the fee slip date.
- The 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 paris 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 568.

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 Pkg.		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	$2
Anvi Optical Store Total:	0	0	0	0	---	0	---	0	0	---	0	0%	---	0	$72	$2
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	1	---	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	1	---	0	0%	0%	0	$973	$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	$1,459	$40
Grand Total:	0	0	0	0	---	0	---	0	2	---	0	0%	0%	0	$1,459	$40

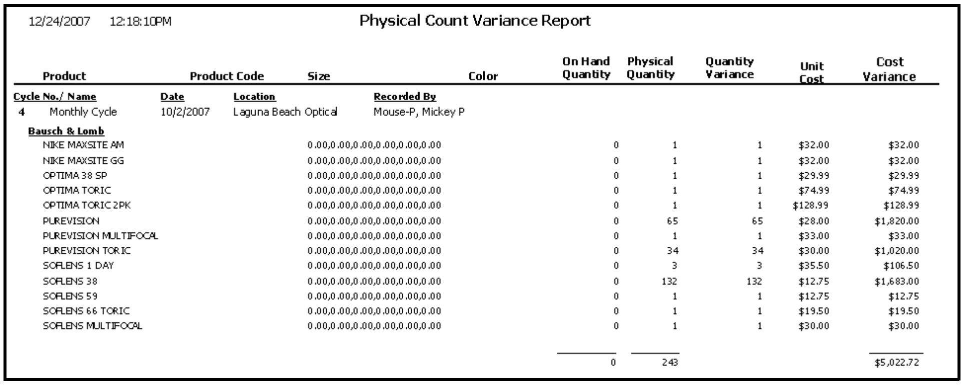
NOTES

- 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 paris 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.



12/24/2007 12:18:10PM

Physical Count Variance Report

Cycle No./ Name		**Date**	**Location**	**Recorded By**
4	Monthly Cycle	10/2/2007	Laguna Beach Optical	Mouse-P, Mickey P

Bausch & Lomb

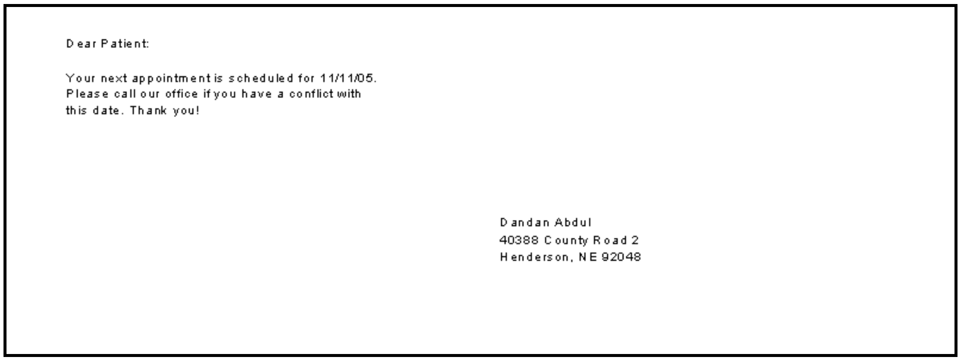
Product	Product Code	Size	Color	On Hand Quantity	Physical Quantity	Quantity Variance	Unit Cost	Cost Variance
NIKE MAXSITE AM		0.00,0.00,0.00,0.00,0.00,0.00		0	1	1	$32.00	$32.00
NIKE MAXSITE GG		0.00,0.00,0.00,0.00,0.00,0.00		0	1	1	$32.00	$32.00
OPTIMA 38 SP		0.00,0.00,0.00,0.00,0.00,0.00		0	1	1	$29.99	$29.99
OPTIMA TORIC		0.00,0.00,0.00,0.00,0.00,0.00		0	1	1	$74.99	$74.99
OPTIMA TORIC 2PK		0.00,0.00,0.00,0.00,0.00,0.00		0	1	1	$128.99	$128.99
PUREVISION		0.00,0.00,0.00,0.00,0.00,0.00		0	65	65	$28.00	$1,820.00
PUREVISION MULTIFOCAL		0.00,0.00,0.00,0.00,0.00,0.00		0	1	1	$33.00	$33.00
PUREVISION TORIC		0.00,0.00,0.00,0.00,0.00,0.00		0	34	34	$30.00	$1,020.00
SOFLENS 1 DAY		0.00,0.00,0.00,0.00,0.00,0.00		0	3	3	$35.50	$106.50
SOFLENS 38		0.00,0.00,0.00,0.00,0.00,0.00		0	132	132	$12.75	$1,683.00
SOFLENS 59		0.00,0.00,0.00,0.00,0.00,0.00		0	1	1	$12.75	$12.75
SOFLENS 66 TORIC		0.00,0.00,0.00,0.00,0.00,0.00		0	1	1	$19.50	$19.50
SOFLENS MULTIFOCAL		0.00,0.00,0.00,0.00,0.00,0.00		0	1	1	$30.00	$30.00
				0	243			$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” × 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:

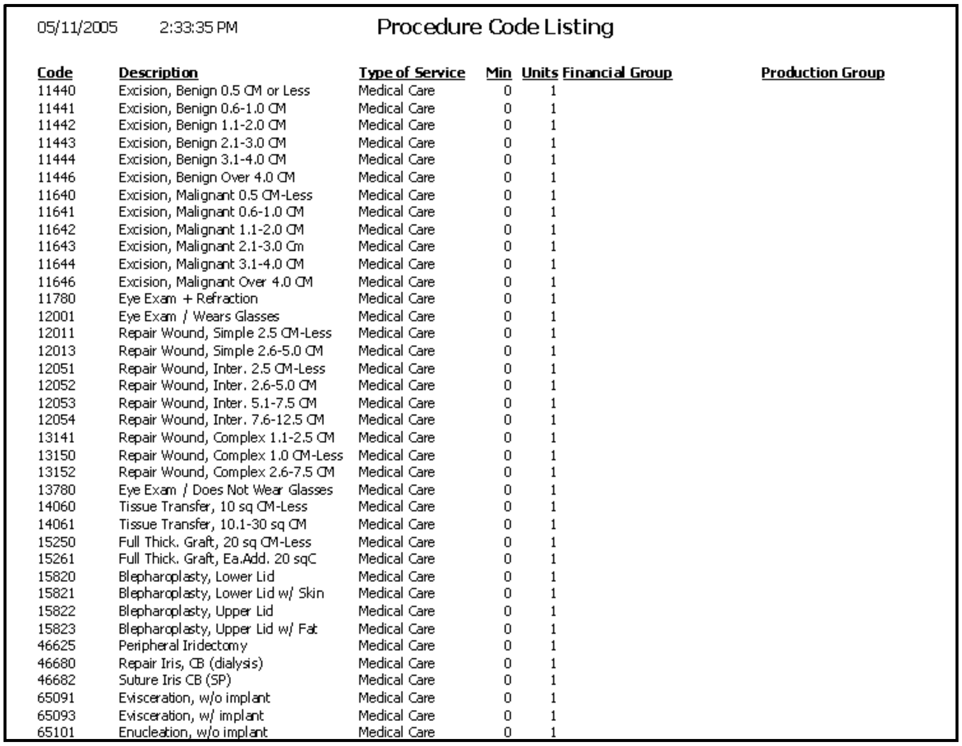
Your next appointment is scheduled for 11/11/05.
Please call our office if you have a conflict with
this date. Thank you!

Dandan Abdul
40388 County Road 2
Henderson, NE 92048

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.



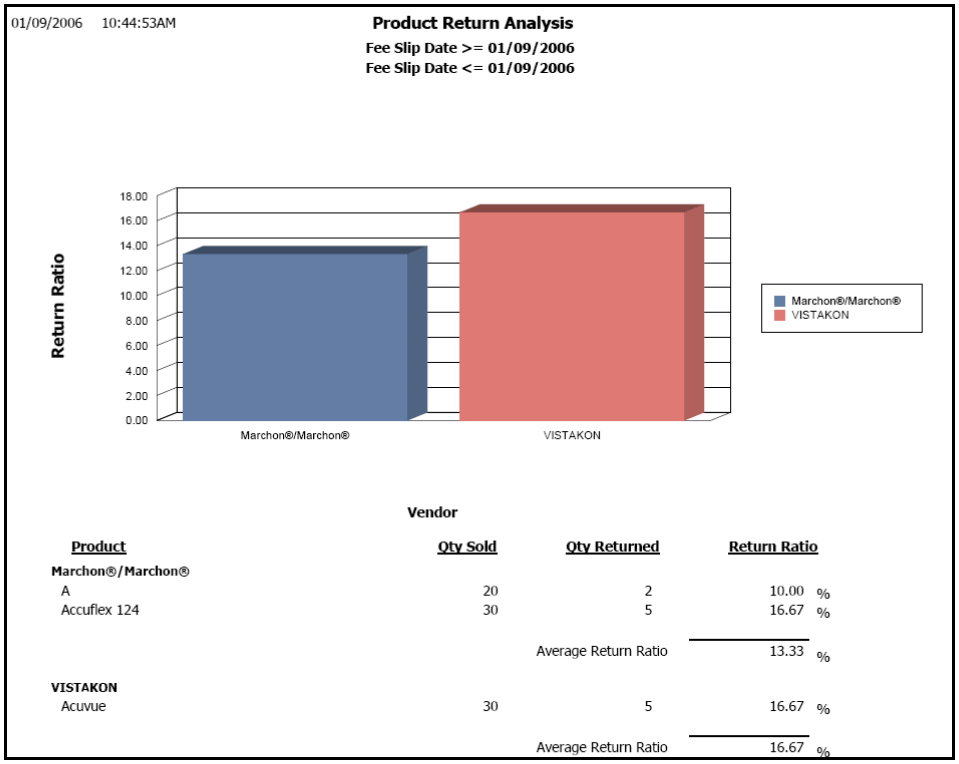
05/11/2005 2:33:35 PM Procedure Code Listing

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.



01/09/2006 10:44:53AM

Product Return Analysis

Fee Slip Date >= 01/09/2006
Fee Slip Date <= 01/09/2006

Return Ratio
18.00
16.00
14.00
12.00
10.00
8.00
6.00
4.00
2.00
0.00
Marchon®/Marchon®
VISTAKON
🟦 Marchon®/Marchon®
🟥 VISTAKON

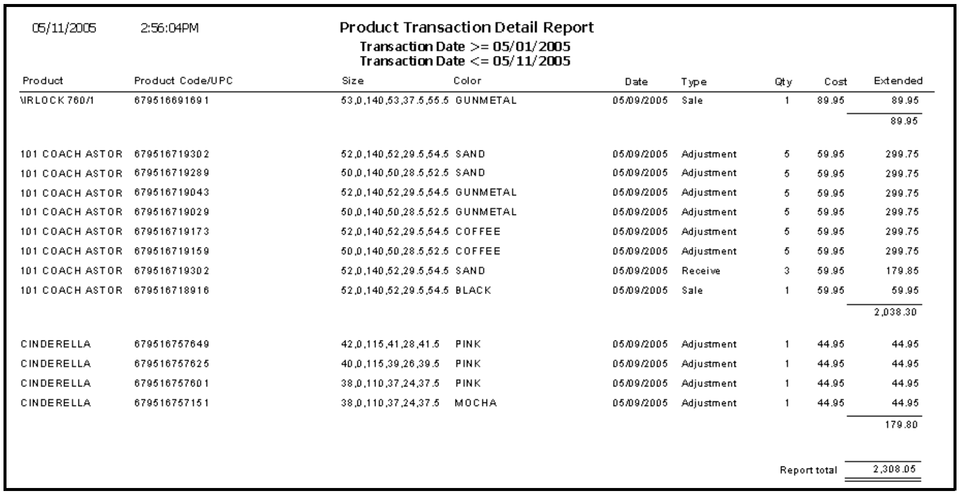
Vendor

Product	Qty Sold	Qty Returned	Return Ratio
Marchon®/Marchon®			
A	20	2	10.00 %
Accuflex 124	30	5	16.67 %
		Average Return Ratio	13.33 %
VISTAKON			
Acuvue	30	5	16.67 %
		Average Return Ratio	16.67 %

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
\IRLOCK 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 619.

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

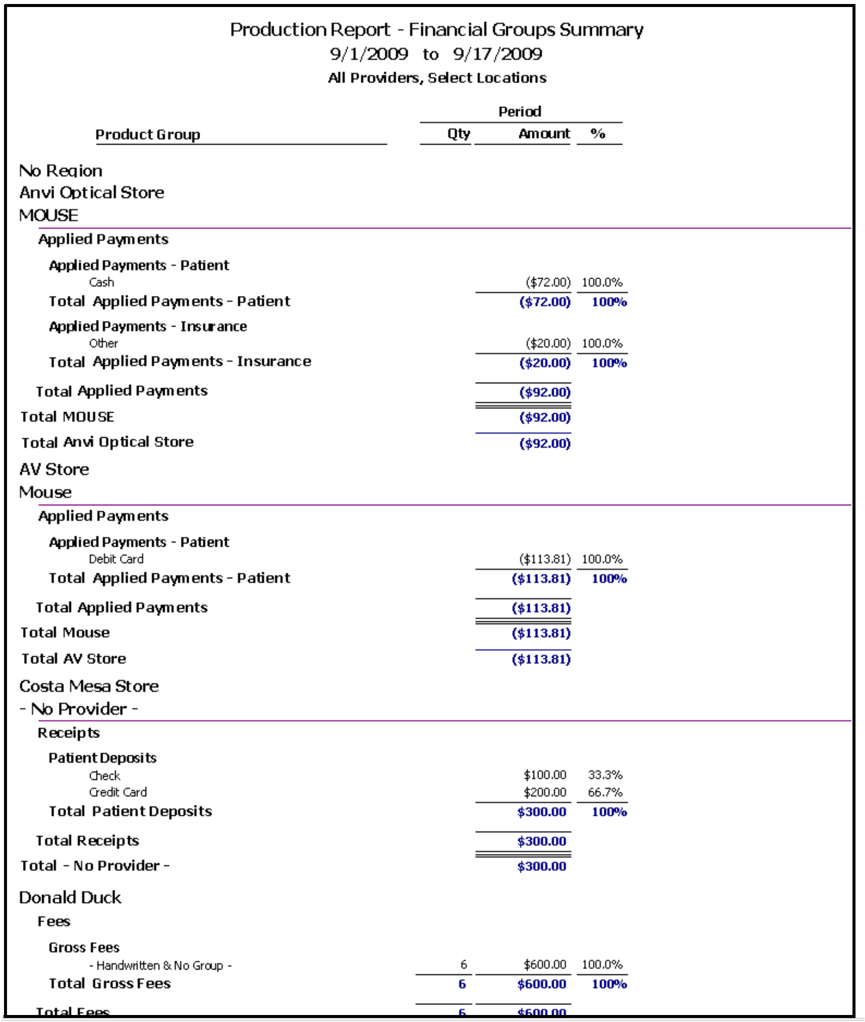
Production - Location Comparison report, go to Creating & Printing Custom Reports on page 568.

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 693, for more information on creating the Discount Register report, go to Discount Register on page 651, and for more information on creating the Adjustment Register report, go to Adjustment Register on page 637.
- 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 568.



Production Report - Financial Groups Summary
9/1/2009 to 9/17/2009
All Providers, Select Locations

Product Group	Period Qty	Period Amount	Period %
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 693, for more information on creating the Discount Register report, go to Discount Register on page 651, and for more information on creating the Adjustment Register report, go to Adjustment Register on page 637.
- 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 568.

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 693, for more information on creating the Discount Register report, go to Discount Register on page 651, and for more information on creating the Adjustment Register report, go to Adjustment Register on page 637.
- 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 568.

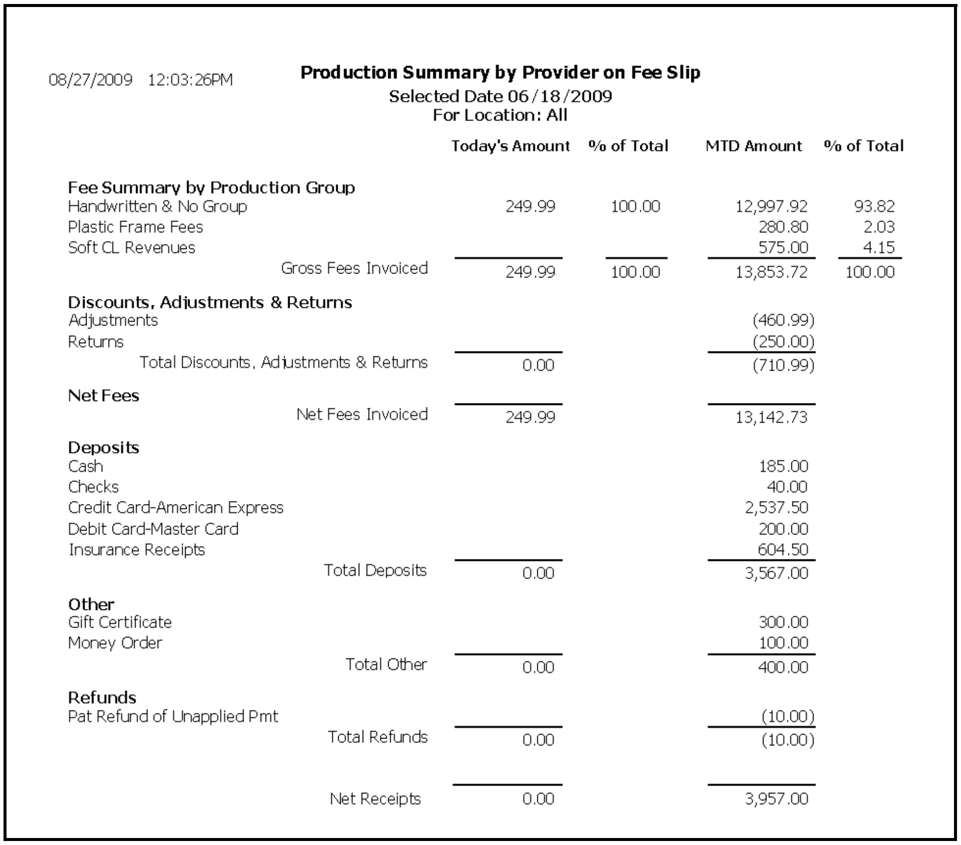
NOTES

- 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 693, for more information on creating the Discount Register report, go to Discount Register on page 651, and for more information on creating the Adjustment Register report, go to Adjustment Register on page 637.
- 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.



08/27/2009 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	249.99	100.00	13,853.72	100.00
Discounts, Adjustments & Returns				
Adjustments			(460.99)	
Returns			(250.00)	
Total Discounts, Adjustments & Returns	0.00		(710.99)	
Net Fees				
Net Fees Invoiced	249.99		13,142.73	
Deposits				
Cash			185.00	
Checks			40.00	
Credit Card-American Express			2,537.50	
Debit Card-Master Card			200.00	
Insurance Receipts			604.50	
Total Deposits	0.00		3,567.00	
Other				
Gift Certificate			300.00	
Money Order			100.00	
Total Other	0.00		400.00	
Refunds				
Pat Refund of Unapplied Pmt			(10.00)	
Total Refunds	0.00		(10.00)	
Net Receipts	0.00		3,957.00	

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 619.

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 568.

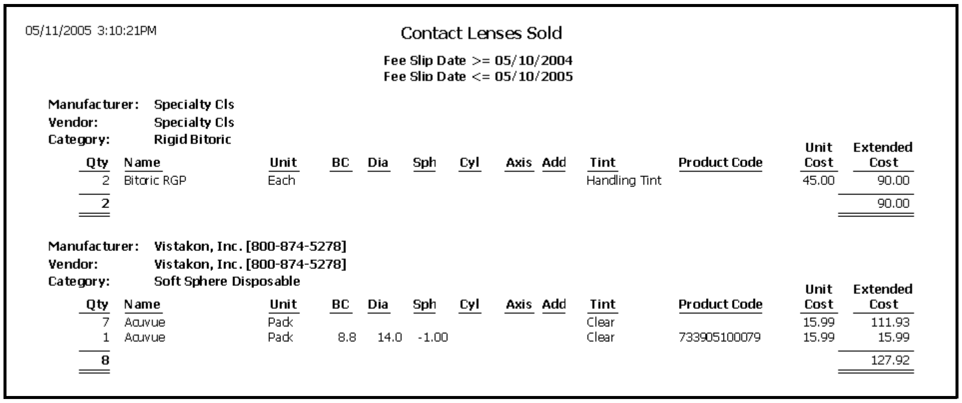
NOTES

- 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 693, for more information on creating the Discount Register report, go to Discount Register on page 651, and for more information on creating the Adjustment Register report, go to Adjustment Register on page 637.
- 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 Cls
Vendor: Specialty Cls
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
2												90.00

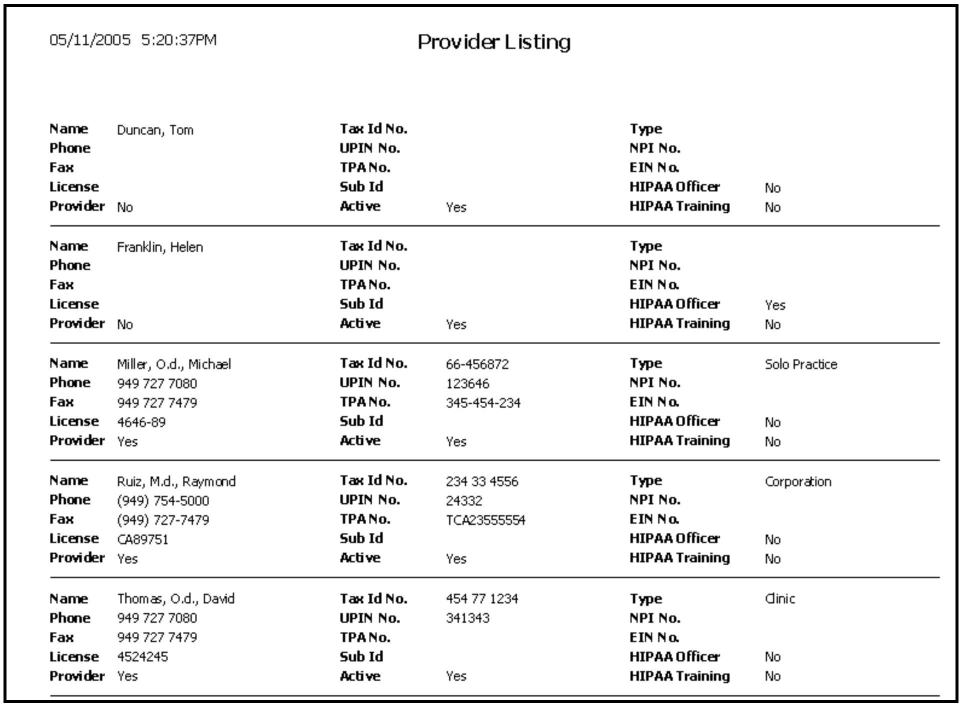
Manufacturer: Vistakon, Inc. [800-874-5278]
Vendor: Vistakon, Inc. [800-874-5278]
Category: Soft Sphere Disposable

Qty	Name	Unit	BC	Dia	Sph	Cyl	Axis	Add	Tint	Product Code	Unit Cost	Extended Cost
7	Acuvue	Pack							Clear		15.99	111.93
1	Acuvue	Pack	8.8	14.0	-1.00				Clear	733905100079	15.99	15.99
8												127.92

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

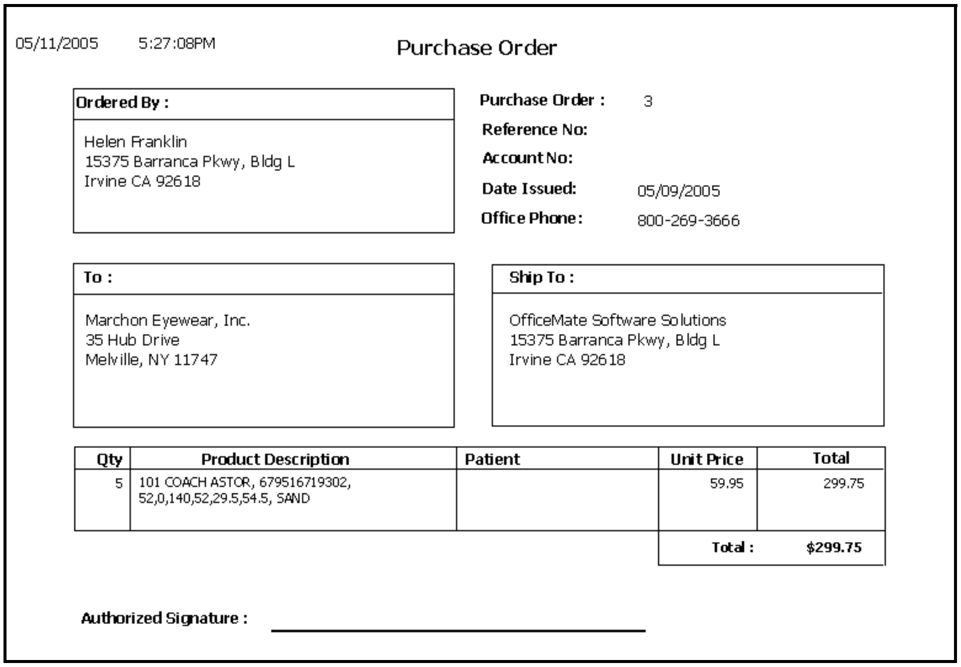
Provider Listing

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.



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

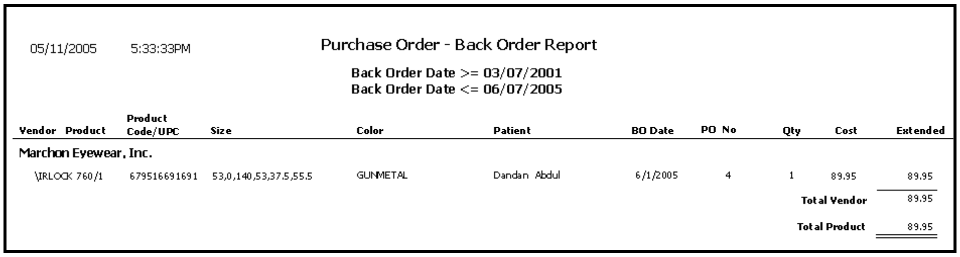
Qty	Product Description	Patient	Unit Price	Total
5	101 COACH ASTOR, 679516719302, 52,0,140,52,29.5,54.5, SAND		59.95	299.75
			Total :	**$299.75**

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.



05/11/2005 5:33:33PM

Purchase Order - Back Order Report

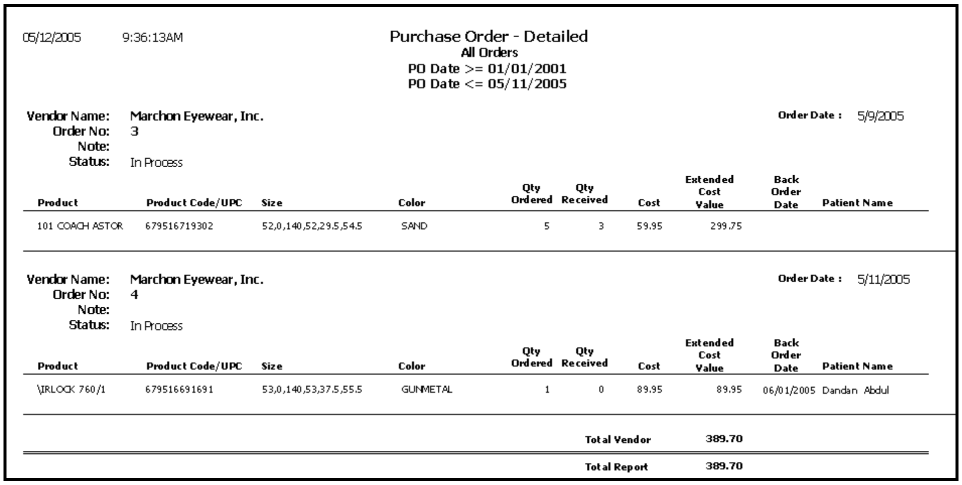
Back Order Date >= 03/07/2001
Back Order Date <= 06/07/2005

Vendor Product	Product Code/UPC	Size	Color	Patient	BO Date	PO No	Qty	Cost	Extended
Marchon Eyewear, Inc.									
\IRLOCK 760/1	679516691691	53,0,140,53,37.5,55.5	GUNMETAL	Dandan 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.



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

Product	Product Code/UPC	Size	Color	Qty Ordered	Qty Received	Cost	Extended Cost Value	Back Order Date	Patient Name
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

Product	Product Code/UPC	Size	Color	Qty Ordered	Qty Received	Cost	Extended Cost Value	Back Order Date	Patient Name
\IRLOCK 760/1	679516691691	53,0,140,53,37.5,55.5	GUNMETAL	1	0	89.95	89.95	06/01/2005	Dandan Abdul

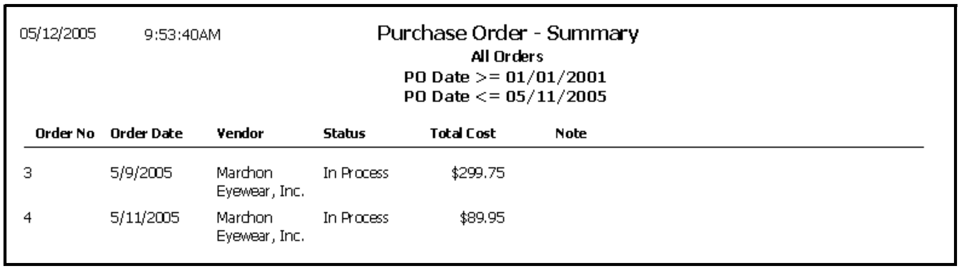
Total Vendor 389.70

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.



05/12/2005 9:53:40AM

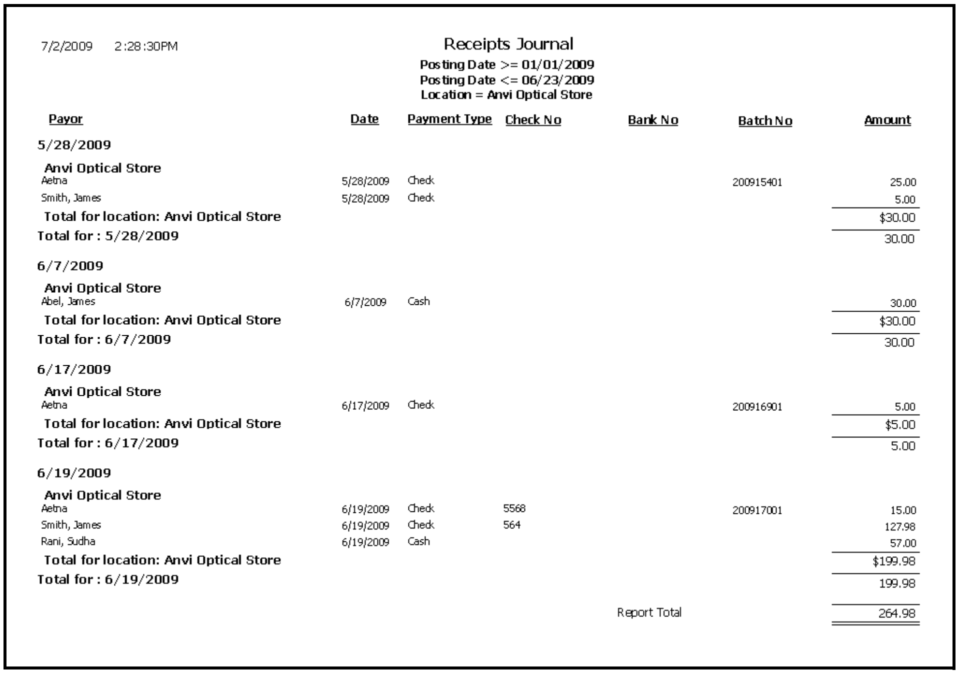
Purchase Order - Summary
All Orders
PO Date >= 01/01/2001
PO Date <= 05/11/2005

Order No	Order Date	Vendor	Status	Total Cost	Note
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

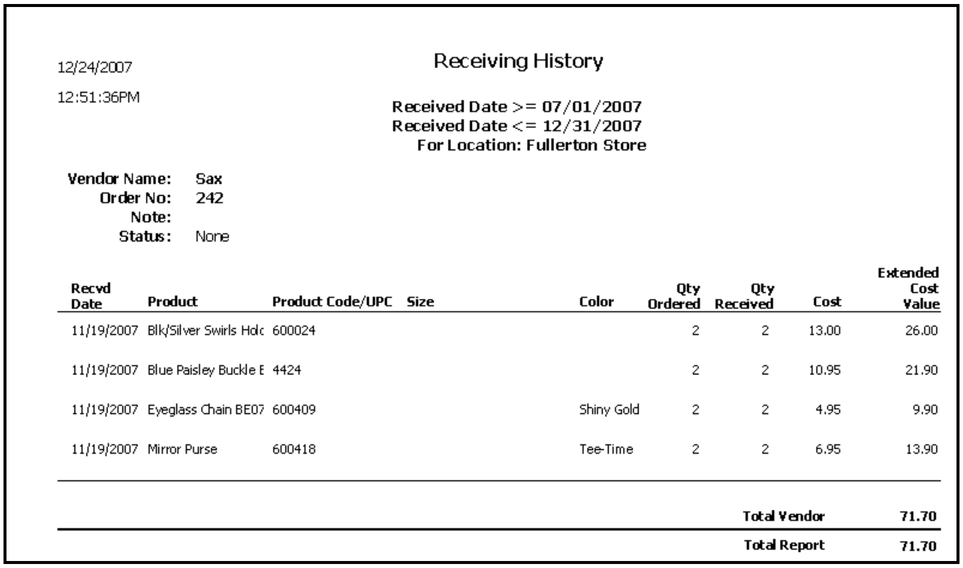
Posting Date >= 01/01/2009
Posting Date <= 06/23/2009
Location = Anvi Optical Store

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
12:51:36PM

Receiving History

Received Date >= 07/01/2007
Received Date <= 12/31/2007
For Location: Fullerton Store

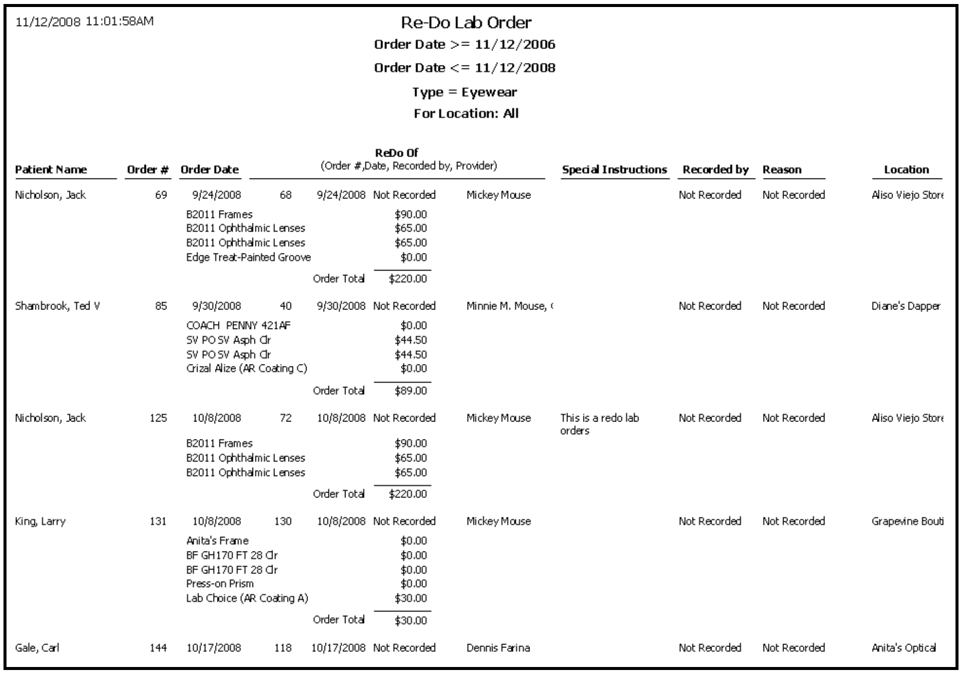
Vendor Name: Sax
Order No: 242
Note:
Status: None

Recvd Date	Product	Product Code/UPC	Size	Color	Qty Ordered	Qty Received	Cost	Extended Cost Value
11/19/2007	Blk/Silver Swirls Holc	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.

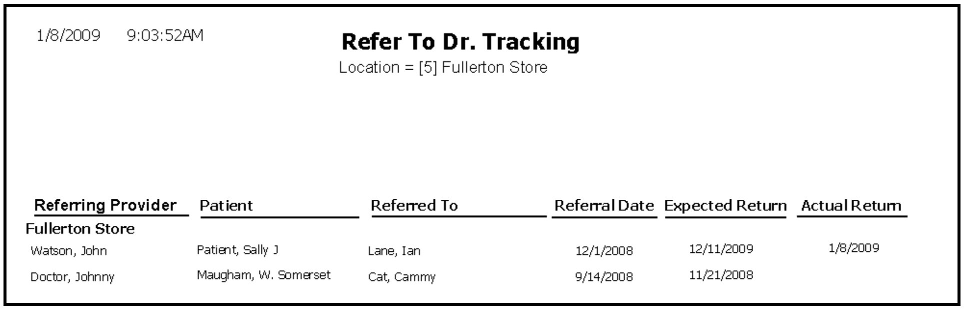


```
11/12/2008 11:01:58AM                              Re-Do Lab Order
                                             Order Date >= 11/12/2006
                                             Order Date <= 11/12/2008
                                                 Type = Eyewear
                                                For Location: All

                                              ReDo Of
Patient Name      Order #  Order Date   (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 Stor
                           B2011 Frames                        $90.00
                           B2011 Ophthalmic Lenses             $65.00
                           B2011 Ophthalmic Lenses             $65.00
                           Edge Treat-Painted Groove            $0.00
                                            Order Total       $220.00

Shambrook, Ted V      85    9/30/2008     40   9/30/2008  Not Recorded  Minnie M. Mouse,                    Not Recorded  Not Recorded   Diane's Dapper
                           COACH  PENNY 421AF                   $0.00
                           SV PO SV Asph Clr                   $44.50
                           SV PO SV Asph Clr                   $44.50
                           Crizal 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 Not Recorded  Not Recorded   Aliso Viejo Stor
                                                                                         orders
                           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 Clr                   $0.00
                           BF GH170 FT 28 Clr                   $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.

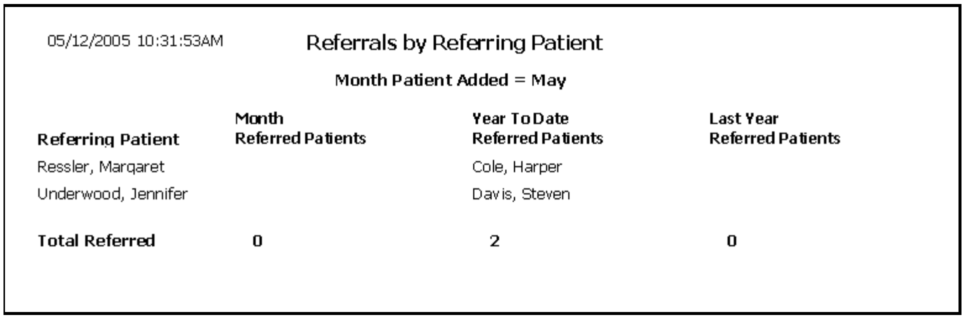


```
1/8/2009     9:03:52AM                Refer To Dr. Tracking
                                      Location = [5] Fullerton Store


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

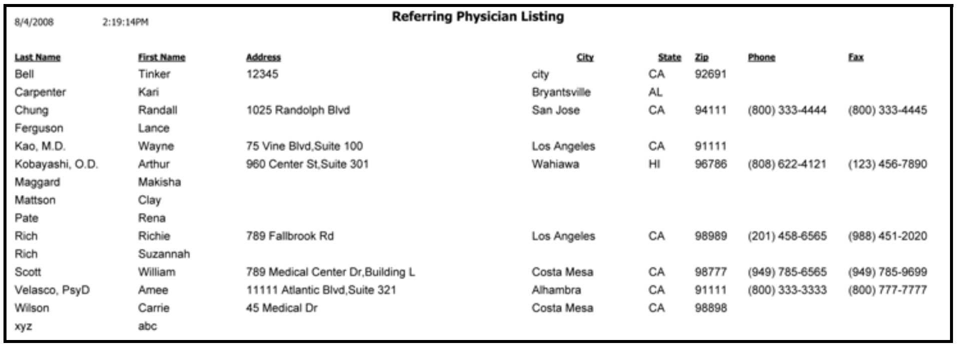
Referrals by Referring Patient

Month Patient Added = May

Referring Patient	Month Referred Patients	Year To Date Referred Patients	Last Year Referred Patients
Ressler, Margaret		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

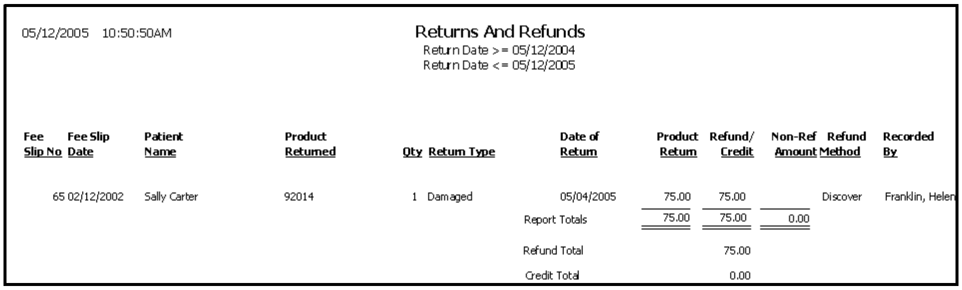
Referring Physician Listing

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			

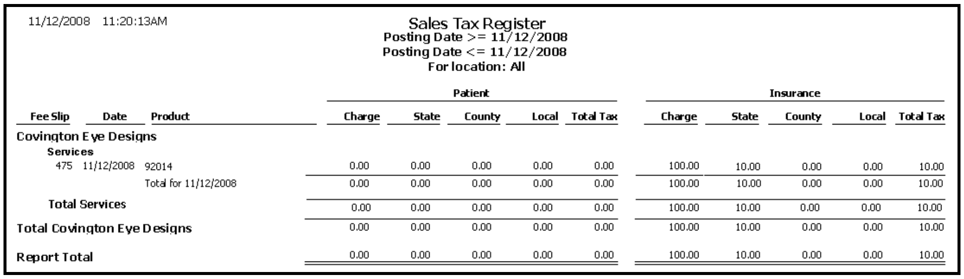
NOTES

- 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

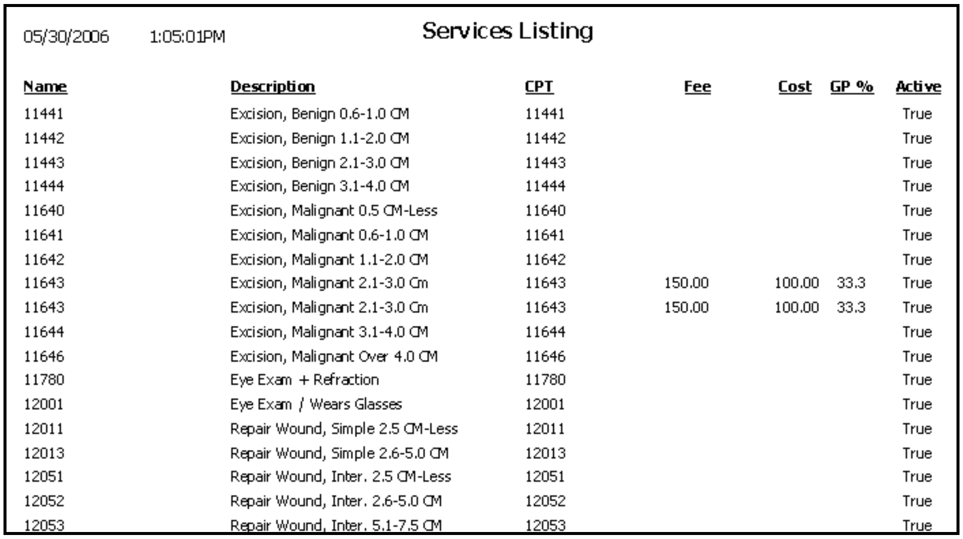
Sales Tax Register
Posting Date >= 11/12/2008
Posting Date <= 11/12/2008
For location: All

			Patient					Insurance				
Fee Slip	**Date**	**Product**	**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

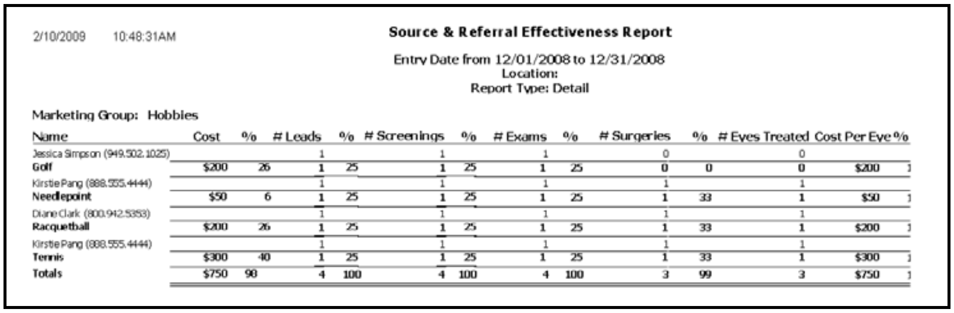
Source & Referral Effectiveness

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.



2/10/2009 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	1
Kirstie Pang (888.555.4444)			1		1		1		1		1		
Needlepoint	$50	6	1	25	1	25	1	25	1	33	1	$50	1
Diane Clark (800.942.5353)			1		1		1		1		1		
Racquetball	$200	26	1	25	1	25	1	25	1	33	1	$200	1
Kirstie Pang (888.555.4444)			1		1		1		1		1		
Tennis	$300	40	1	25	1	25	1	25	1	33	1	$300	1
Totals	$750	98	4	100	4	100	4	100	3	99	3	$750	1

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.

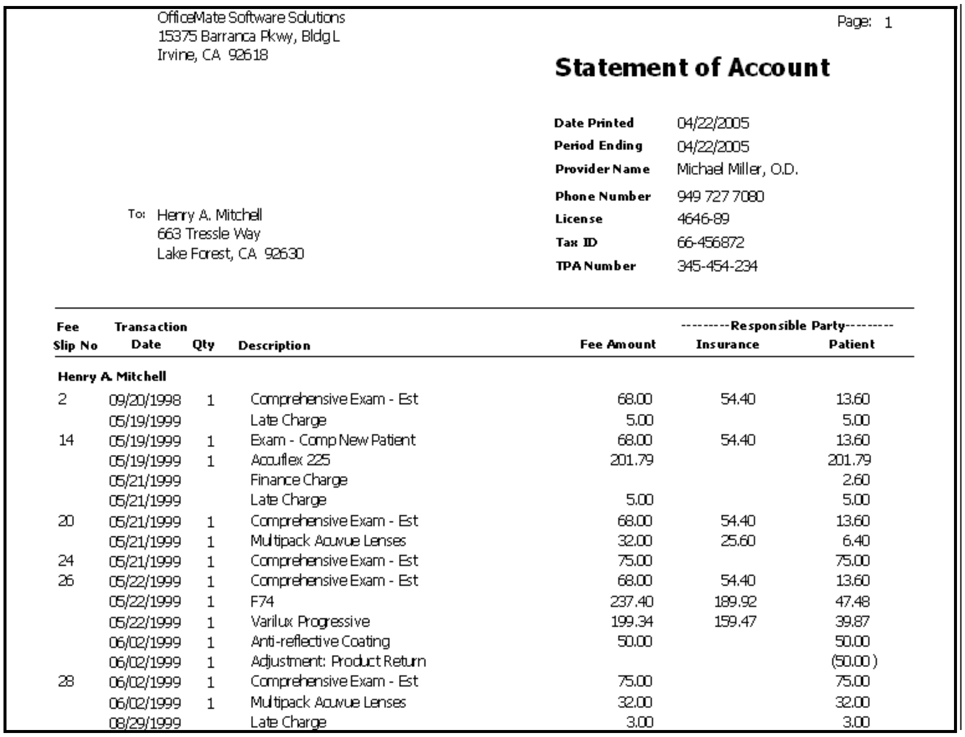
> **NOTE** The Statements report can display up to 3650 days of details. If you do not want to display details, type 0.

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

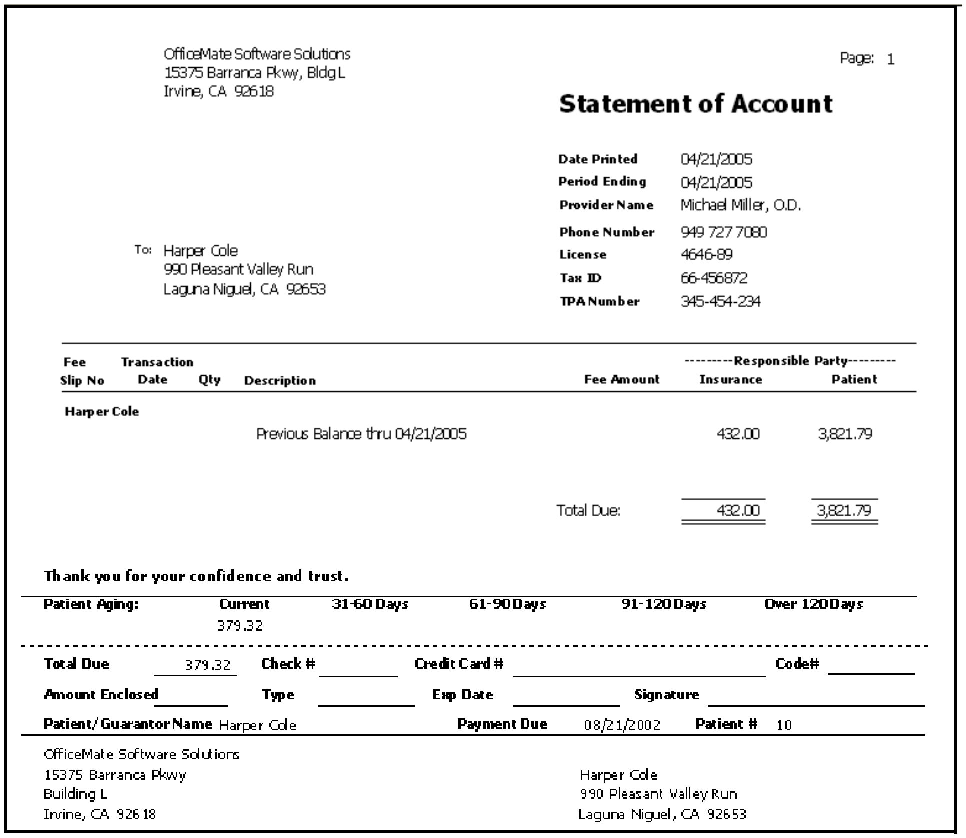
Statement of Account

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

To: Henry A. Mitchell
663 Tressle Way
Lake Forest, CA 92630

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	Accuflex 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
	06/02/1999	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

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

To: Harper Cole
990 Pleasant Valley Run
Laguna Niguel, CA 92653

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.

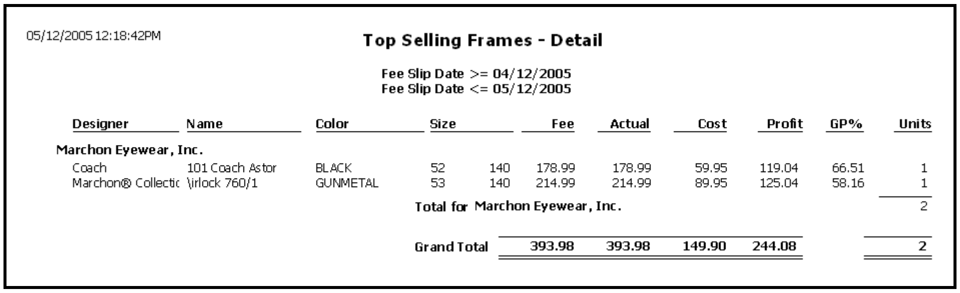
Stock Status

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 606.

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

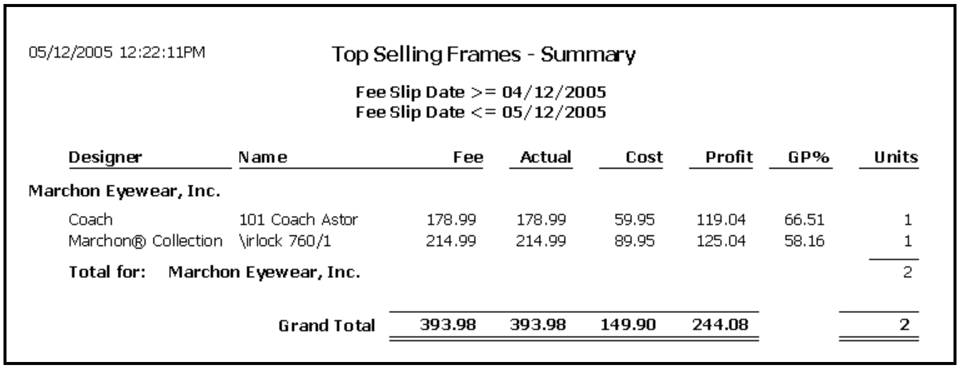
Fee Slip Date >= 04/12/2005
Fee Slip Date <= 05/12/2005

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® Collectic	\irlock 760/1	GUNMETAL	53	140	214.99	214.99	89.95	125.04	58.16	1
			Total for Marchon Eyewear, Inc.							2
			Grand Total		393.98	393.98	149.90	244.08		2

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

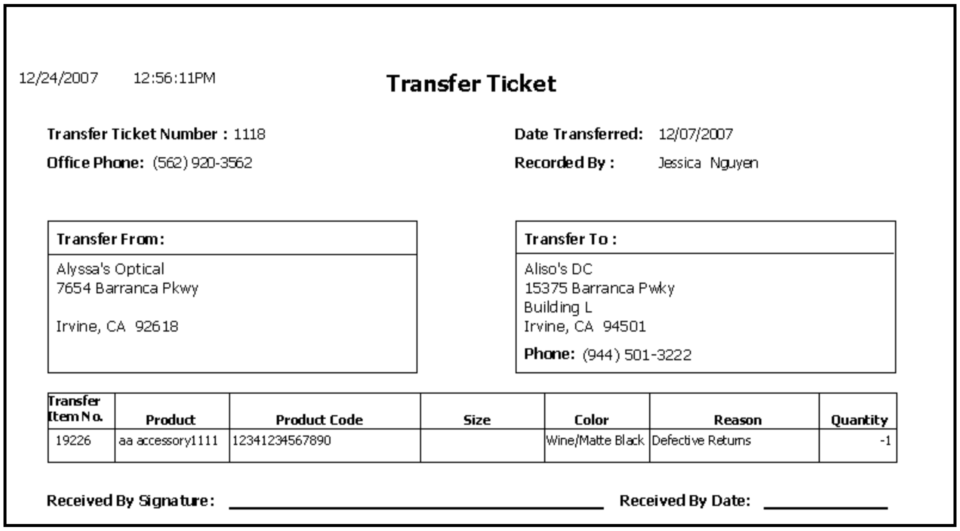
Top Selling Frames - Summary

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	\irlock 760/1	214.99	214.99	89.95	125.04	58.16	1
Total for:	**Marchon Eyewear, Inc.**						2
	Grand Total	393.98	393.98	149.90	244.08		2

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
Office Phone: (562) 920-3562

Date Transferred: 12/07/2007
Recorded By : Jessica Nguyen

Transfer From:
Alyssa's Optical
7654 Barranca Pkwy

Irvine, CA 92618

Transfer To :
Aliso's DC
15375 Barranca Pwky
Building L
Irvine, CA 94501
Phone: (944) 501-3222

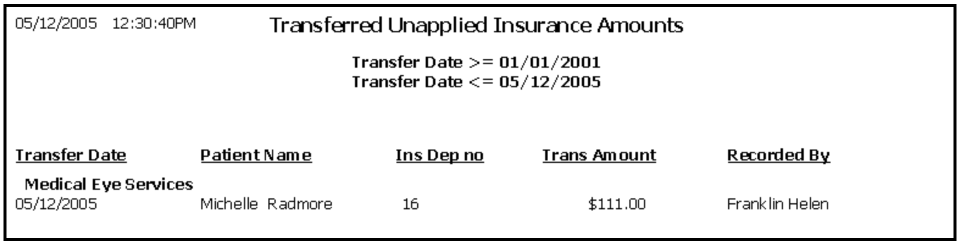
Transfer Item No.	Product	Product Code	Size	Color	Reason	Quantity
19226	aa accessory1111	12341234567890		Wine/Matte Black	Defective Returns	-1

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

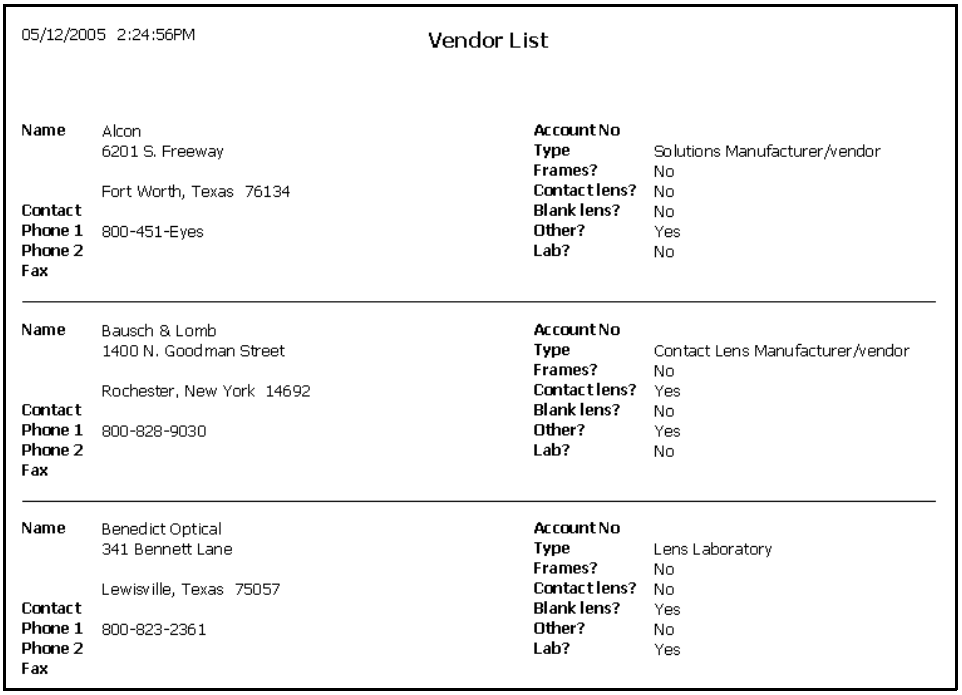
Unapplied Amounts

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 568.

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	**Account No**	
	6201 S. Freeway	**Type**	Solutions Manufacturer/vendor
		Frames?	No
	Fort Worth, Texas 76134	**Contact lens?**	No
Contact		**Blank lens?**	No
Phone 1	800-451-Eyes	**Other?**	Yes
Phone 2		**Lab?**	No
Fax			

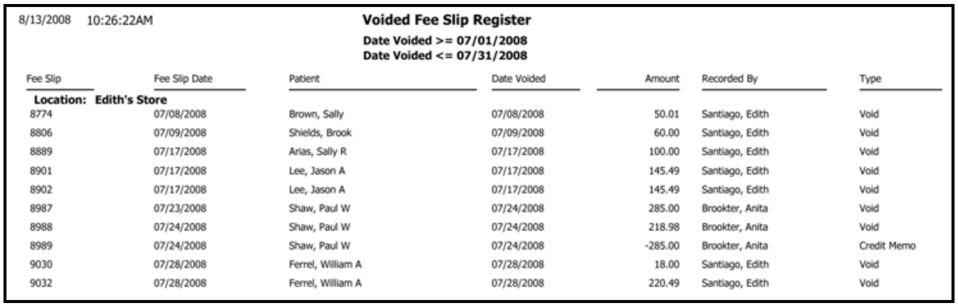
Name	Bausch & Lomb	**Account No**	
	1400 N. Goodman Street	**Type**	Contact Lens Manufacturer/vendor
		Frames?	No
	Rochester, New York 14692	**Contact lens?**	Yes
Contact		**Blank lens?**	No
Phone 1	800-828-9030	**Other?**	Yes
Phone 2		**Lab?**	No
Fax			

Name	Benedict Optical	**Account No**	
	341 Bennett Lane	**Type**	Lens Laboratory
		Frames?	No
	Lewisville, Texas 75057	**Contact lens?**	No
Contact		**Blank lens?**	Yes
Phone 1	800-823-2361	**Other?**	No
Phone 2		**Lab?**	Yes
Fax			

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

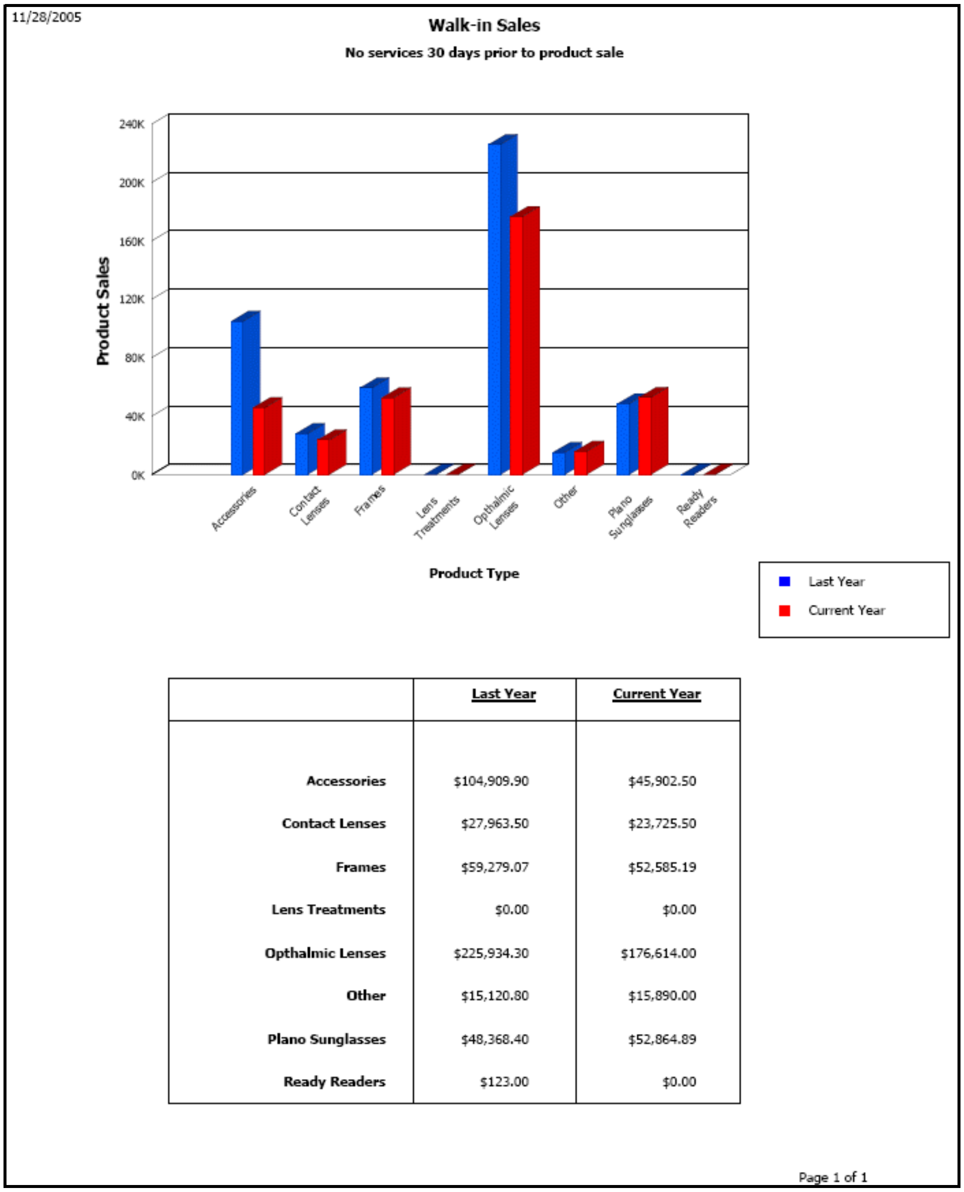
Date Voided >= 07/01/2008
Date Voided <= 07/31/2008

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.



11/28/2005

Walk-in Sales

No services 30 days prior to product sale

	Last Year	Current Year
Accessories	$104,909.90	$45,902.50
Contact Lenses	$27,963.50	$23,725.50
Frames	$59,279.07	$52,585.19
Lens Treatments	$0.00	$0.00
Opthalmic Lenses	$225,934.30	$176,614.00
Other	$15,120.80	$15,890.00
Plano Sunglasses	$48,368.40	$52,864.89
Ready Readers	$123.00	$0.00

Page 1 of 1

Sending Secure Messages

14

In this chapter:

- Understanding the Terminology, 718
- Setting up the Secure Messaging Portal, 719
- Logging into the Secure Messaging Portal, 727
- Giving Patients Access to their Clinical Data, 727
- Understanding Patient Access, 732
- Sending Clinical Information to Another Provider, 739
- Managing Your Own Provider Portal Account, 742
- Managing Other Provider Portal Accounts, 745
- Managing Patient Portal Accounts, 750

For more information on sending secure messages, watch the "Secure Messaging" and "Provide Patient Access" videos.

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.

Understanding 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	*The protocol used to send secure messages.* You may sometimes see secure messages referred to as direct messages.
patient portal	*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.
provider portal	*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.
secure message	*An encrypted message sent from a person with a verified security certificate.* The message may contain a health-related question or a clinical summary.
security certificate	*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.

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, 719
- To edit practice portal information, 720
- To edit practice hours, 722
- To edit provider portal settings, 722
- To save the portal settings and register, 723
- To establish provider direct mailbox passwords, 725
- To establish a direct messaging security certificate, 726

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.

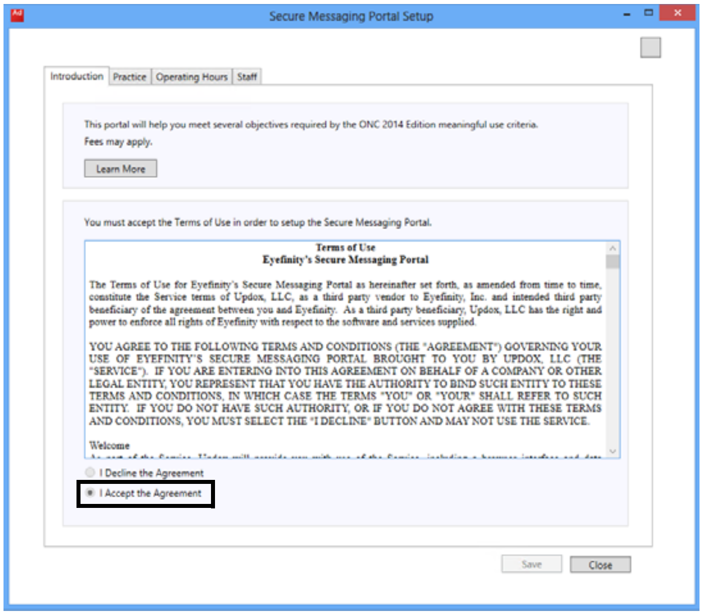
- Choose a standard naming convention for the Direct Mailbox that identifies the provider. Here are some suggestions:
  – First initial, last name (e.g., *jdoctor*)
  – First name, period, last name (e.g., *johnny.doctor*)
- Use your email address as your temporary administrator user name. If you forget 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.



This portal will help you meet several objectives required by the ONC 2014 Edition meaningful use criteria.

Fees may apply.

You must accept the Terms of Use in order to setup the Secure Messaging Portal.

Terms of Use
Eyefinity's Secure Messaging Portal

The Terms of Use for Eyefinity's Secure Messaging Portal as hereinafter set forth, as amended from time to time, constitute the Service terms of Updox, LLC, as a third party vendor to Eyefinity, Inc. and intended third party beneficiary of the agreement between you and Eyefinity. As a third party beneficiary, Updox, LLC has the right and power to enforce all rights of Eyefinity with respect to the software and services supplied.

YOU AGREE TO THE FOLLOWING TERMS AND CONDITIONS (THE "AGREEMENT") GOVERNING YOUR USE OF EYEFINITY'S SECURE MESSAGING PORTAL BROUGHT TO YOU BY UPDOX, LLC (THE "SERVICE"). IF YOU ARE ENTERING INTO THIS AGREEMENT ON BEHALF OF A COMPANY OR OTHER LEGAL ENTITY, YOU REPRESENT THAT YOU HAVE THE AUTHORITY TO BIND SUCH ENTITY TO THESE TERMS AND CONDITIONS, IN WHICH CASE THE TERMS "YOU" OR "YOUR" SHALL REFER TO SUCH ENTITY. IF YOU DO NOT HAVE SUCH AUTHORITY, OR IF YOU DO NOT AGREE WITH THESE TERMS AND CONDITIONS, YOU MUST SELECT THE "I DECLINE" BUTTON AND MAY NOT USE THE SERVICE.

Welcome

○ I Decline the Agreement
● I Accept the Agreement

▶ 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 719.
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.

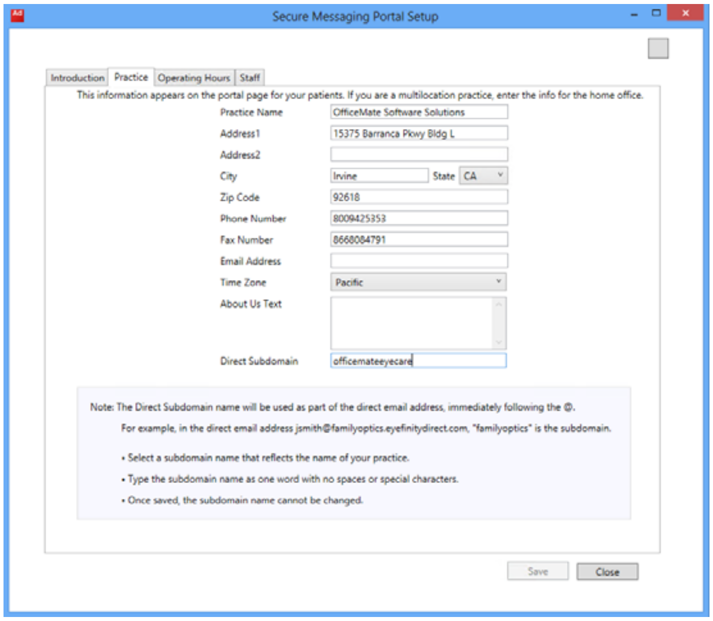
7. Select the **Time Zone** of the practice's home office.
8. Type a brief description of your practice in the **About Us Text** field.
9. Type a **Direct Subdomain** that identifies your practice.

NOTES

- The direct mail address consists of a mailbox, a subdomain, and a domain. Your direct mail addresses will look similar to this:

  $$\underbrace{\text{johnnydoctor}}_{\text{mailbox}}\text{@}\underbrace{\text{joeseyecare}}_{\text{subdomain}}\text{.}\underbrace{\text{eyefinitydirect.com}}_{\text{domain}}$$

- 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.



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: OfficeMate Software Solutions
Address1: 15375 Barranca Pkwy Bldg L
Address2:
City: Irvine State: CA
Zip Code: 92618
Phone Number: 8009425353
Fax Number: 8668084791
Email Address:
Time Zone: Pacific
About Us Text:
Direct Subdomain: officemateeyecare

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.

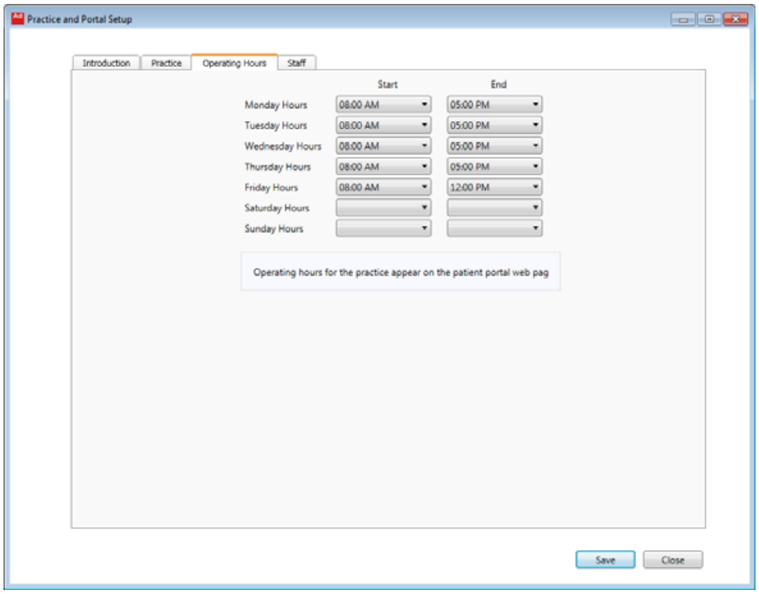
- Select a subdomain name that reflects the name of your practice.
- Type the subdomain name as one word with no spaces or special characters.
- Once saved, the subdomain name cannot be changed.

10. Continue to "To edit practice hours" on page 722.

▶ 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 719.
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

4. Continue to "To edit provider portal settings" on page 722.

▶ 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 719.
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.

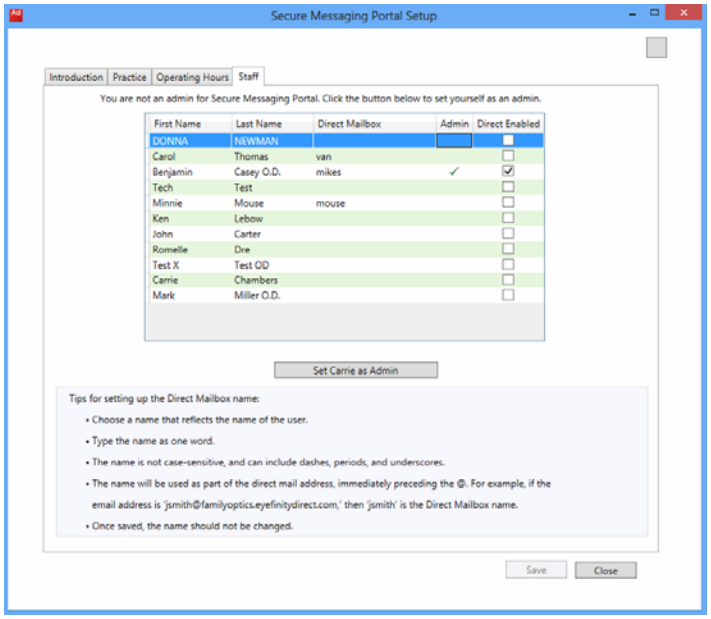
NOTE

- 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.



You are not an admin for Secure Messaging Portal. Click the button below to set yourself as an admin.

First Name	Last Name	Direct Mailbox	Admin	Direct Enabled
DONNA	NEWMAN			☐
Carol	Thomas	van		☐
Benjamin	Casey O.D.	mikes	✓	☑
Tech	Test			☐
Minnie	Mouse	mouse		☐
Ken	Lebow			☐
John	Carter			☐
Romelle	Dre			☐
Test X	Test OD			☐
Carrie	Chambers			☐
Mark	Miller O.D.			☐

Tips for setting up the Direct Mailbox name:

- Choose a name that reflects the name of the user.
- Type the name as one word.
- The name is not case-sensitive, and can include dashes, periods, and underscores.
- The name will be used as part of the direct mail address, immediately preceding the @. For example, if the email address is 'jsmith@familyoptics.eyefinitydirect.com,' then 'jsmith' is the Direct Mailbox name.
- Once saved, the name should not be changed.

6. Continue to "To save the portal settings and register" on page 723.

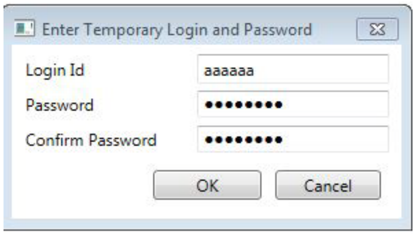
To save the portal settings and register

1. Open the Secure Messaging Portal Setup window. For more information, go to "To open the Secure Messaging Portal Setup window" on page 719.
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 725.

   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.



Enter Temporary Login and Password

Login Id: aaaaaa

Password: ●●●●●●●●●

Confirm 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.

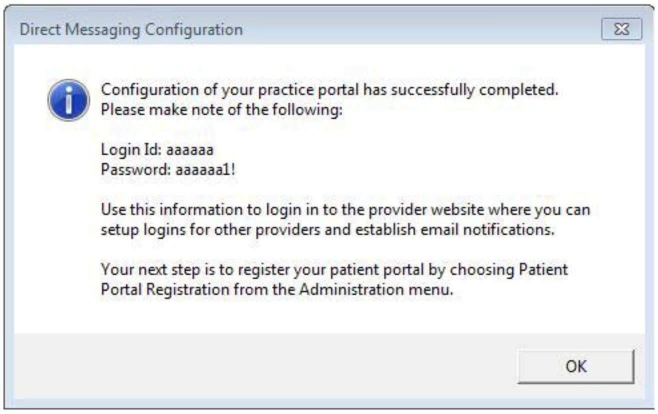
5. Choose a **Password**. Re-enter the password and click **OK**.

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.

6. 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.



Configuration of your practice portal has successfully completed.
Please make note of the following:

Login Id: aaaaaa
Password: aaaaaa1!

Use this information to login in to the provider website where you can setup logins for other providers and establish email notifications.

Your next step is to register your patient portal by choosing Patient Portal Registration from the Administration menu.

7. Continue to "To establish provider direct mailbox passwords" on page 725.

▶ 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.

1. Open your web browser and go to https://eyefinityew.com.
2. 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.

3. Click **Configure** (gear icon) and select **Manage Users**.
4. 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.

5. Notify the providers individually of their user names and passwords.
6. If this is the first time you have setup the secure messaging portal, continue to "To establish a direct messaging security certificate" on page 726.

▶ 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:

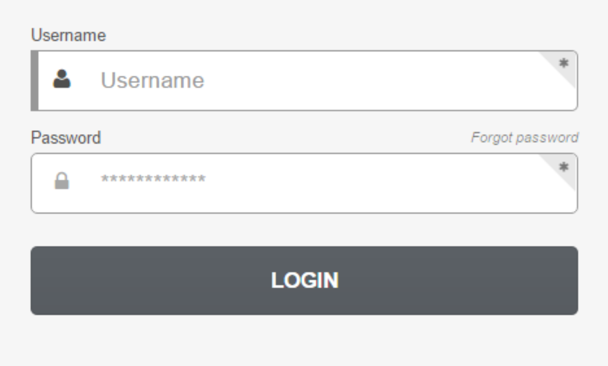
- You will see the messages sent to all providers in your practice. While the message you send are secure, they are not private. Other providers in your practice will see your messages.
- You can send messages only to other providers who have a secure direct messaging account. These accounts are different then 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 742.



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, 728
- To preview the clinical summary document, 730
- To send the clinical summary to the patient, 731

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.

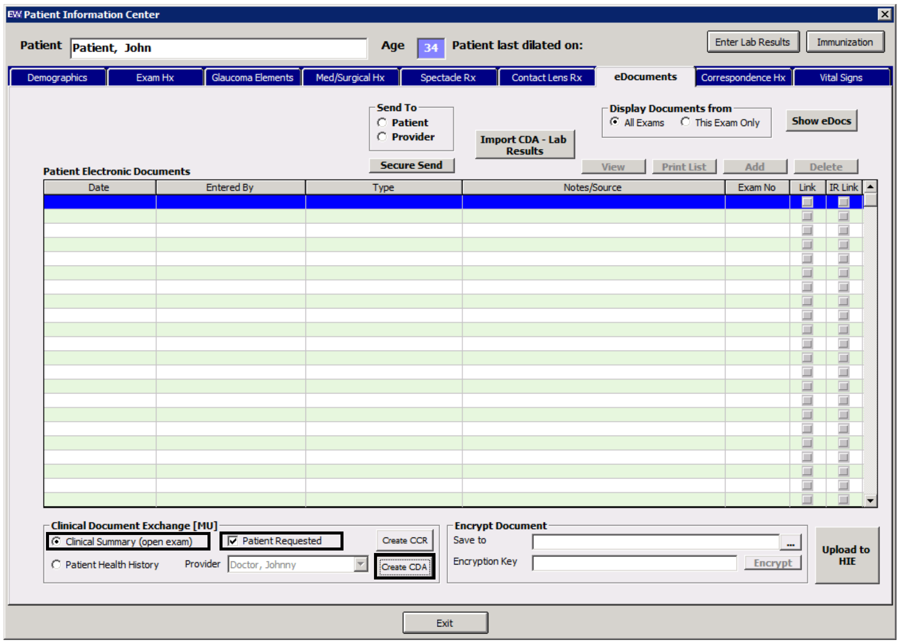
▶ To create a clinical summary document

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**.



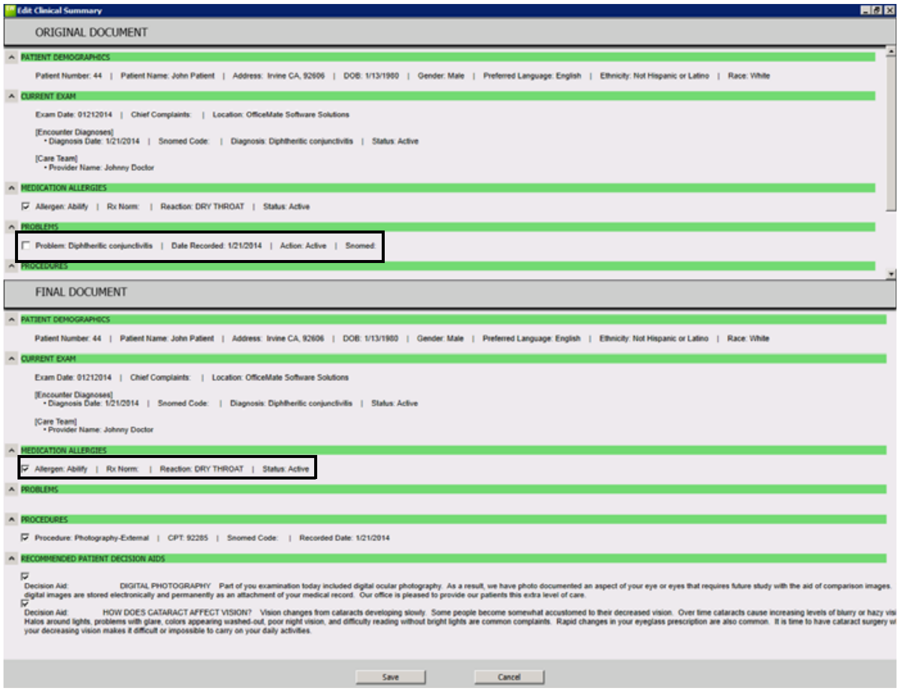
Patient: Patient, John
Age: 34
Display Documents from: ● All Exams ○ This Exam Only
● Clinical Summary (open exam) ☑ Patient Requested
○ Patient Health History
Provider: Doctor, Johnny

Patient Information Center
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
Import CDA - Lab Results
Show eDocs
Secure Send
Patient Electronic Documents
View
Print List
Add
Delete
Date
Entered By
Type
Notes/Source
Exam No
Link
IR Link
Clinical Document Exchange [MU]
Create CCR
Create CDA
Encrypt Document
Save to
Encryption Key
Encrypt
Upload to HIE
Exit

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.



ORIGINAL DOCUMENT

PATIENT DEMOGRAPHICS

Patient Number: 44 | Patient Name: John Patient | Address: Irvine CA, 92606 | DOB: 1/13/1980 | Gender: Male | Preferred Language: English | Ethnicity: Not Hispanic or Latino | Race: White

CURRENT EXAM

Exam Date: 01212014 | Chief Complaints: | Location: OfficeMate Software Solutions

[Encounter Diagnoses]
- Diagnosis Date: 1/21/2014 | Snomed Code: | Diagnosis: Diphtheritic conjunctivitis | Status: Active

[Care Team]
- Provider Name: Johnny Doctor

MEDICATION ALLERGIES

☑ Allergen: Abilify | Rx Norm: | Reaction: DRY THROAT | Status: Active

PROBLEMS

☐ Problem: Diphtheritic conjunctivitis | Date Recorded: 1/21/2014 | Action: Active | Snomed:

PROCEDURES

FINAL DOCUMENT

PATIENT DEMOGRAPHICS

Patient Number: 44 | Patient Name: John Patient | Address: Irvine CA, 92606 | DOB: 1/13/1980 | Gender: Male | Preferred Language: English | Ethnicity: Not Hispanic or Latino | Race: White

CURRENT EXAM

Exam Date: 01212014 | Chief Complaints: | Location: OfficeMate Software Solutions

[Encounter Diagnoses]
- Diagnosis Date: 1/21/2014 | Snomed Code: | Diagnosis: Diphtheritic conjunctivitis | Status: Active

[Care Team]
- Provider Name: Johnny Doctor

MEDICATION ALLERGIES

☑ Allergen: Abilify | Rx Norm: | Reaction: DRY THROAT | Status: Active

PROBLEMS

PROCEDURES

☑ Procedure: Photography-External | CPT: 92285 | Snomed Code: | Recorded Date: 1/21/2014

RECOMMENDED PATIENT DECISION AIDS

☑
Decision Aid: DIGITAL PHOTOGRAPHY Part of you examination today included digital ocular photography. As a result, we have photo documented an aspect of your eye or eyes that requires future study with the aid of comparison images. digital images are stored electronically and permanently as an attachment of your medical record. Our office is pleased to provide our patients this extra level of care.

☑
Decision Aid: HOW DOES CATARACT AFFECT VISION? Vision changes from cataracts developing slowly. Some people become somewhat accustomed to their decreased vision. Over time cataracts cause increasing levels of blurry or hazy visi
Halos around lights, problems with glare, colors appearing washed-out, poor night vision, and difficulty reading without bright lights are common complaints. Rapid changes in your eyeglass prescription are also common. It is time to have cataract surgery wi
your decreasing vision makes it difficult or impossible to carry on your daily activities.

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.

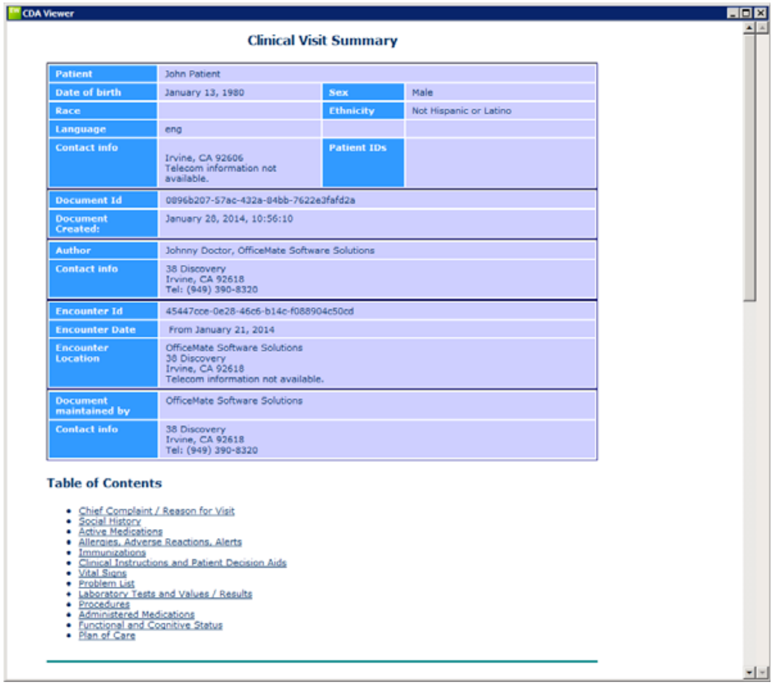
▶ To preview the clinical summary document

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.

3. 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		
Contact info	Irvine, CA 92606 Telecom information not available.	Patient IDs	
Document Id	0896b207-57ac-432a-84bb-7622e3fafd2a		
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	45447cce-0e28-46c6-b14c-f088904c50cd		
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

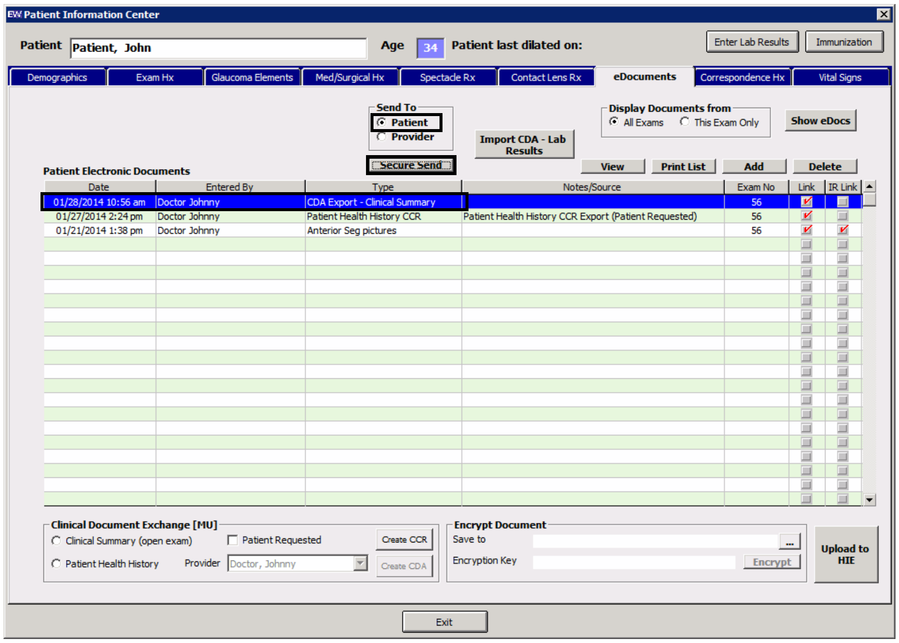
- Chief Complaint / Reason for Visit
- Social History
- Active Medications
- Allergies, Adverse Reactions, Alerts
- Immunizations
- Clinical Instructions and Patient Decision Aids
- Vital Signs
- Problem List
- Laboratory Tests and Values / Results
- Procedures
- Administered Medications
- Functional and Cognitive Status
- Plan of Care

4. Click the × to close the window when you're finished.

▶ To send the clinical summary to the patient

1. Select the clinical summary from the **Patient Electronic Documents** list.
2. Select **Patient** from the **Send To** radio buttons.

3. Click **Secure Send**.


Patient Information Center
Enter Lab Results
Immunization
Demographics
Exam Hx
Glaucoma Elements
Med/Surgical Hx
Spectacle Rx
Contact Lens Rx
eDocuments
Correspondence Hx
Vital Signs
Send To
Import CDA - Lab Results
Display Documents from
Show eDocs
Secure Send
View
Print List
Add
Delete
Clinical Document Exchange [MU]
○ Clinical Summary (open exam)
○ Patient Health History
☐ Patient Requested
Create CCR
Create CDA
Encrypt Document
Save to
Encryption Key
Encrypt
Upload to HIE
Exit

Patient: Patient, John
Age: 34
Patient last dilated on:

Send To: ● Patient ○ Provider

Display Documents from: ● All Exams ○ This Exam Only

Provider: Doctor, Johnny

Patient Electronic Documents

Date	Entered By	Type	Notes/Source	Exam No	Link	IR Link
01/28/2014 10:56 am	Doctor Johnny	CDA Export - Clinical Summary		56	☑	☐
01/27/2014 2:24 pm	Doctor Johnny	Patient Health History CCR	Patient Health History CCR Export (Patient Requested)	56	☑	☐
01/21/2014 1:38 pm	Doctor Johnny	Anterior Seg pictures		56	☑	☑

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.

Understanding Patient Access

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, 733
- Changing Patient Account Settings, 735
- Viewing Clinical Summaries, 735
- Sending Clinical Summaries to Other Providers, 737
- Downloading Clinical Summaries, 738
- Sending Secure Messages, 738

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 750.

Activating the Patient Account

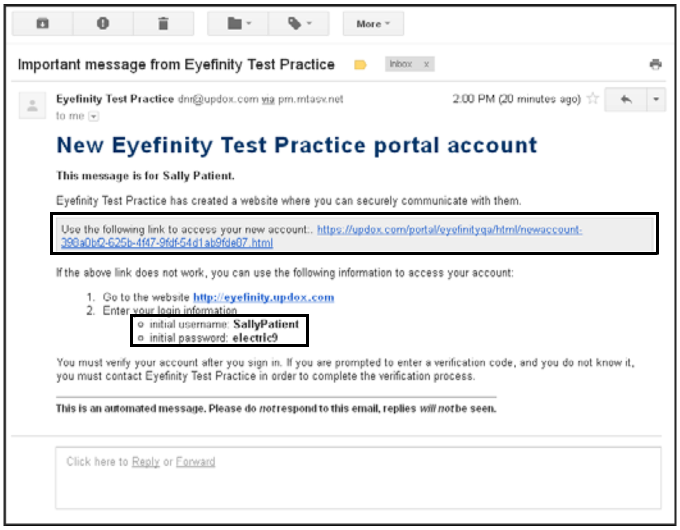
OfficeMate uses the patient's name, date of birth, and email address to create the secure messaging account. Verify this information on the Demographics tab before sending a clinical summary. To create a patient's account, you must send a clinical summary.

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.


More
Important message from Eyefinity Test Practice
Inbox x
Eyefinity Test Practice dnr@updox.com via pm.mtasv.net
to me
2:00 PM (20 minutes ago)

New Eyefinity Test Practice portal account

This message is for Sally Patient.

Eyefinity Test Practice has created a website where you can securely communicate with them.

Use the following link to access your new account:. https://updox.com/portal/eyefinityqa/html/newaccount-398a0bf2-625b-4f47-9fdf-54d1ab9fde07.html

If the above link does not work, you can use the following information to access your account:

1. Go to the website **http://eyefinity.updox.com**
2. Enter your login information
   - initial username: **SallyPatient**
   - initial password: **electric9**

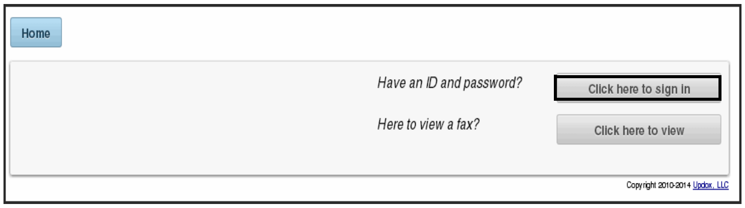
You must verify your account after you sign in. If you are prompted to enter a verification code, and you do not know it, you must contact Eyefinity Test Practice in order to complete the verification process.

This is an automated message. Please do *not* respond to this email, replies *will not* be seen.

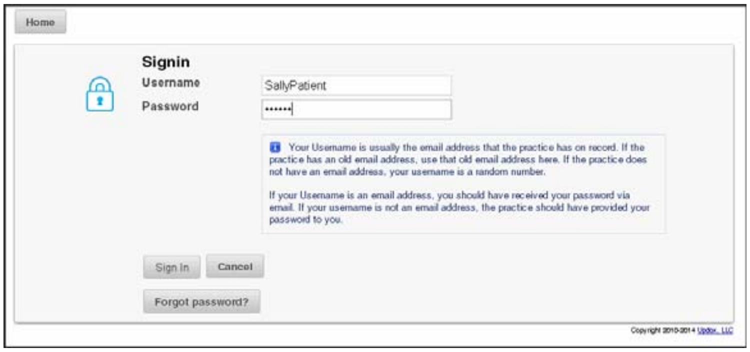
Click here to Reply or Forward

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**.


Home
Have an ID and password?
Click here to sign In
Here to view a fax?
Click here to view
Copyright 2010-2014 Updox, LLC

3. Type the **Username** and **Password** that were indicated on the activation email and click **Sign In**.


Home
Signin

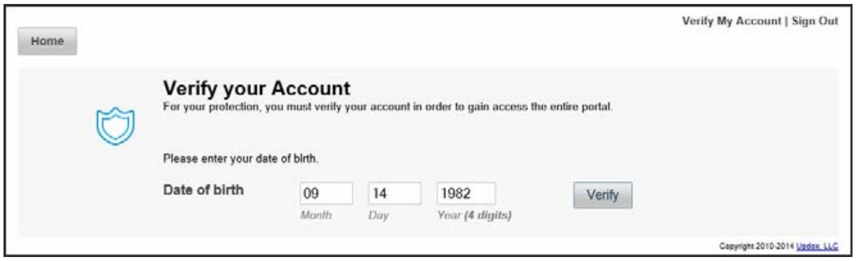
Username SallyPatient
Password ••••••

Your Username is usually the email address that the practice has on record. If the practice has an old email address, use that old email address here. If the practice does not have an email address, your username is a random number.

If your Username is an email address, you should have received your password via email. If your username is not an email address, the practice should have provided your password to you.

Sign In
Cancel
Forgot password?
Copyright 2010-2014 Updox, LLC

4. For added security, type your **Date of Birth** and click **Verify**.



Verify your Account

For your protection, you must verify your account in order to gain access the entire portal.

Please enter your date of birth.

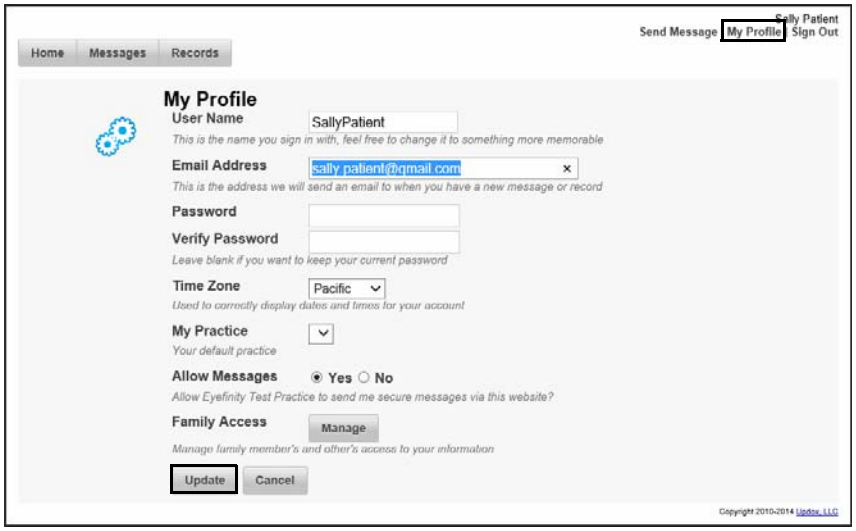
Date of birth: 09 (Month) 14 (Day) 1982 (Year (4 digits))

Copyright 2010-2014 Updox, LLC

Changing Patient Account Settings

The first thing the patient should do when after activating the account is change the settings under My Profile.

1. Click **My Profile**.
2. Edit the **User Name**, **Email Address**, and **Password** as needed.
3. Click **Update**.



My Profile

User Name: SallyPatient
This is the name you sign in with, feel free to change it to something more memorable

Email Address: sally.patient@gmail.com
This is the address we will send an email to when you have a new message or record

Password:
Verify Password:
Leave blank if you want to keep your current password

Time Zone: Pacific
Used to correctly display dates and times for your account

My Practice:
Your default practice

Allow Messages: ● Yes ○ No
Allow Eyefinity Test Practice to send me secure messages via this website?

Family Access
Manage family member's and other's access to your information

Copyright 2010-2014 Updox, LLC

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.

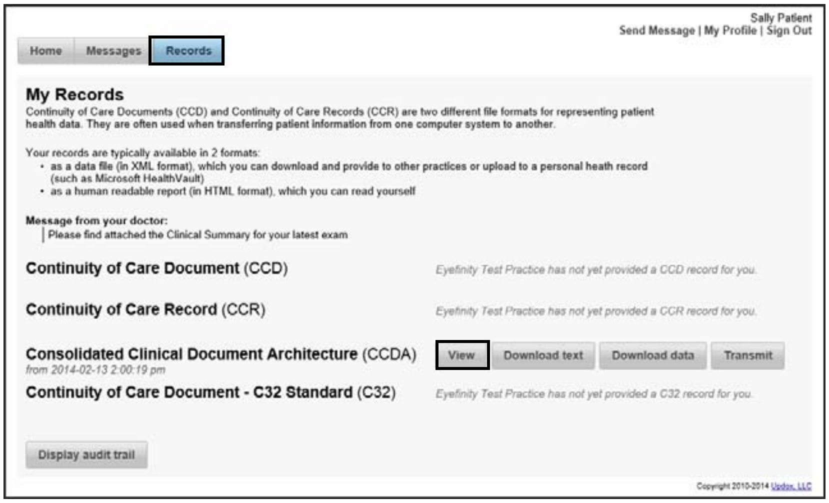
Viewing Clinical Summaries

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:

1. Click the **Records** tab.

   The Records tab displays the most recent clinical summaries.

2. Click **View**.



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 heath 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

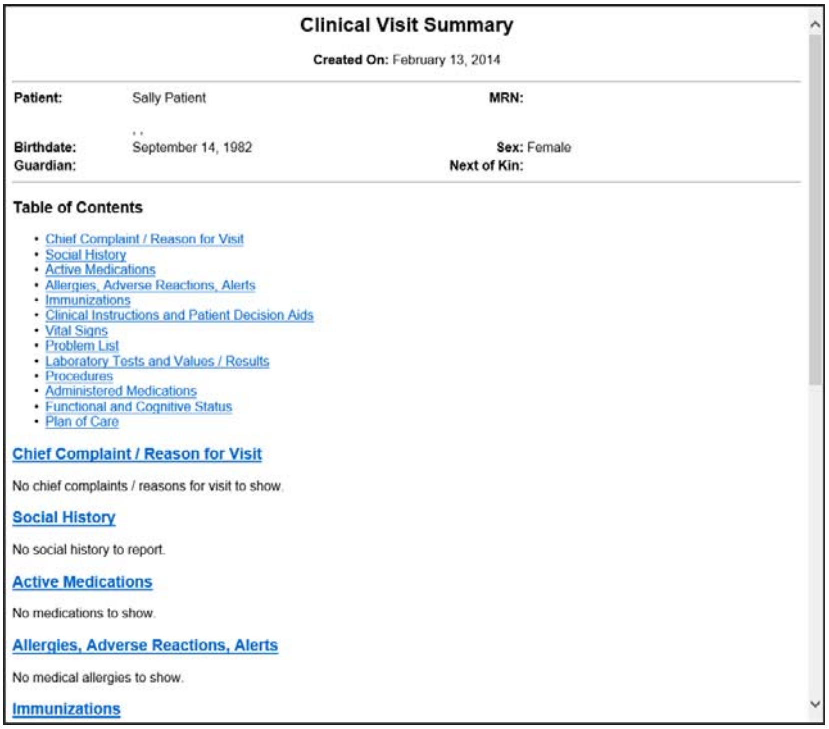
Continuity of Care Document (CCD) *Eyefinity Test Practice has not yet provided a CCD record for you.*

Continuity of Care Record (CCR) *Eyefinity Test Practice has not yet provided a CCR record for you.*

Consolidated Clinical Document Architecture (CCDA)
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.*

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

3. 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

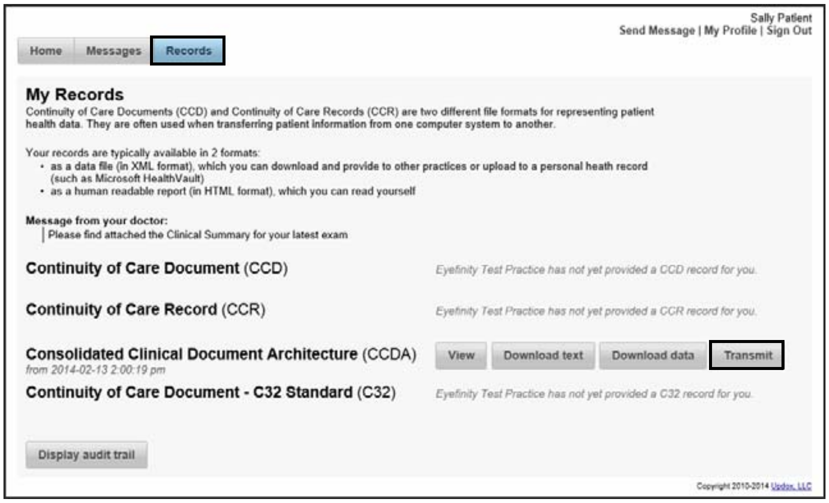
Patients may transmit their clinical summaries to other providers. When a patient transmits a clinical summary, it is reflected in the provider's meaningful use Stage 2 report.

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 726

To transmit the clinical summary, the patient must perform the following steps:

1. Click the **Records** tab.
2. Click **Transmit**.



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 heath 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.*

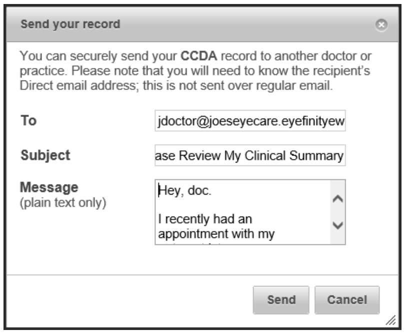
Continuity of Care Record (CCR) — *Eyefinity Test Practice has not yet provided a CCR record for you.*

Consolidated Clinical Document Architecture (CCDA)
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.*

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**.



You can securely send your **CCDA** record to another doctor or practice. Please note that you will need to know the recipient's Direct email address; this is not sent over regular email.

To: jdoctor@joeseyecare.eyefinityew

Subject: ase Review My Clinical Summary

Message (plain text only): Hey, doc.

I recently had an appointment with my

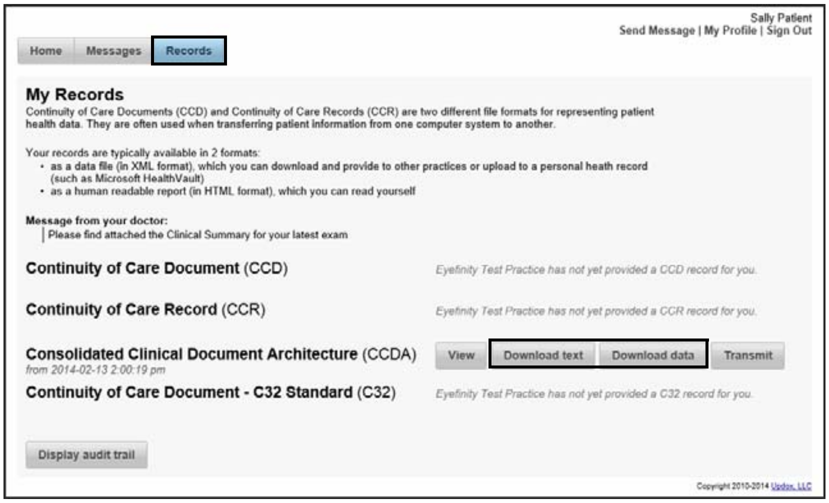
Downloading Clinical Summaries

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.


Sally Patient
Send Message | My Profile | Sign Out
Home
Messages
Records
View
Download text
Download data
Transmit
Display audit trail
Copyright 2010-2014 Updox, LLC

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 heath 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.*

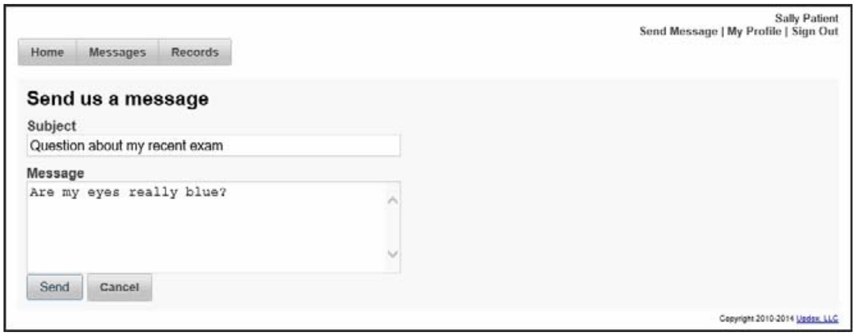
Continuity of Care Record (CCR) *Eyefinity Test Practice has not yet provided a CCR record for you.*

Consolidated Clinical Document Architecture (CCDA)
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.*

Sending Secure Messages

1. Click **Send Message**.
2. Type the **Subject** and the **Message** and click **Send**.


Sally Patient
Send Message | My Profile | Sign Out
Home
Messages
Records
Send
Cancel
Copyright 2010-2014 Updox, LLC

Send us a message

Subject: Question about my recent exam

Message: Are my eyes really blue?

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

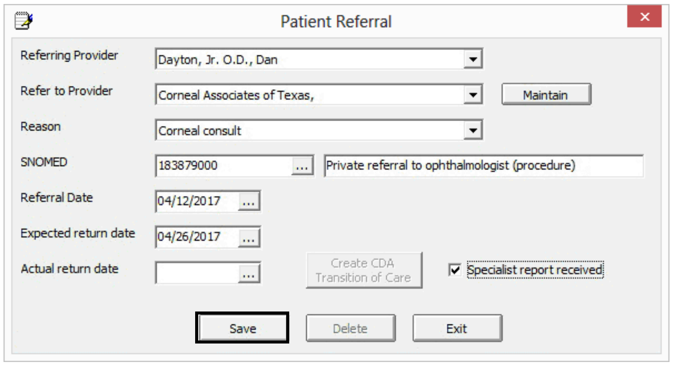
- Your practice must establish a security certificate before you will be able to exchange direct messages with a provider outside of your practice. For more information, go to “To establish a direct messaging security certificate” on page 726.
- You may send a direct message to a provider with a direct 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**.



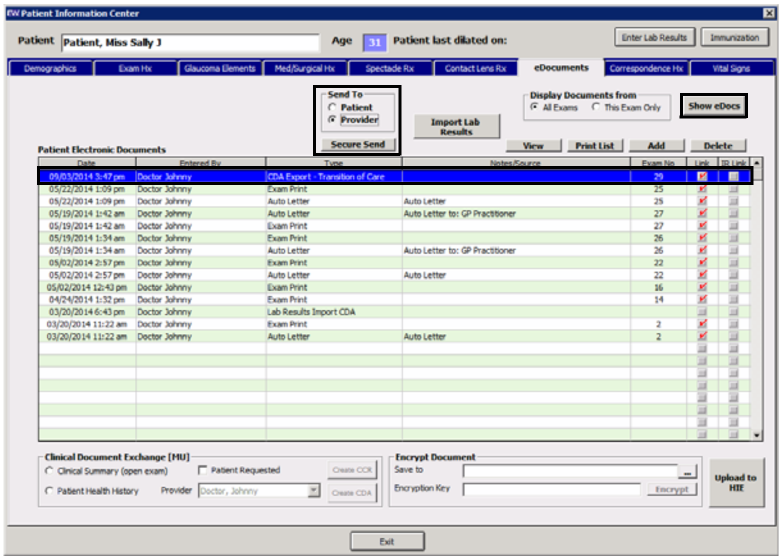
Referring Provider: Dayton, Jr. O.D., Dan
Refer to Provider: Corneal Associates of Texas,
Reason: Corneal consult
SNOMED: 183879000 … Private referral to ophthalmologist (procedure)
Referral Date: 04/12/2017
Expected return date: 04/26/2017
Actual return date:
☑ Specialist report received

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 740.

▶ 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 739.
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**.


Patient Information Center
Enter Lab Results
Immunization
Demographics
Exam Hx
Glaucoma Elements
Med/Surgical Hx
Spectacle Rx
Contact Lens Rx
eDocuments
Correspondence Hx
Vital Signs
Import Lab Results
Show eDocs
View
Print List
Add
Delete
Create CCR
Create CDA
Encrypt
Upload to HIE
Exit

Patient: Patient, Miss Sally J
Age: 31
Patient last dilated on:

Send To
○ Patient
● Provider
Secure Send

Display Documents from
● All Exams ○ This Exam Only

Patient Electronic Documents

Date	Entered By	Type	Notes/Source	Exam No	Link	IR Link
09/03/2014 3:47 pm	Doctor Johnny	CDA Export - Transition of Care		29	☑	☐
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 2:57 pm	Doctor Johnny	Exam Print		22	☑	☐
05/02/2014 2:57 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	☑	☐

Clinical Document Exchange [MU]
○ Clinical Summary (open exam) ☐ Patient Requested
○ Patient Health History Provider: Doctor, Johnny

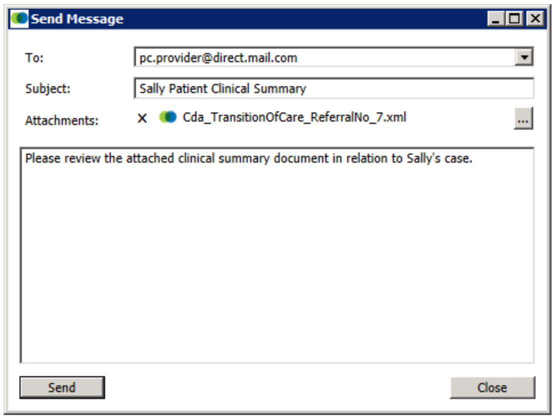
Encrypt Document
Save to:
Encryption Key:

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**.



To: pc.provider@direct.mail.com
Subject: Sally Patient Clinical Summary
Attachments: X Cda_TransitionOfCare_ReferralNo_7.xml

Please review the attached clinical summary document in relation to Sally's case.

Your message and the patient’s CDA are sent securely.

Managing Your Own Provider Portal Account

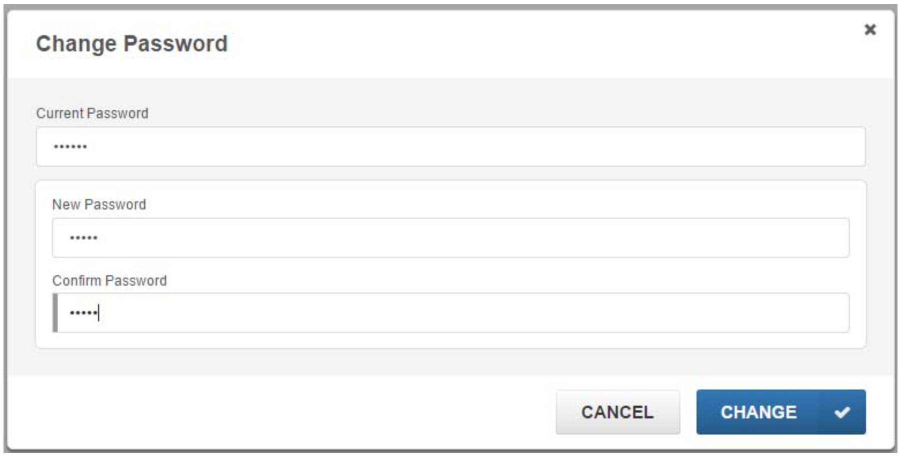
You can manage various aspects of your provider portal account. This section tells you how to manage your account, including how

- To change your password, 742
- To change your display name, 742
- To change your message signature, 743
- To change your provider portal settings, 744
- To change your email and text message notifications, 744

▶ 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.

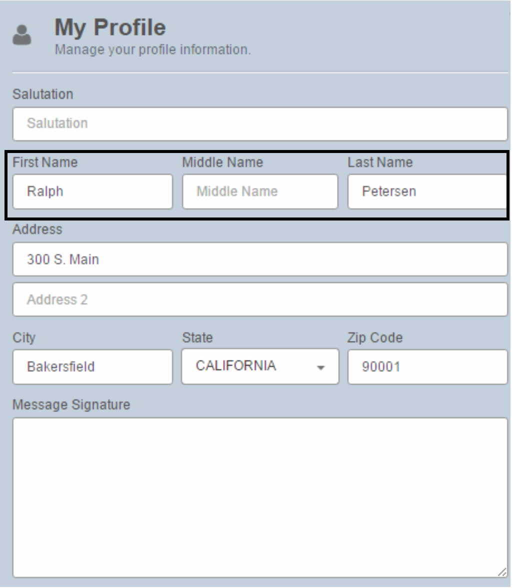
1. Log into the provider portal.
2. Click **Menu**.
3. Click **Tools** and select **Change Password**.
4. Type your **Current Password**.
5. Type your **New Password**.
6. Type your new password again in the **Confirm Password** field.
7. Click **Change**.



▶ 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.



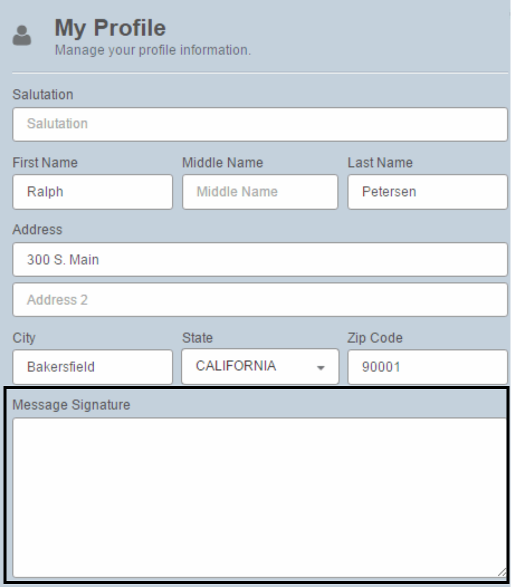
My Profile
Manage your profile information.

Salutation: Salutation
First Name: Ralph
Middle Name: Middle Name
Last Name: Petersen
Address: 300 S. Main
Address 2
City: Bakersfield
State: CALIFORNIA
Zip Code: 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: Ralph
Middle Name: Middle Name
Last Name: Petersen
Address: 300 S. Main
Address 2
City: Bakersfield
State: CALIFORNIA
Zip Code: 90001
Message Signature

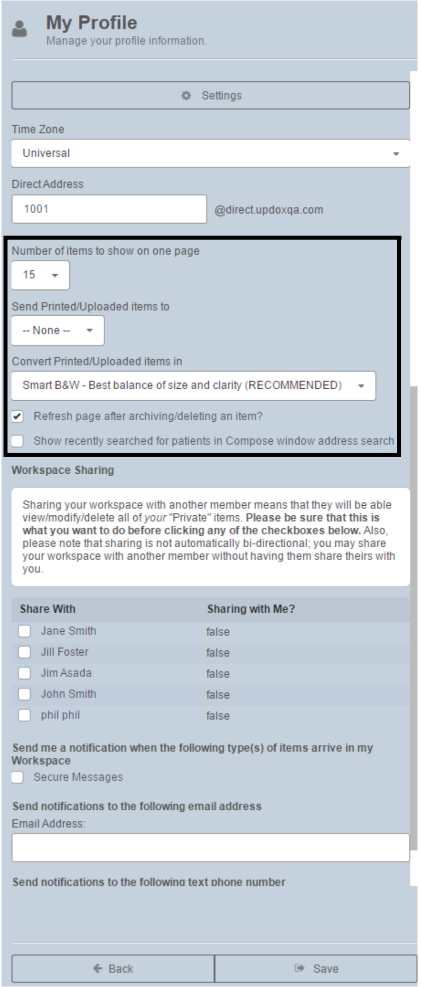
5. Click **Save**.

▶ 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.



My Profile

Manage your profile information.

Time Zone: Universal

Direct Address: 1001 @direct.updoxqa.com

Number of items to show on one page: 15

Send Printed/Uploaded items to: -- None --

Convert Printed/Uploaded items in: Smart B&W - Best balance of size and clarity (RECOMMENDED)

☑ Refresh page after archiving/deleting an item?

☐ Show recently searched for patients in Compose window address search

Workspace Sharing

Sharing your workspace with another member means that they will be able view/modify/delete all of *your* "Private" items. **Please be sure that this is what you want to do before clicking any of the checkboxes below.** Also, please note that sharing is not automatically bi-directional; you may share your workspace with another member without having them share theirs with you.

Share With	Sharing with Me?
☐ Jane Smith	false
☐ Jill Foster	false
☐ Jim Asada	false
☐ John Smith	false
☐ phil phil	false

Send me a notification when the following type(s) of items arrive in my Workspace

☐ Secure Messages

Send notifications to the following email address

Email Address:

Send notifications to the following text phone number

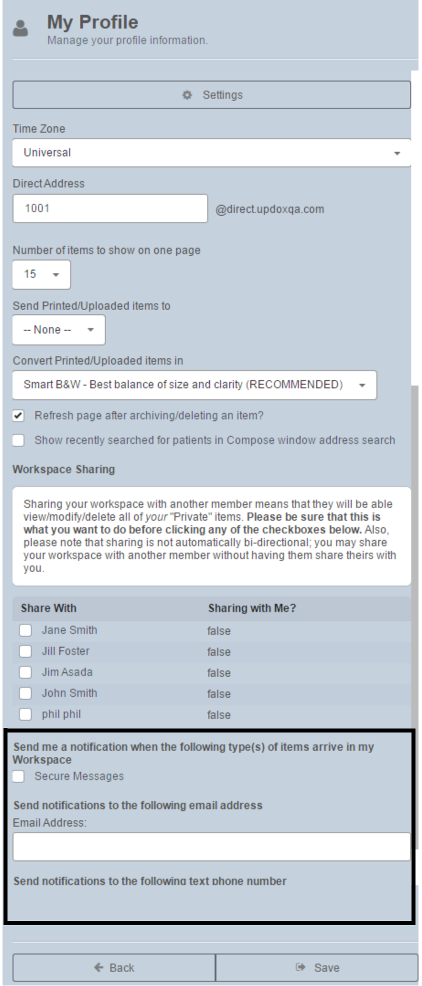
6. Click **Save**.

▶ 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.



My Profile
Manage your profile information.

Time Zone: Universal

Direct Address: 1001 @direct.updoxqa.com

Number of items to show on one page: 15

Send Printed/Uploaded items to: -- None --

Convert Printed/Uploaded items in: Smart B&W - Best balance of size and clarity (RECOMMENDED)

☑ Refresh page after archiving/deleting an item?

☐ Show recently searched for patients in Compose window address search

Workspace Sharing

Sharing your workspace with another member means that they will be able view/modify/delete all of *your* "Private" items. **Please be sure that this is what you want to do before clicking any of the checkboxes below.** Also, please note that sharing is not automatically bi-directional; you may share your workspace with another member without having them share theirs with you.

Share With	Sharing with Me?
☐ Jane Smith	false
☐ Jill Foster	false
☐ Jim Asada	false
☐ John Smith	false
☐ phil phil	false

Send me a notification when the following type(s) of items arrive in my Workspace

☐ Secure Messages

Send notifications to the following email address

Email Address:

Send notifications to the following text phone number

8. Click **Save**.

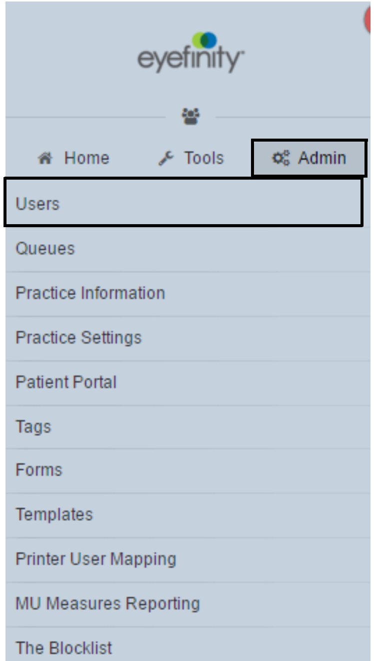
Managing Other Provider Portal Accounts

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

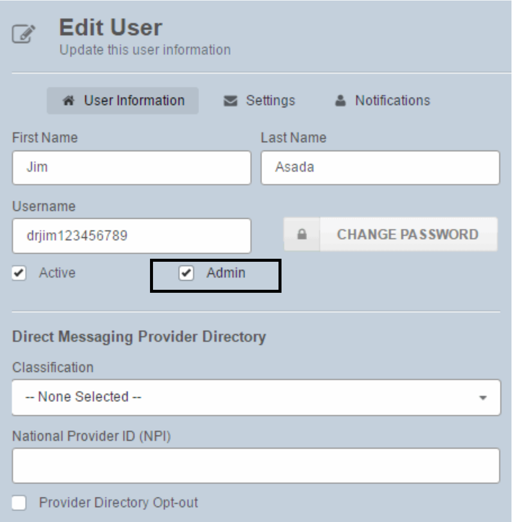
- To assign admin rights to another provider, 746
- To change a provider's display name, 747
- To change a provider's username and password, 748
- To manage the practice portal profile, 750

▶ To assign admin rights to another provider

1. Log into the provider portal.
2. Click **Menu**.
3. Click **Admin** and select **Users**.


eyefinity
Home
Tools
Admin
Users
Queues
Practice Information
Practice Settings
Patient Portal
Tags
Forms
Templates
Printer User Mapping
MU Measures Reporting
The Blocklist

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.


Edit User
Update this user information
User Information
Settings
Notifications
CHANGE PASSWORD

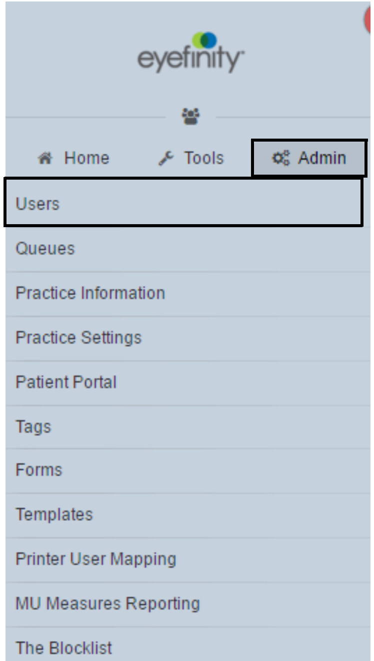
First Name: Jim
Last Name: Asada
Username: drjim123456789
☑ Active ☑ Admin

Direct Messaging Provider Directory
Classification: -- None Selected --
National Provider ID (NPI):
☐ Provider Directory Opt-out

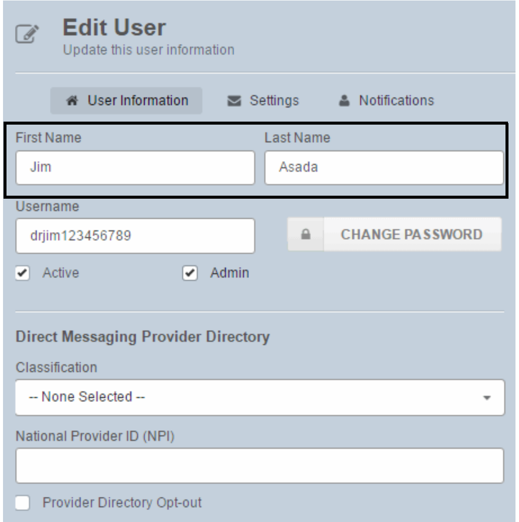
6. Click **Save**.

▶ To change a provider’s display name

1. Log into the provider portal.
2. Click **Menu**.
3. Click **Admin** and select **Users**.


eyefinity
Home
Tools
Admin
Users
Queues
Practice Information
Practice Settings
Patient Portal
Tags
Forms
Templates
Printer User Mapping
MU Measures Reporting
The Blocklist

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.


User Information
Settings
Notifications
CHANGE PASSWORD

Edit User
Update this user information

First Name: Jim
Last Name: Asada
Username: drjim123456789
☑ Active
☑ Admin

Direct Messaging Provider Directory

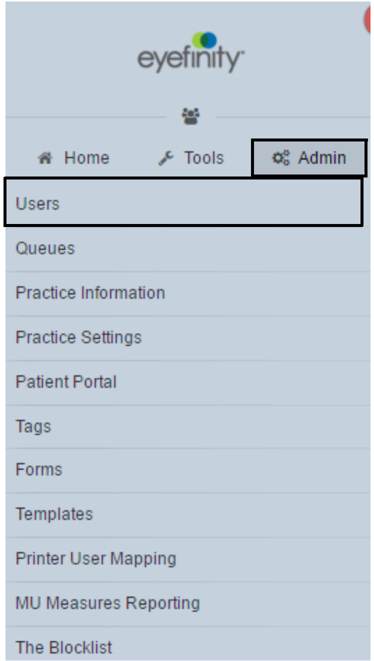
Classification: -- None Selected --
National Provider ID (NPI):
☐ Provider Directory Opt-out

6. Click **Save**.

▶ To change a provider’s username and password

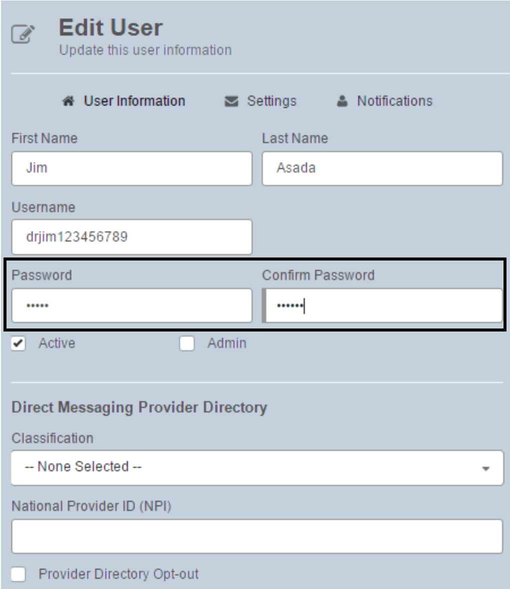
NOTE	If you modify a username or password in your portal account, then it will not match what is displayed on the Staff tab in the Secure Messaging Portal Setup window in OfficeMate/ExamWRITER.

1. Log into the provider portal.
2. Click **Menu**.
3. Click **Admin** and select **Users**.


eyefinity
Home
Tools
Admin
Users
Queues
Practice Information
Practice Settings
Patient Portal
Tags
Forms
Templates
Printer User Mapping
MU Measures Reporting
The Blocklist

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.



Edit User

Update this user information

First Name: Jim

Last Name: Asada

Username: drjim123456789

Password: •••••

Confirm Password: ••••••

☑ Active ☐ Admin

Direct Messaging Provider Directory

Classification: -- None Selected --

National Provider ID (NPI):

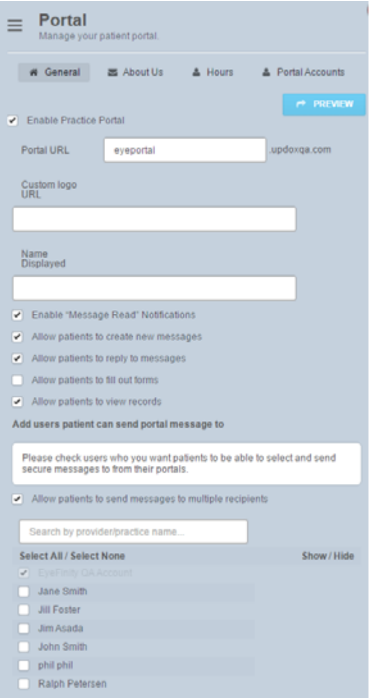
☐ Provider Directory Opt-out

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.



☑ Enable Practice Portal

Portal URL: eyeportal .updoxqa.com

Custom logo URL:

Name Displayed:

☑ Enable "Message Read" Notifications
☑ Allow patients to create new messages
☑ Allow patients to reply to messages
☐ Allow patients to fill out forms
☑ Allow patients to view records

Add users patient can send portal message to

Please check users who you want patients to be able to select and send secure messages to from their portals.

☑ Allow patients to send messages to multiple recipients

Search by provider/practice name...

☑ EyeFinity QA Account
☐ Jane Smith
☐ Jill Foster
☐ Jim Asada
☐ John Smith
☐ phil phil
☐ Ralph Petersen

Managing Patient Portal Accounts

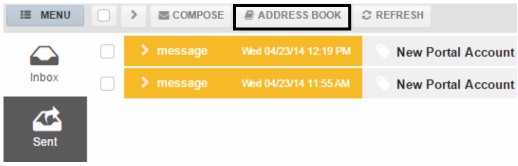
As a provider, you can manage the portal accounts of patients in your practice. This section tells you how to manage patient accounts, including how

- To update a patient's email address, 751
- To reset a patient's password, 752
- 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.

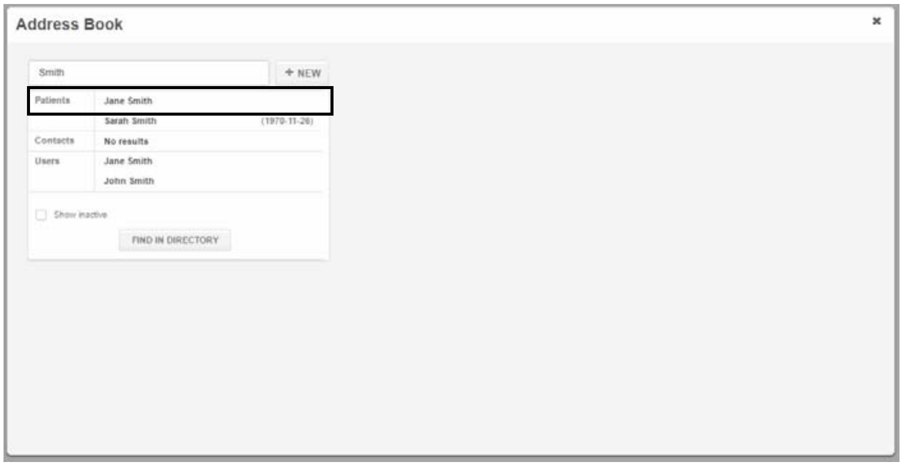
1. Log into the provider portal.
2. Click **Address Book**.


MENU
COMPOSE
ADDRESS BOOK
REFRESH
Inbox
Sent

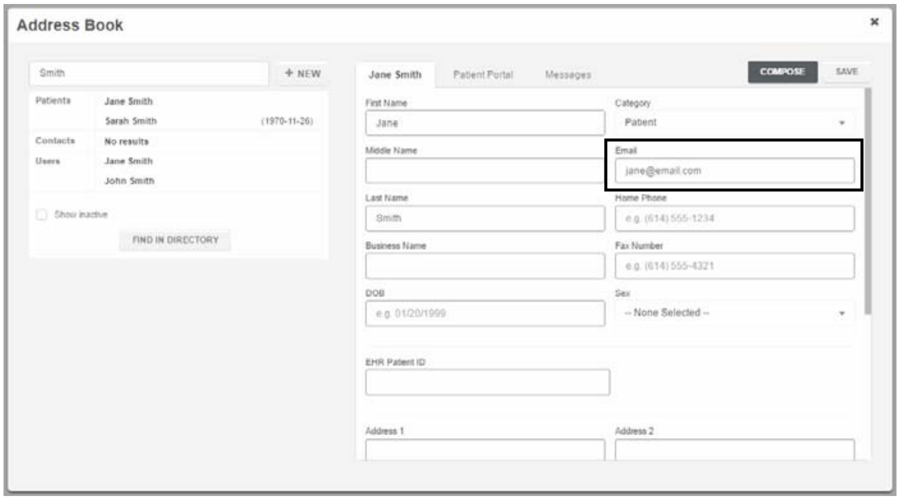
message Wed 04/23/14 12:19 PM New Portal Account

message Wed 04/23/14 11:55 AM New Portal Account

3. Search for and select the patient you want to edit.


Address Book
Smith
NEW
Patients
Jane Smith
Sarah Smith
(1970-11-26)
Contacts
No results
Users
Jane Smith
John Smith
Show inactive
FIND IN DIRECTORY

4. Type the patient’s new email address in the **Email** text box.

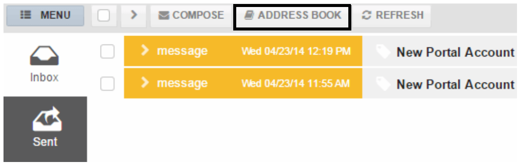

Address Book
Smith
NEW
Patients
Jane Smith
Sarah Smith
(1970-11-26)
Contacts
No results
Users
Jane Smith
John Smith
Show inactive
FIND IN DIRECTORY
Jane Smith
Patient Portal
Messages
COMPOSE
SAVE
Middle Name
Business Name
Home Phone
e.g. (614) 555-1234
Fax Number
e.g. (614) 555-4321
DOB
e.g. 01/20/1999
Sex
-- None Selected --
EHR Patient ID
Address 1
Address 2

First Name: Jane
Category: Patient
Email: jane@email.com
Last Name: Smith

5. Click **Save**.

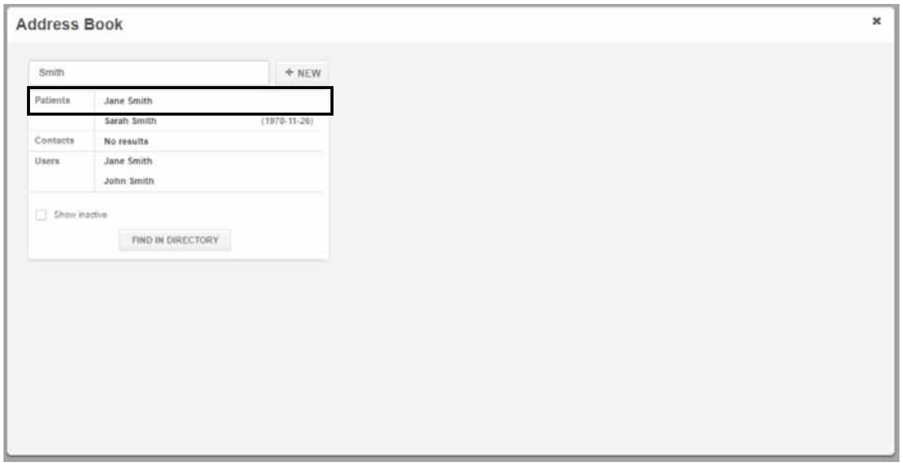
▶ To reset a patient's password

1. Log into the provider portal.
2. Click **Address Book**.


MENU
COMPOSE
ADDRESS BOOK
REFRESH
Inbox
Sent

message Wed 04/23/14 12:19 PM New Portal Account
message Wed 04/23/14 11:55 AM New Portal Account

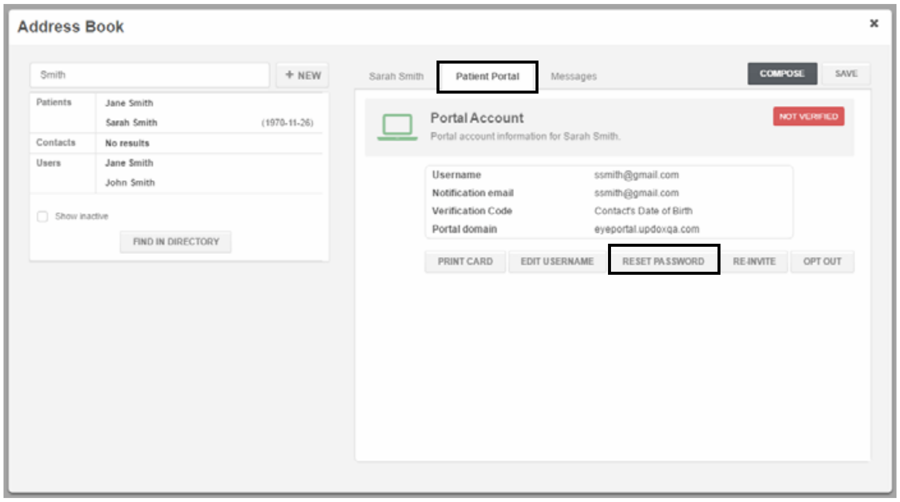
3. Search for and select the patient you want to edit.


Address Book
+ NEW
Show inactive
FIND IN DIRECTORY

Smith

Patients	Jane Smith	
	Sarah Smith	(1970-11-26)
Contacts	No results	
Users	Jane Smith	
	John Smith	

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.


Address Book
+ NEW
Show inactive
FIND IN DIRECTORY
Sarah Smith
Patient Portal
Messages
COMPOSE
SAVE
Portal Account
NOT VERIFIED
PRINT CARD
EDIT USERNAME
RESET PASSWORD
RE-INVITE
OPT OUT

Portal account information for Sarah Smith.

Username	ssmith@gmail.com
Notification email	ssmith@gmail.com
Verification Code	Contact's Date of Birth
Portal domain	eyeportal.updoxqa.com

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 752.

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.

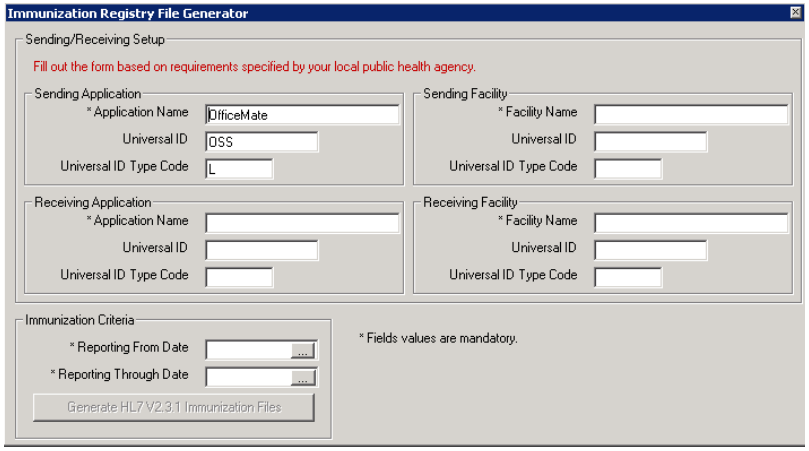
Generating Immunization Registry Files

For information on managing and viewing immunizations for a patient in ExamWRITER, watch the "Immunization Registry Reporting" video.

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\eDocuments\ImmunizationRegistry folder. You can print the files or view them in Notepad. File names follow the format: VXU_V04_231_Patient ID_date.


Immunization Registry File Generator
Sending/Receiving Setup
Sending Application
Sending Facility
* Facility Name
Universal ID
Universal ID Type Code
Receiving Application
* Application Name
Universal ID
Universal ID Type Code
Receiving Facility
* Facility Name
Universal ID
Universal ID Type Code
Immunization Criteria
* Reporting From Date
* Reporting Through Date
Generate HL7 V2.3.1 Immunization Files

Fill out the form based on requirements specified by your local public health agency.

* Application Name: OfficeMate

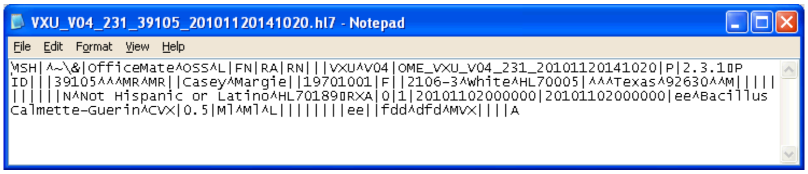
Universal ID: OSS

Universal ID Type Code: L

* Fields values are mandatory.

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.


VXU_V04_231_39105_20101120141020.hl7 - Notepad
File Edit Format View Help

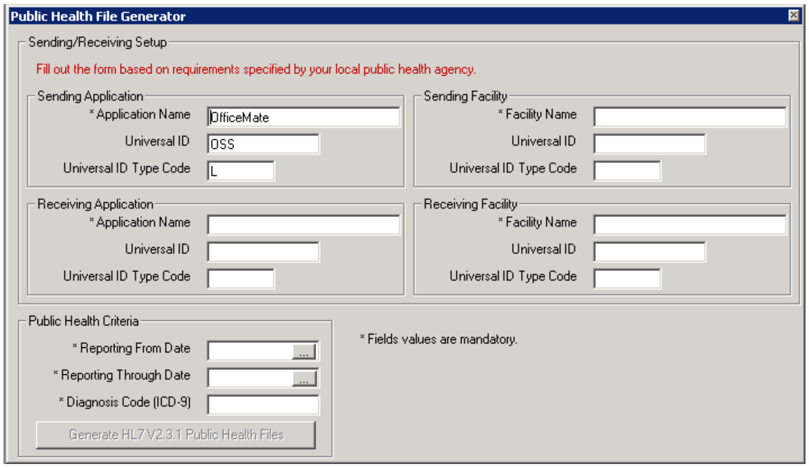
```
MSH|^~\&|OfficeMate^OSS^L|FN|RA|RN|||VXU^V04|OME_VXU_V04_231_20101120141020|P|2.3.1□P
ID|||39105^^^MR^MR||Casey^Margie||19701001|F||2106-3^White^HL70005|^^^Texas^92630^^M|||||
||||||N^Not Hispanic or Latino^HL70189□RXA|0|1|20101102000000|20101102000000|ee^Bacillus
Calmette-Guerin^CVX|0.5|Ml^Ml^L||||||||ee||fdd^dfd^MVX||||A
```

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.


Public Health File Generator
Sending/Receiving Setup
Sending Application
Sending Facility
* Facility Name
Universal ID
Universal ID Type Code
Receiving Application
* Application Name
Universal ID
Universal ID Type Code
Receiving Facility
* Facility Name
Universal ID
Universal ID Type Code
Public Health Criteria
* Reporting From Date
* Reporting Through Date
* Diagnosis Code (ICD-9)
Generate HL7 V2.3.1 Public Health Files

Fill out the form based on requirements specified by your local public health agency.

* Application Name: OfficeMate
Universal ID: OSS
Universal ID Type Code: L

* Fields values are mandatory.

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, 757
- Reporting Quality Measures, 759

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://qpp.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.

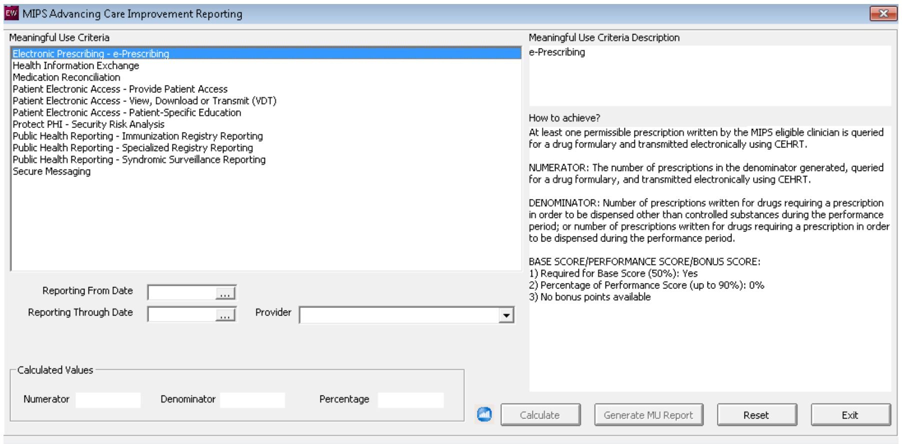
2. Select a line from the **Meaningful Use Criteria**.

   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.

5. Click **Calculate** to populate the Calculated Values fields.

   The calculated values are displayed in the Numerator, Denominator, and Percentage fields.



Electronic Prescribing - e-Prescribing
Health Information Exchange
Medication Reconciliation
Patient Electronic Access - Provide Patient Access
Patient Electronic Access - View, Download or Transmit (VDT)
Patient Electronic Access - Patient-Specific Education
Protect PHI - Security Risk Analysis
Public Health Reporting - Immunization Registry Reporting
Public Health Reporting - Specialized Registry Reporting
Public Health Reporting - Syndromic Surveillance Reporting
Secure Messaging

e-Prescribing

How to achieve?

At least one permissible prescription written by the MIPS eligible clinician is queried for a drug formulary and transmitted electronically using CEHRT.

NUMERATOR: The number of prescriptions in the denominator generated, queried for a drug formulary, and transmitted electronically using CEHRT.

DENOMINATOR: Number of prescriptions written for drugs requiring a prescription in order to be dispensed other than controlled substances during the performance period; or number of prescriptions written for drugs requiring a prescription in order to be dispensed during the performance period.

BASE SCORE/PERFORMANCE SCORE/BONUS SCORE:
1) Required for Base Score (50%): Yes
2) Percentage of Performance Score (up to 90%): 0%
3) No bonus points available

6. Click **Generate MU Report** to generate the Meaningful Use report.

   The report, an XML-based file, is placed in your DATA\eDocuments folder.

Reporting Quality Measures

If you plan to participate in the MIPS program for a full year, then you must have started documenting the NQF and CMS Quality measures in January.

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://qpp.cms.gov/measures/quality.

1. From the OfficeMate Administration or ExamWRITER main window, click the **Reports** menu, select **Merit-Based Incentive Payment System (MIPS)**, and then select **Quality**.

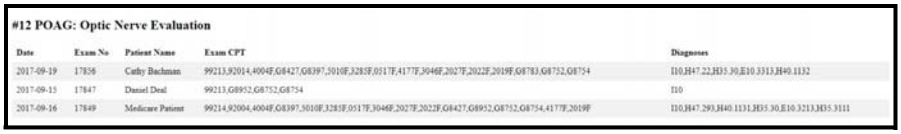
For more information on documenting MIPS quality measures, see the MIPS 2017 Quality Measures documents at www.eyefinity.com/education-and-support/OM-EW-Documentation.html.

2. Select the extent of reporting criteria that you want to view.
3. Select a line in **Reporting Criteria**.

   The related reporting criteria description is displayed in the right side of the window.
4. Select a date range from the **Reporting From Date** and **Reporting Through Date** fields.
5. Select a provider from the **Provider** drop-down menu.
6. Click **Calculate** to populate the Calculated Meaningful Use Metrics fields.

   The Generate button is enabled.

7. 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**.



#12 POAG: Optic Nerve Evaluation

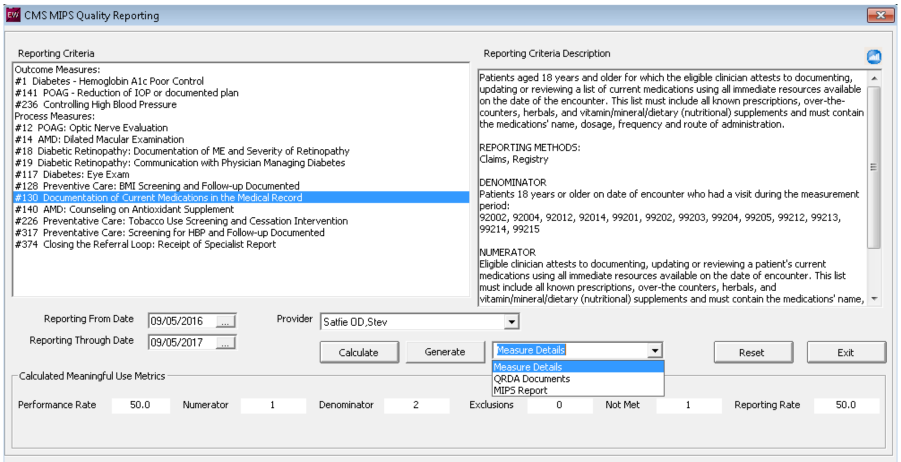
Date	Exam No	Patient Name	Exam CPT	Diagnoses
2017-09-19	17856	Cathy Bachman	99213,92014,4004F,G8427,G8397,5010F,3285F,0517F,4177F,3046F,2027F,2022F,2019F,G8783,G8752,G8754	I10,H47.22,H35.30,E10.3313,H40.1132
2017-09-15	17847	Daniel Deal	99213,G8952,G8752,G8754	I10
2017-09-16	17849	Medicare Patient	99214,92004,4004F,G8397,5010F,3285F,0517F,3046F,2027F,2022F,G8427,G8952,G8752,G8754,4177F,2019F	I10,H47.293,H40.1131,H35.30,E10.3213,H35.3111

8. To generate CAT III files, select **QRDA Documents** from the drop-down menu next to the Generate button, and then click **Generate**.

9. 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\eDocuments folder. Additionally, the MIPS Quality Scorecard opens and displays your progress towards obtaining CMS Quality points.

10. To clear the metrics and description for the selected reporting criteria, click **Reset** or select another 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
#128 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

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: 09/05/2016
Reporting Through Date: 09/05/2017
Provider: Satfie OD,Stev

Performance Rate: 50.0
Numerator: 1
Denominator: 2
Exclusions: 0
Not Met: 1
Reporting Rate: 50.0

11. 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 and watch the Meaningful Use Modified Stage 2 videos.

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.

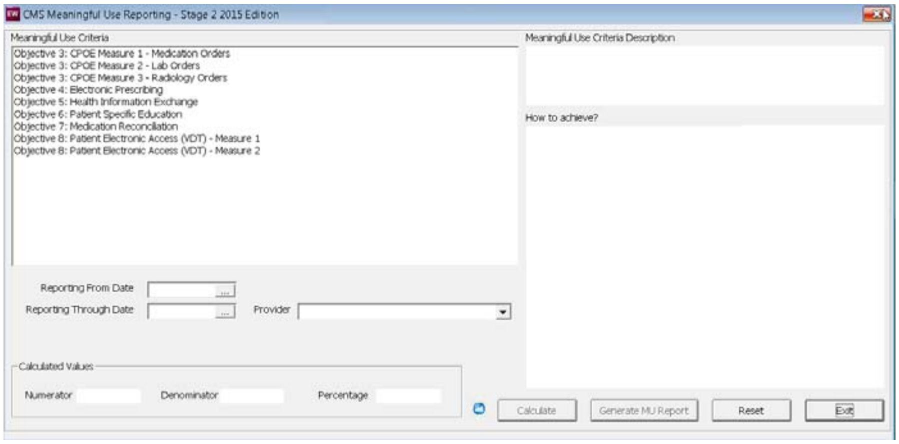
2. Select a line from the **Meaningful Use Criteria**.

   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.

5. Click **Calculate Percentage** to populate the Calculated Values fields.

   The calculated values are displayed in the Numerator, Denominator, and Percentage fields.


CMS Meaningful Use Reporting - Stage 2 2015 Edition
Meaningful Use Criteria
Objective 3: CPOE Measure 1 - Medication Orders
Objective 3: CPOE Measure 2 - Lab Orders
Objective 3: CPOE Measure 3 - Radiology Orders
Objective 4: Electronic Prescribing
Objective 5: Health Information Exchange
Objective 6: Patient Specific Education
Objective 7: Medication Reconciliation
Objective 8: Patient Electronic Access (VDT) - Measure 1
Objective 8: Patient Electronic Access (VDT) - Measure 2
Meaningful Use Criteria Description
How to achieve?
Reporting From Date
Reporting Through Date
Provider
Calculated Values
Numerator
Denominator
Percentage
Calculate
Generate MU Report
Reset
Exit

6. Click **Generate MU Report** to generate the Meaningful Use report.

   The report, an XML-based file, is placed in your DATA\eDocuments folder.

Reporting Medicaid Quality Measures

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.

For information about reporting CQMs, watch the "Clinical Quality Measures (CQMs) 2014 Edition" video.

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/.

1. From the OfficeMate Administration or ExamWRITER main window, click the **Reports** menu and select **2016 Edition - CMS Quality Reporting**.

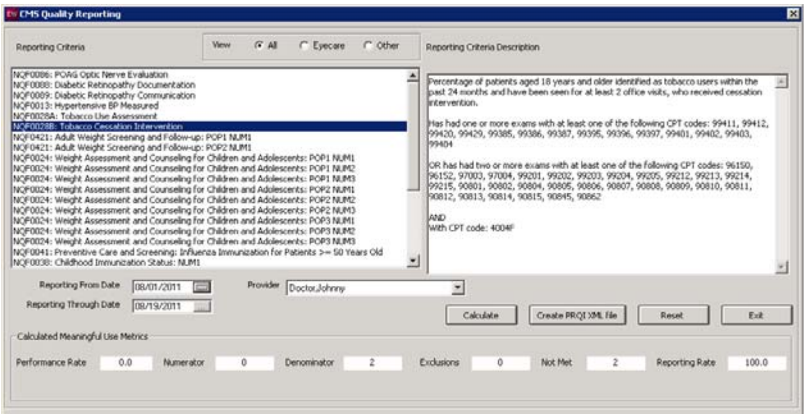
NOTE	To access your 2011 Edition, 2014 Edition, or 2015 Edition CMS quality reports for historical or auditing purposes, from the OfficeMate Administration or ExamWRITER main window, click the **Reports** menu, select **CMS Quality Reporting - Hx**, and then select the appropriate edition.

2. Select the extent of reporting criteria that you want to view.
3. Select a line in **Reporting Criteria**.

   The related reporting criteria description is displayed in the right side of the window.
4. Select a date range from the **Reporting From Date** and **Reporting Through Date** fields.
5. Select a provider from the **Provider** drop-down menu.
6. Click **Calculate** to populate the Calculated Meaningful Use Metrics fields.

   The Create QRDA Documents button is enabled.
7. 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\eDocuments folder.
8. To clear the metrics and description for the selected reporting criteria, click **Reset** or select another criteria.



NQF0086: POAG Optic Nerve Evaluation
NQF0088: Diabetic Retinopathy Documentation
NQF0089: Diabetic Retinopathy Communication
NQF0013: Hypertensive BP Measured
NQF0028A: Tobacco Use Assessment
NQF0028B: Tobacco Cessation Intervention
NQF0421: Adult Weight Screening and Follow-up: POP1 NUM1
NQF0421: Adult Weight Screening and Follow-up: POP2 NUM1
NQF0024: Weight Assessment and Counseling for Children and Adolescents: POP1 NUM1
NQF0024: Weight Assessment and Counseling for Children and Adolescents: POP1 NUM2
NQF0024: Weight Assessment and Counseling for Children and Adolescents: POP1 NUM3
NQF0024: Weight Assessment and Counseling for Children and Adolescents: POP2 NUM1
NQF0024: Weight Assessment and Counseling for Children and Adolescents: POP2 NUM2
NQF0024: Weight Assessment and Counseling for Children and Adolescents: POP2 NUM3
NQF0024: Weight Assessment and Counseling for Children and Adolescents: POP3 NUM1
NQF0024: Weight Assessment and Counseling for Children and Adolescents: POP3 NUM2
NQF0024: Weight Assessment and Counseling for Children and Adolescents: POP3 NUM3
NQF0041: Preventive Care and Screening: Influenza Immunization for Patients >= 50 Years Old
NQF0038: Childhood Immunization Status: NUM1

Percentage of patients aged 18 years and older identified as tobacco users within the past 24 months and have been seen for at least 2 office visits, who received cessation intervention.

Has had one or more exams with at least one of the following CPT codes: 99411, 99412, 99420, 99429, 99385, 99386, 99387, 99395, 99396, 99397, 99401, 99402, 99403, 99404

OR has had two or more exams with at least one of the following CPT codes: 96150, 96152, 97003, 97004, 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 90801, 90802, 90804, 90805, 90806, 90807, 90808, 90809, 90810, 90811, 90812, 90813, 90814, 90815, 90845, 90862

AND
With CPT code: 4004F

Reporting From Date: 08/01/2011
Reporting Through Date: 08/19/2011
Provider: Doctor,Johnny

Performance Rate: 0.0
Numerator: 0
Denominator: 2
Exclusions: 0
Not Met: 2
Reporting Rate: 100.0

9. To close the window, click **Exit**.

Using the General Ledger Interface

16

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

For more information on using the General Ledger Interface, watch the "General Ledger" video.

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 574.
- 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 63.

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

For more information on setting up the General Ledger interface, watch the "General Ledger" video.

▶ 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 63.
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.

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 261.

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 63.

▶ 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

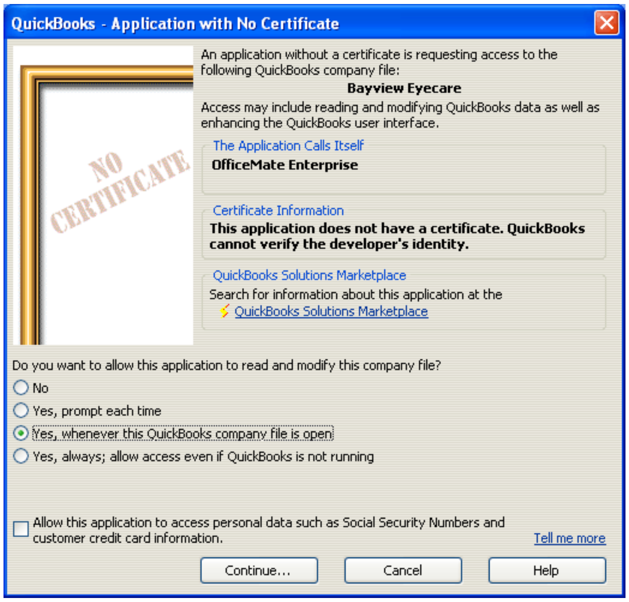
    - If QuickBooks is not already open on the computer on which you are setting up the General Ledger Interface, open QuickBooks now.
    - If you are using OfficeMate for a single location with an administrative location, select **Single QuickBooks Company**.
    - While you can export general ledger transactions 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.



An application without a certificate is requesting access to the following QuickBooks company file:

Bayview Eyecare

Access may include reading and modifying QuickBooks data as well as enhancing the QuickBooks user interface.

The Application Calls Itself

OfficeMate Enterprise

Certificate Information

This application does not have a certificate. QuickBooks cannot verify the developer's identity.

QuickBooks Solutions Marketplace

Search for information about this application at the QuickBooks Solutions Marketplace

Do you want to allow this application to read and modify this company file?

○ No

○ Yes, prompt each time

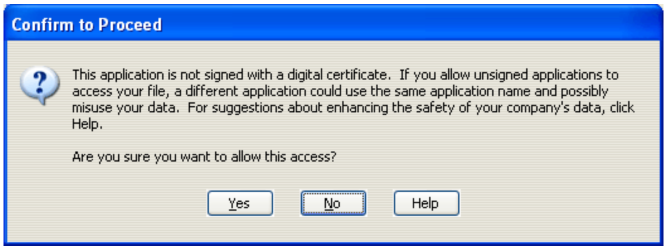
● Yes, whenever this QuickBooks company file is open

○ Yes, always; allow access even if QuickBooks is not running

☐ Allow this application to access personal data such as Social Security Numbers and customer credit card information. Tell me more

d. Click **Continue**.

The Confirm to Proceed Window opens to confirm that you want to allow OfficeMate to access the QuickBooks company accounts.



This application is not signed with a digital certificate. If you allow unsigned applications to access your file, a different application could use the same application name and possibly misuse your data. For suggestions about enhancing the safety of your company's data, click Help.

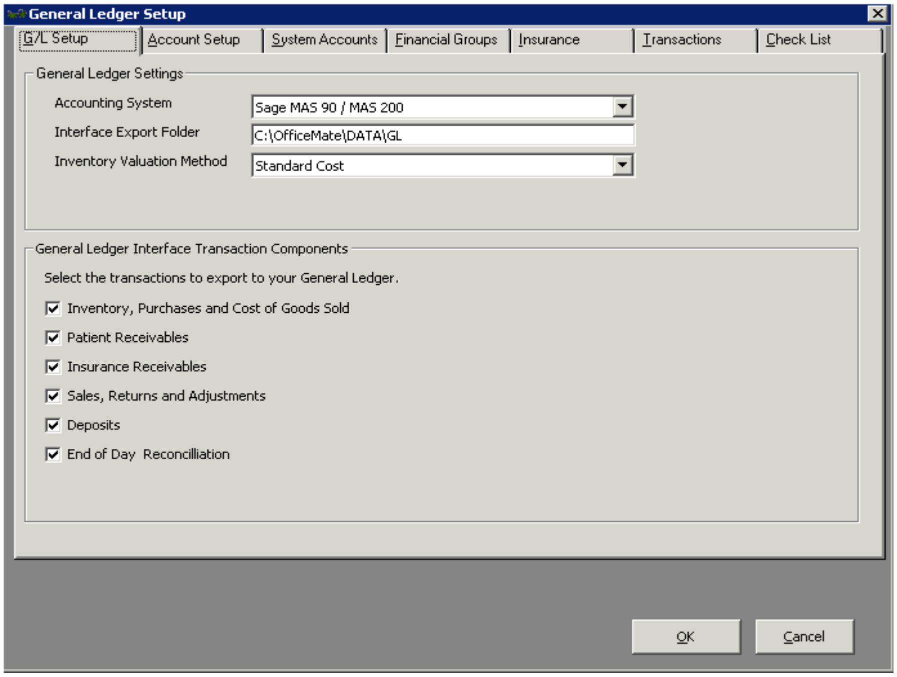
Are you sure you want to allow this access?

e. Click **Yes**.

The Access Confirmation window opens to display the access settings.

f. Click **Done**.

6. 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 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 Reconcilliation

7. 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.

1. From the OfficeMate Administration main window, click **Setup** and select **General Ledger Setup**.
2. Click the **Account Setup** tab.
3. 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.

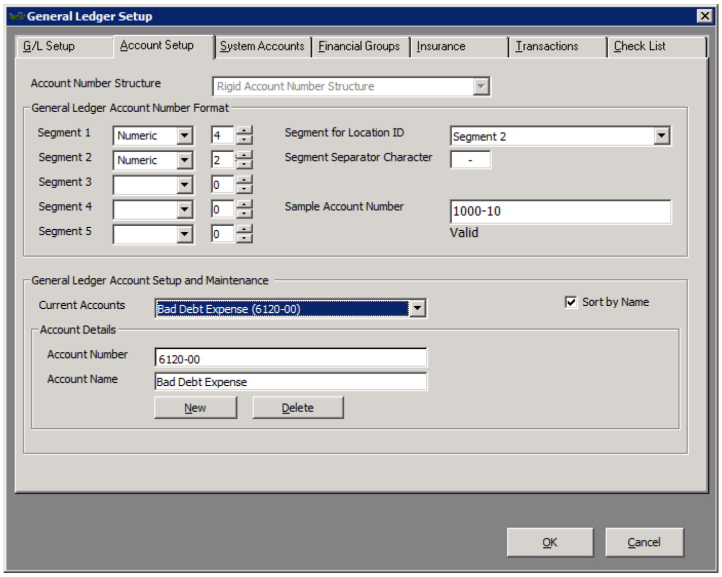
5. The default character that separates segments is a hyphen (-), but if your accounting system uses a different character, type that character in the **Segment Separator Character** text box.
6. Add, edit, or delete general ledger accounts as needed:
    – To add an account, click **New**. Type the 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.


General Ledger Setup
G/L Setup
Account Setup
System Accounts
Financial Groups
Insurance
Transactions
Check List
New
Delete
OK
Cancel

Account Number Structure: Rigid Account Number Structure

General Ledger Account Number Format

Segment 1	Numeric	4
Segment 2	Numeric	2
Segment 3		0
Segment 4		0
Segment 5		0

Segment for Location ID: Segment 2
Segment Separator Character: -
Sample Account Number: 1000-10
Valid

General Ledger Account Setup and Maintenance

Current Accounts: Bad Debt Expense (6120-00)
☑ Sort by Name

Account Details
Account Number: 6120-00
Account Name: Bad Debt Expense

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.

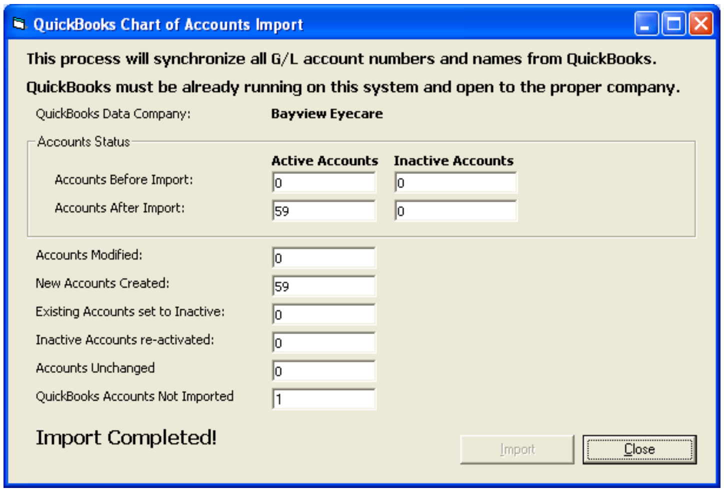
▶ To set up General Ledger accounts for QuickBooks

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.



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

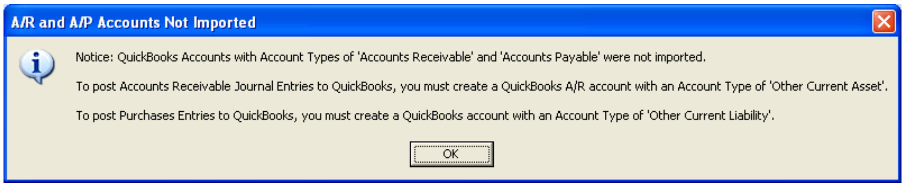
	Active Accounts	Inactive Accounts
Accounts Before Import:	0	0
Accounts After Import:	59	0

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!

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.


A/R and A/P Accounts Not Imported

Notice: QuickBooks Accounts with Account Types of 'Accounts Receivable' and 'Accounts Payable' were not imported.

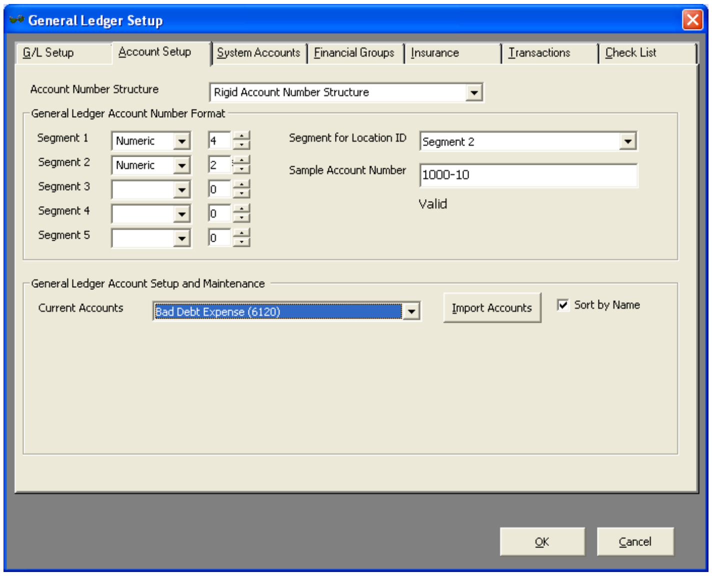
To post Accounts Receivable Journal Entries to QuickBooks, you must create a QuickBooks A/R account with an Account Type of 'Other Current Asset'.

To post Purchases Entries to QuickBooks, you must create a QuickBooks account with an Account Type of 'Other Current Liability'.

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.


General Ledger Setup

Account Number Structure: Rigid Account Number Structure

General Ledger Account Number Format

Segment 1: Numeric, 4
Segment 2: Numeric, 2
Segment 3: 0
Segment 4: 0
Segment 5: 0
Segment for Location ID: Segment 2
Sample Account Number: 1000-10
Valid

General Ledger Account Setup and Maintenance

Current Accounts: Bad Debt Expense (6120)
☑ Sort by Name

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.

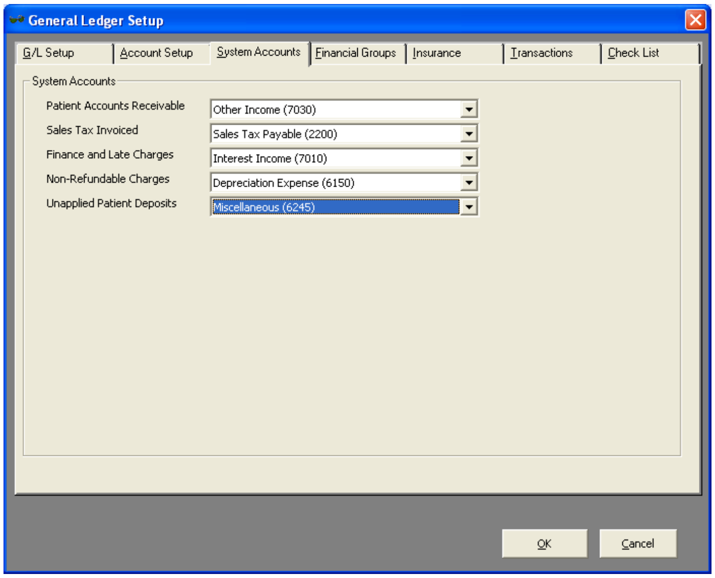
▶ To correlate general ledger accounts to system accounts

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	All money owed by patients. • 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	The total amount of tax charged on fee slips (regardless of whether that tax has been collected). 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.
Finance and Late Charges	The total amount of all finance charges, late charges, and service charges assessed to patients. QuickBooks users must post Finance and Late Charges only from each location. Do not post late charges from OfficeMate Administration.
Non-refundable Charges	The patient charges when a product is returned. For example, restocking fees, handling charges.

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.



System Accounts

Patient Accounts Receivable	Other Income (7030)
Sales Tax Invoiced	Sales Tax Payable (2200)
Finance and Late Charges	Interest Income (7010)
Non-Refundable Charges	Depreciation Expense (6150)
Unapplied Patient Deposits	Miscellaneous (6245)

4. 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.

1. From the OfficeMate Administration main window, click **Setup** and select **General Ledger Setup**.
2. 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.

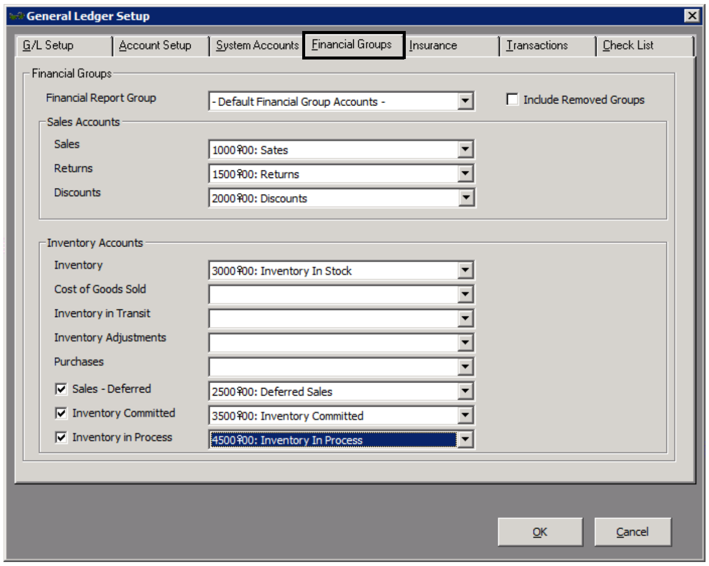
5. Select a general ledger account from the drop-down menus for each account type in the Inventory Accounts group.

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.

6. Repeat steps 3–5 for each Financial Report Group.



Financial Report Group: - Default Financial Group Accounts -
☐ Include Removed Groups
Sales: 1000-000: Sates
Returns: 1500-000: Returns
Discounts: 2000-000: Discounts
Inventory: 3000-000: Inventory In Stock
Cost of Goods Sold:
Inventory in Transit:
Inventory Adjustments:
Purchases:
☑ Sales - Deferred: 2500-000: Deferred Sales
☑ Inventory Committed: 3500-000: Inventory Committed
☑ Inventory in Process: 4500-000: Inventory In Process

7. 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.

1. From the OfficeMate Administration main window, click **Setup** and select **General Ledger Setup**.
2. Click the **Insurance** tab.
3. Select **Default Insurance Accounts** from the **Insurance** drop-down menu to assign default general ledger accounts to *all* insurance carriers

   OR

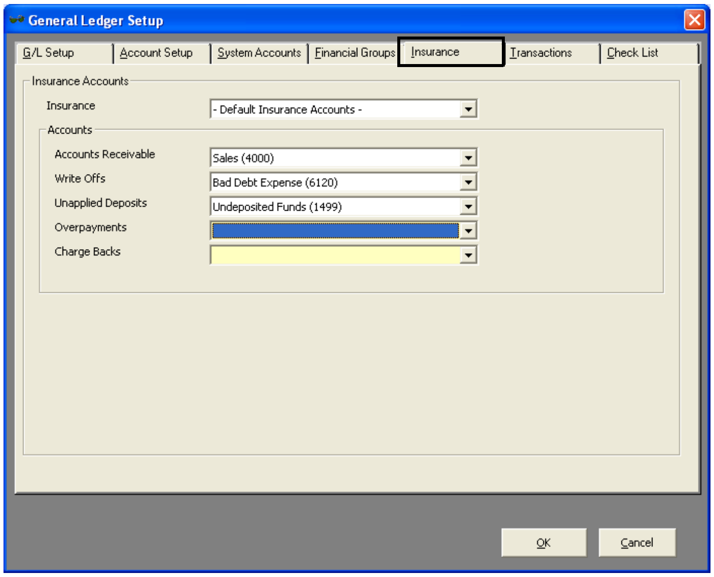
   Select a specific insurance carrier from the **Insurance** drop-down menu to set a general ledger account that deviates from the default general ledger accounts.

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	All amounts owed by all insurance companies except those specifically allocated to a different account. • 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.

5. Repeat steps 3–4 for each insurance carrier if you are assigning different general ledger accounts for specific insurance carriers.


General Ledger Setup
G/L Setup
Account Setup
System Accounts
Financial Groups
Insurance
Transactions
Check List
Insurance Accounts
Accounts
OK
Cancel

Insurance: - Default Insurance Accounts -
Accounts Receivable: Sales (4000)
Write Offs: Bad Debt Expense (6120)
Unapplied Deposits: Undeposited Funds (1499)
Overpayments:
Charge Backs:

6. 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.

1. From the OfficeMate Administration main window, click **Setup** and select **General Ledger Setup**.
2. 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.

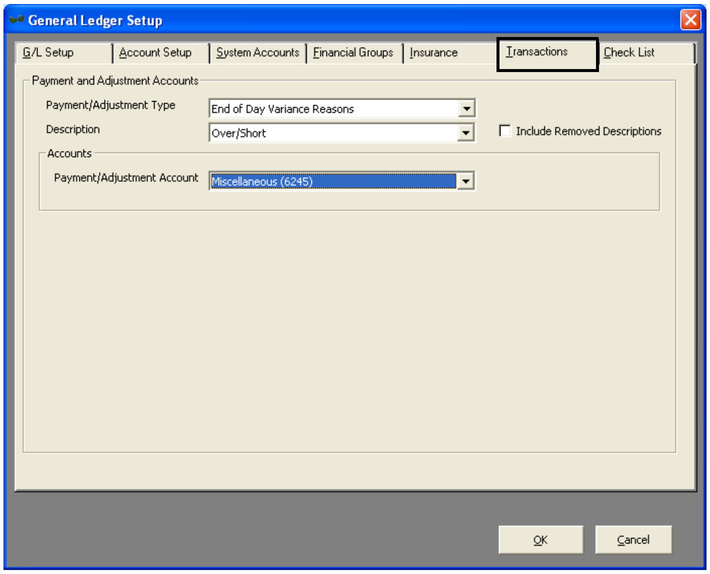
This Transaction Type...	Represents...
End of Day Variance Reasons	Overages and shortages of cash drawer reconciliation. Variances that are short are debited from this account and credited to the Cash Account specified on the System Accounts tab. The debits and credits are reversed for variances that 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.

6. Repeat steps 3–5 for each transaction type and each transaction.


General Ledger Setup
G/L Setup
Account Setup
System Accounts
Financial Groups
Insurance
Transactions
Check List
OK
Cancel

Payment and Adjustment Accounts

Payment/Adjustment Type: End of Day Variance Reasons

Description: Over/Short

☐ Include Removed Descriptions

Accounts

Payment/Adjustment Account: Miscellaneous (6245)

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

   OR

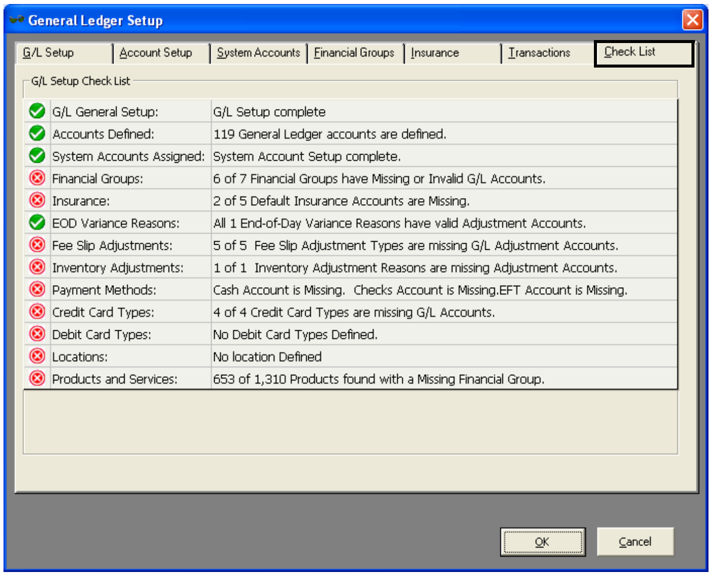
   Continue by verifying that your general ledger setup is complete. For information about verifying that your general ledger setup is complete, go to To view the General Ledger Setup Check List on page 783.

▶ To view the General Ledger Setup Check List

1. From the OfficeMate Administration main window, click **Setup** and select **General Ledger Setup**.
2. 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.



✓	G/L General Setup:	G/L Setup complete
✓	Accounts Defined:	119 General Ledger accounts are defined.
✓	System Accounts Assigned:	System Account Setup complete.
⊗	Financial Groups:	6 of 7 Financial Groups have Missing or Invalid G/L Accounts.
⊗	Insurance:	2 of 5 Default Insurance Accounts are Missing.
✓	EOD Variance Reasons:	All 1 End-of-Day Variance Reasons have valid Adjustment Accounts.
⊗	Fee Slip Adjustments:	5 of 5 Fee Slip Adjustment Types are missing G/L Adjustment Accounts.
⊗	Inventory Adjustments:	1 of 1 Inventory Adjustment Reasons are missing Adjustment Accounts.
⊗	Payment Methods:	Cash Account is Missing. Checks Account is Missing.EFT Account is Missing.
⊗	Credit Card Types:	4 of 4 Credit Card Types are missing G/L Accounts.
⊗	Debit Card Types:	No Debit Card Types Defined.
⊗	Locations:	No location Defined
⊗	Products and Services:	653 of 1,310 Products found with a Missing Financial Group.

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 660.
- 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.

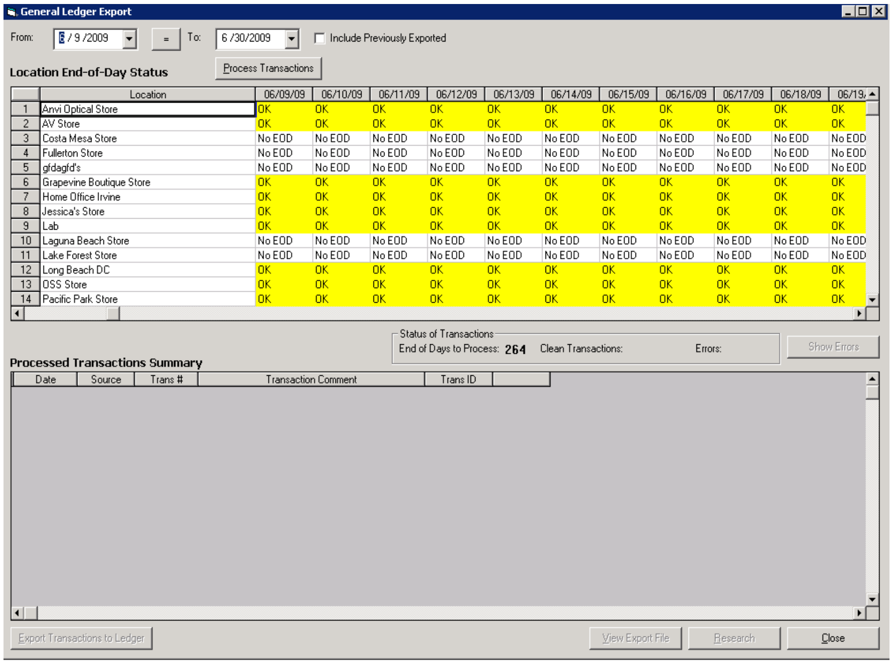
This section describes how to set up the General Ledger Interface, including how

- 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.



From: 6 / 9 /2009

To: 6 /30/2009

☐ Include Previously Exported

Location End-of-Day Status

	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/
1	Anvi 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	gfdagfd'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	OSS 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:

Processed Transactions Summary

Date	Source	Trans #	Transaction Comment	Trans ID	

▶ 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.

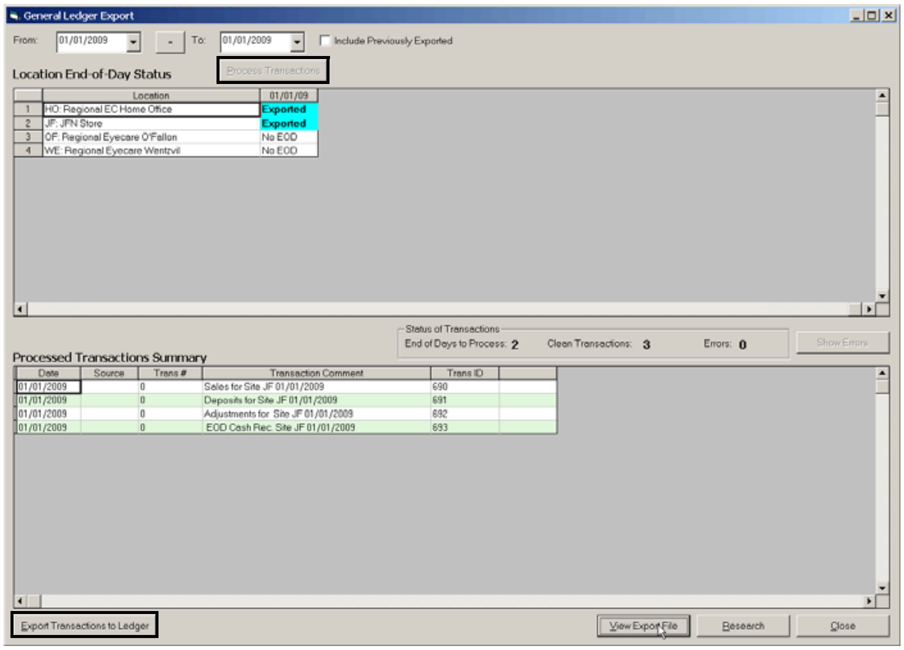
   OfficeMate processes the transactions for export. When the process is finished, OfficeMate displays a list of transactions that were processed successfully and a list of errors. No transactions are exported if errors are displayed.
6. If no errors are displayed, go to step 7. If any errors are displayed, 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 261.

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.



From: 01/01/2009 To: 01/01/2009 ☐ Include Previously Exported

Location End-of-Day Status

	Location	01/01/09
1	HO: Regional EC Home Office	Exported
2	JF: JFN Store	Exported
3	OF: Regional Eyecare O'Fallon	No EOD
4	WE: Regional Eyecare Wentzvil	No EOD

Status of Transactions
End of Days to Process: 2
Clean Transactions: 3
Errors: 0

Processed Transactions Summary

Date	Source	Trans #	Transaction Comment	Trans ID	
01/01/2009		0	Sales for Site JF 01/01/2009	690	
01/01/2009		0	Deposits for Site JF 01/01/2009	691	
01/01/2009		0	Adjustments for Site JF 01/01/2009	692	
01/01/2009		0	EOD Cash Rec. Site JF 01/01/2009	693	

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\GlImport.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 261.

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.

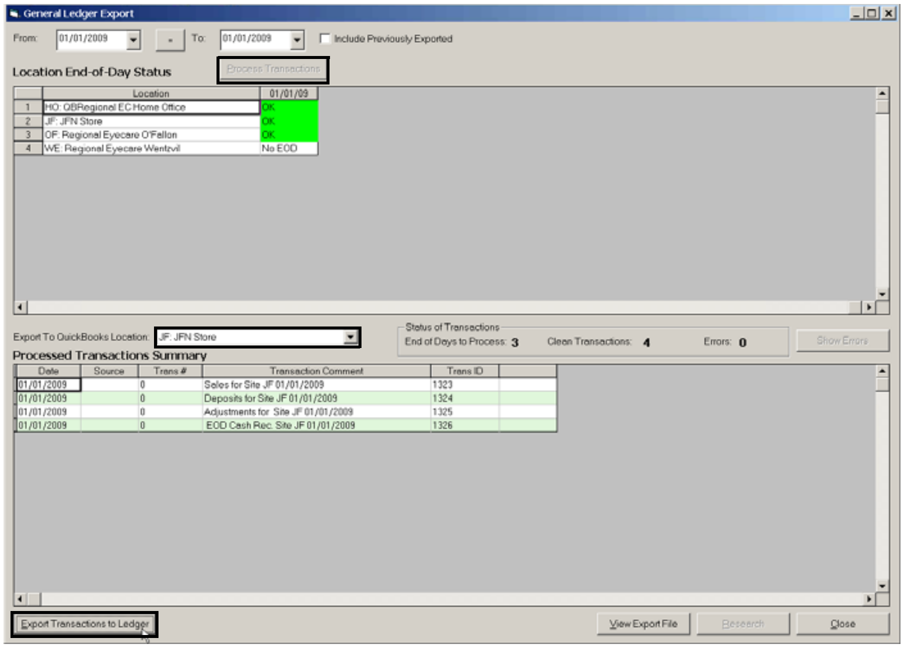
9. Click **OK**.

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.



From: 01/01/2009 To: 01/01/2009 ☐ Include Previously Exported

Location End-of-Day Status

	Location	01/01/09
1	HO: QBRegional EC Home Office	OK
2	JF: JFN Store	OK
3	OF: Regional Eyecare O'Fallon	OK
4	WE: Regional Eyecare Wentzvil	No EOD

Export To QuickBooks Location: JF: JFN Store

Status of Transactions
End of Days to Process: 3 Clean Transactions: 4 Errors: 0

Processed Transactions Summary

Date	Source	Trans #	Transaction Comment	Trans ID
01/01/2009		0	Sales for Site JF 01/01/2009	1323
01/01/2009		0	Deposits for Site JF 01/01/2009	1324
01/01/2009		0	Adjustments for Site JF 01/01/2009	1325
01/01/2009		0	EOD Cash Rec. Site JF 01/01/2009	1326

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.

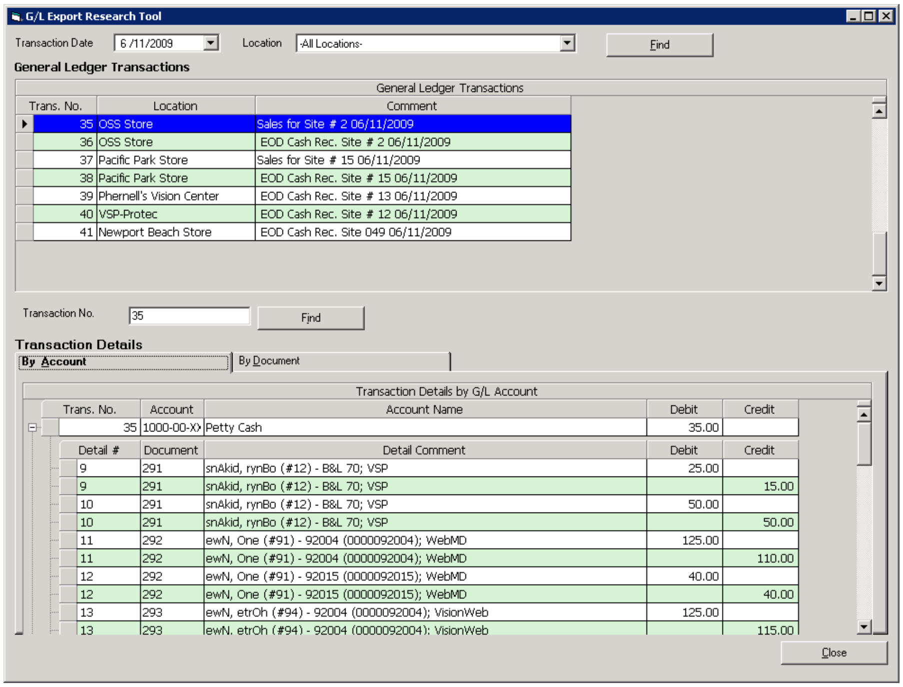
   OR

   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.



Transaction Date 6 /11/2009

Location -All Locations-

General Ledger Transactions

Trans. No.	Location	Comment
35	OSS Store	Sales for Site # 2 06/11/2009
36	OSS Store	EOD Cash Rec. Site # 2 06/11/2009
37	Pacific Park Store	Sales for Site # 15 06/11/2009
38	Pacific Park Store	EOD Cash Rec. Site # 15 06/11/2009
39	Phernell's Vision Center	EOD Cash Rec. Site # 13 06/11/2009
40	VSP-Protec	EOD Cash Rec. Site # 12 06/11/2009
41	Newport Beach Store	EOD Cash Rec. Site 049 06/11/2009

Transaction No. 35

Transaction Details by G/L Account

Trans. No.	Account	Account Name	Debit	Credit
35	1000-00-X	Petty Cash	35.00	

Detail #	Document	Detail Comment	Debit	Credit
9	291	snAkid, rynBo (#12) - B&L 70; VSP	25.00	
9	291	snAkid, rynBo (#12) - B&L 70; VSP		15.00
10	291	snAkid, rynBo (#12) - B&L 70; VSP	50.00	
10	291	snAkid, rynBo (#12) - B&L 70; VSP		50.00
11	292	ewN, One (#91) - 92004 (0000092004); WebMD	125.00	
11	292	ewN, One (#91) - 92004 (0000092004); WebMD		110.00
12	292	ewN, One (#91) - 92015 (0000092015); WebMD	40.00	
12	292	ewN, One (#91) - 92015 (0000092015); WebMD		40.00
13	293	ewN, etrOh (#94) - 92004 (0000092004); VisionWeb	125.00	
13	293	ewN, etrOh (#94) - 92004 (0000092004); VisionWeb		115.00

9. Click **Close** when you are finished.

Understanding 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 × $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

For information on using the Task Manager, watch the "Task Manager" video.

▶ To open the Task Manager

❖ On the OfficeMate main window, click **Task Manager.**

The Task Manager window opens.

NOTES

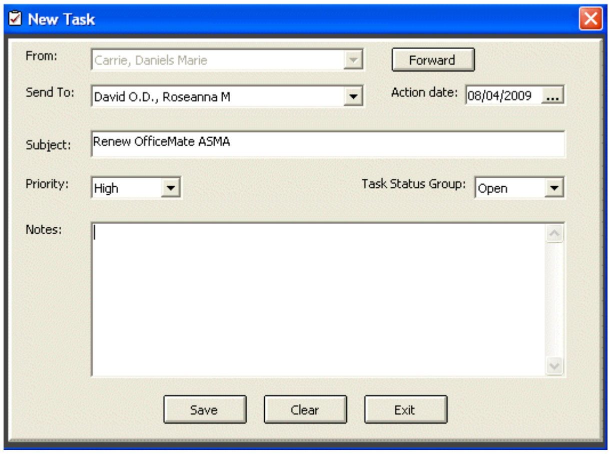
- Click **Refresh** to refresh the Task Manager.
- To sort the columns in the Task Manager, click the column headings.

▶ 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.

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.



From: Carrie, Daniels Marie
Send To: David O.D., Roseanna M
Action date: 08/04/2009
Subject: Renew OfficeMate ASMA
Priority: High
Task Status Group: Open
Notes:

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.

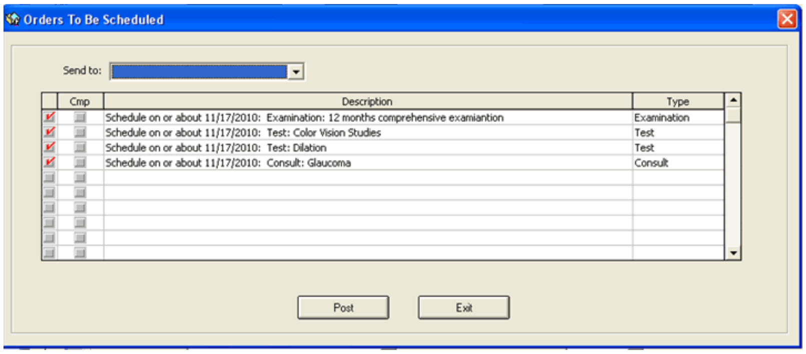
   NOTE To refresh the Task Manager after creating a task, click **Refresh**.

▶ 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.

4. Click **Post**.



	Cmp	Description	Type
☑	☐	Schedule on or about 11/17/2010: Examination: 12 months comprehensive examiantion	Examination
☑	☐	Schedule on or about 11/17/2010: Test: Color Vision Studies	Test
☑	☐	Schedule on or about 11/17/2010: Test: Dilation	Test
☑	☐	Schedule on or about 11/17/2010: Consult: Glaucoma	Consult
☐	☐		
☐	☐		
☐	☐		
☐	☐		
☐	☐		
☐	☐		

▶ To update 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 and click **Edit**.
3. 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.
4. 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.

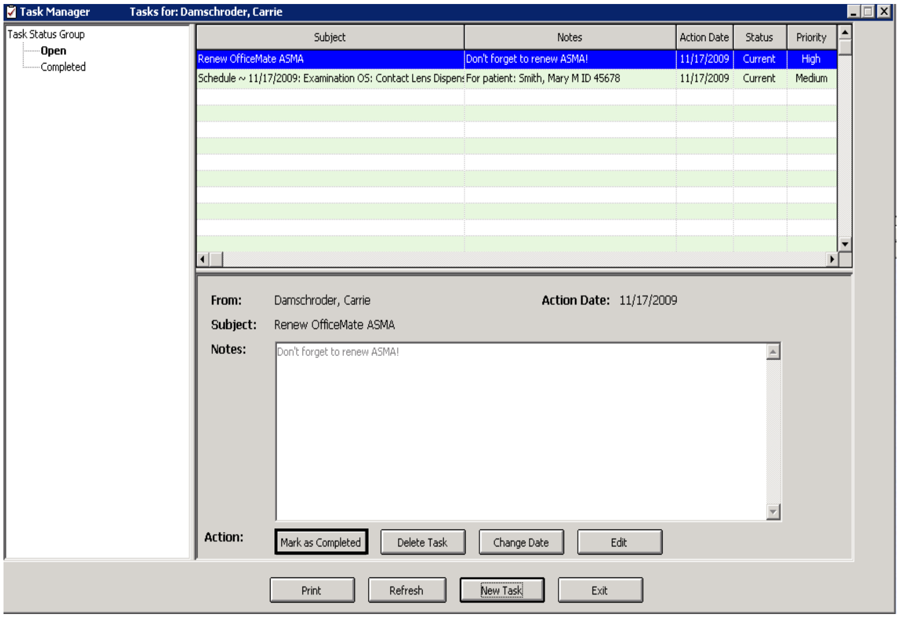
▶ To change the date of tasks

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 **Change Date**.
4. Select a new date from the calendar and click **OK**.

▶ To record completed 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 Open tasks.
3. Select an open task in the table.

4. Click **Mark as Completed**.


Task Manager
Tasks for: Damschroder, Carrie
Task Status Group
Open
Completed
Action:
Mark as Completed
Delete Task
Change Date
Edit
Print
Refresh
New Task
Exit

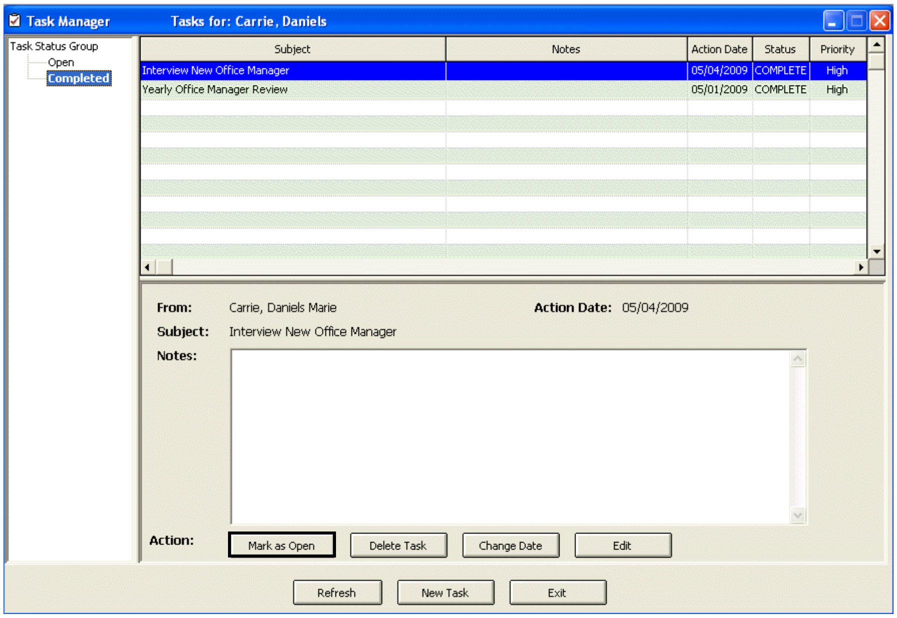
Subject	Notes	Action Date	Status	Priority
Renew OfficeMate ASMA	Don't forget to renew ASMA!	11/17/2009	Current	High
Schedule ~ 11/17/2009: Examination OS: Contact Lens Dispens	For patient: Smith, Mary M ID 45678	11/17/2009	Current	Medium

From: Damschroder, Carrie
Action Date: 11/17/2009
Subject: Renew OfficeMate ASMA
Notes: Don't forget to renew ASMA!

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**.


Task Manager
Tasks for: Carrie, Daniels
Task Status Group
Open
Completed
Action:
Mark as Open
Delete Task
Change Date
Edit
Refresh
New Task
Exit

Subject	Notes	Action Date	Status	Priority
Interview New Office Manager		05/04/2009	COMPLETE	High
Yearly Office Manager Review		05/01/2009	COMPLETE	High

From: Carrie, Daniels Marie
Action Date: 05/04/2009
Subject: Interview New Office Manager
Notes:

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., polices, 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).

For information on viewing internal bulletins, watch the “Internal Bulletin” video.

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.

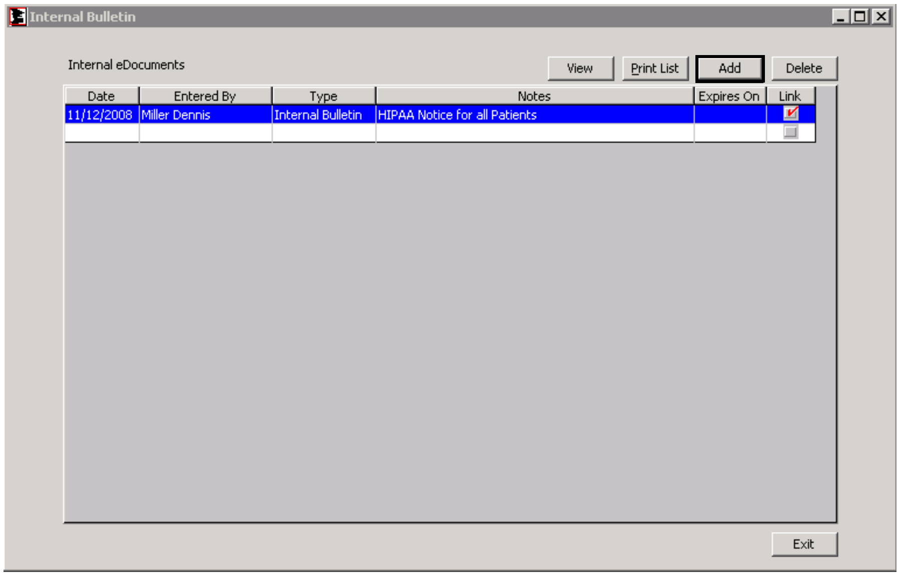
▶ To create internal bulletins

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**.

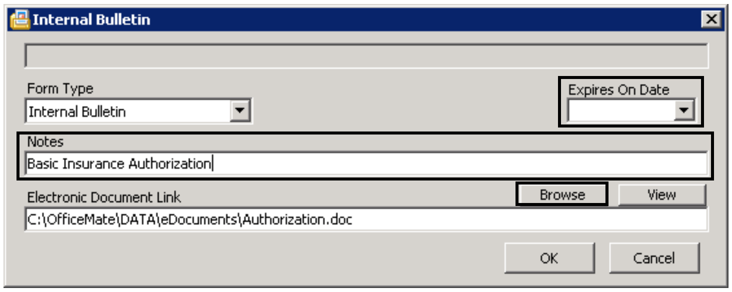
2. Click **Add** to add a new document or double-click an existing document to edit it.



Date	Entered By	Type	Notes	Expires On	Link
11/12/2008	Miller Dennis	Internal Bulletin	HIPAA Notice for all Patients		☑
					☐

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.



Form Type: Internal Bulletin
Expires On Date:
Notes: Basic Insurance Authorization
Electronic Document Link: C:\OfficeMate\DATA\eDocuments\Authorization.doc

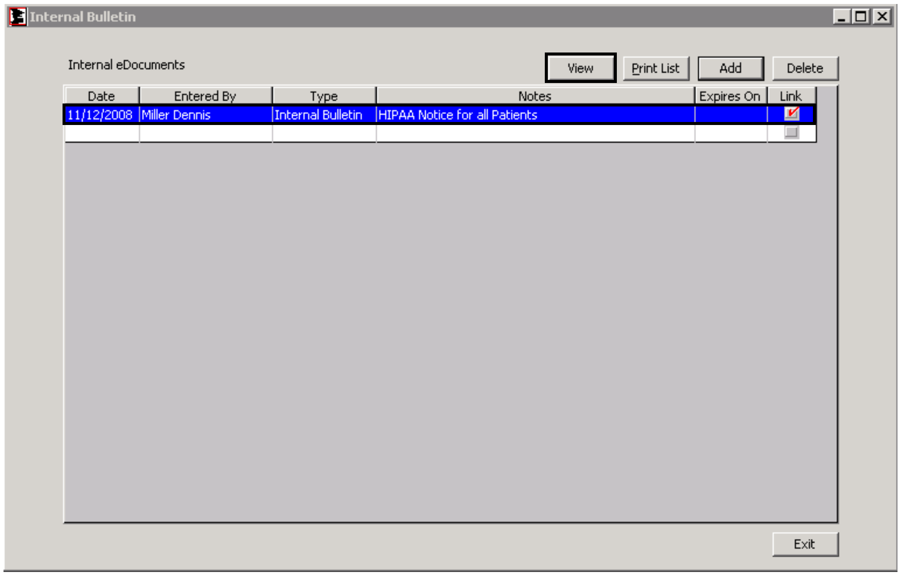
5. Click **Browse** to navigate to and select an electronic document to link to the internal bulletin.
6. Click **OK** to save the internal bulletin.

▶ 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.



Date	Entered By	Type	Notes	Expires On	Link
11/12/2008	Miller Dennis	Internal Bulletin	HIPAA Notice for all Patients		☑
					☐

4. If you want to print a list of the internal bulletin electronic documents, click **Print List**.
5. Click **Exit** when you are finished.

Calculating & Reporting Commissions

18

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 247.
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 252.

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**.

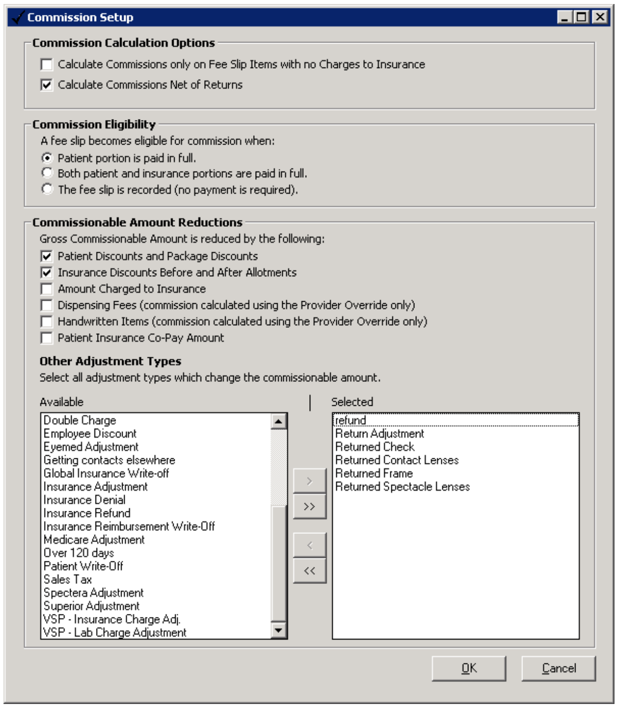
   The Commission Setup window opens.
4. Select the Commission Calculation Options, as needed.
   a. Select the **Calculate Commissions only on Fee Slip Line Items with no Charges to Insurance** check box if commission is not to be calculated on items with partial or full charges to an insurance company.
   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
Double Charge
Employee Discount
Eyemed Adjustment
Getting contacts elsewhere
Global Insurance Write-off
Insurance Adjustment
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

Selected
refund
Return Adjustment
Returned Check
Returned Contact Lenses
Returned Frame
Returned Spectacle Lenses

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

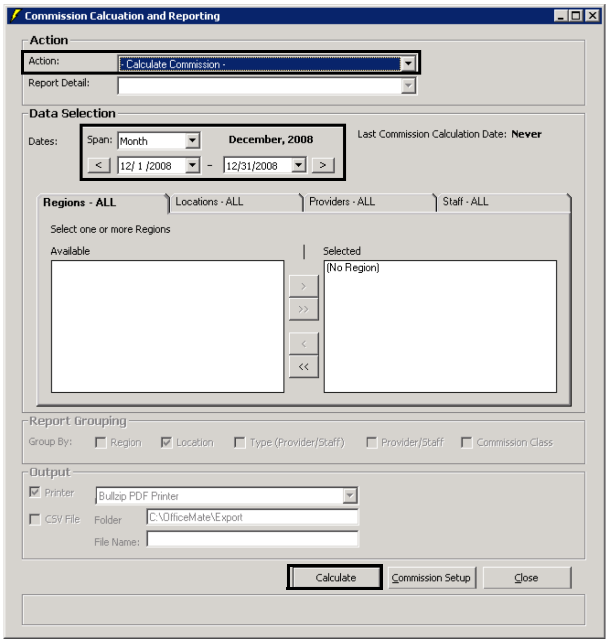
   - Enter beginning and ending dates in the date range fields.

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.



Action: - Calculate Commission -
Report Detail:
Dates: Span: Month December, 2008
12/ 1 /2008 - 12/31/2008
Last Commission Calculation Date: Never
Regions - ALL
Locations - ALL
Providers - ALL
Staff - ALL
Selected: (No Region)
Group By: ☐ Region ☑ Location ☐ Type (Provider/Staff) ☐ Provider/Staff ☐ Commission Class
☑ Printer: Bullzip PDF Printer
☐ CSV File Folder: C:\OfficeMate\Export
File Name:

Commission Calcuation and Reporting
Action
Data Selection
Select one or more Regions
Available
Selected
>
>>
<
<<
Report Grouping
Output
Calculate
Commission Setup
Close

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.

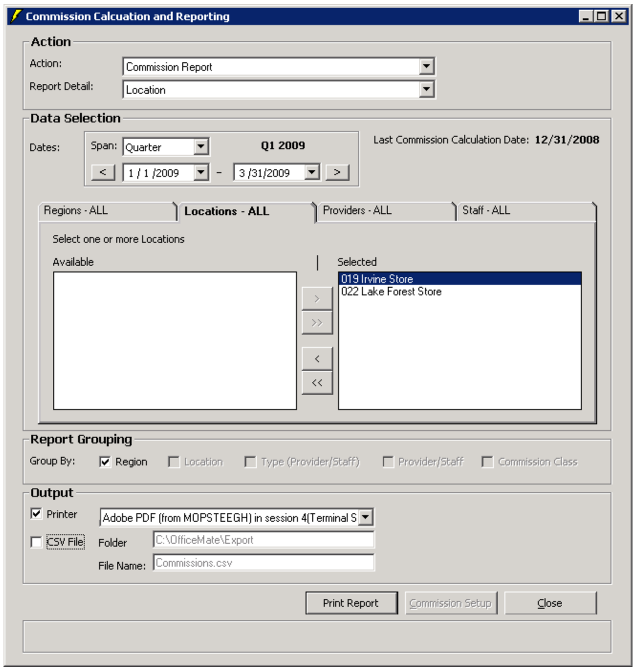
    c. Click the left arrow (**<**) to move the provider to the **Available** box.

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.



Commission Calcuation and Reporting

Action
Action: Commission Report
Report Detail: Location

Data Selection
Dates: Span: Quarter Q1 2009
1 / 1 /2009 - 3 /31/2009
Last Commission Calculation Date: **12/31/2008**

Regions - ALL | **Locations - ALL** | Providers - ALL | Staff - ALL

Select one or more Locations
Available
Selected
019 Irvine Store
022 Lake Forest Store

Report Grouping
Group By: ☑ Region ☐ Location ☐ Type (Provider/Staff) ☐ Provider/Staff ☐ Commission Class

Output
☑ Printer Adobe PDF (from MOPSTEEGH) in session 4(Terminal S
☐ CSV File Folder C:\OfficeMate\Export
File Name: Commissions.csv

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.

Printing Correspondences

19

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, 831

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 835.

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

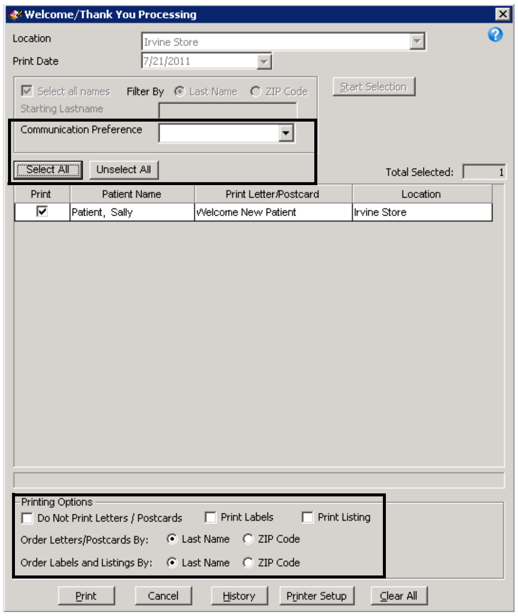
   - If you have a default welcome/thank you letter selected for a patient in the Patient Demographic>Letters window, the patient, along with all new patients, are automatically added to your welcome correspondence list. To select a default referral welcome letter or send a different welcome letter, go to To select letters to send to a patient on page 231. 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 206.
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 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.



Location: Irvine Store
Print Date: 7/21/2011
☑ Select all names Filter By ● Last Name ○ ZIP Code
Starting Lastname:
Communication Preference:
Total Selected: 1

Print	Patient Name	Print Letter/Postcard	Location
☑	Patient, Sally	Welcome New Patient	Irvine Store

Printing Options
☐ Do Not Print Letters / Postcards ☐ Print Labels ☐ Print Listing
Order Letters/Postcards By: ● Last Name ○ ZIP Code
Order Labels and Listings By: ● Last Name ○ 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 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 231. • 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 206.

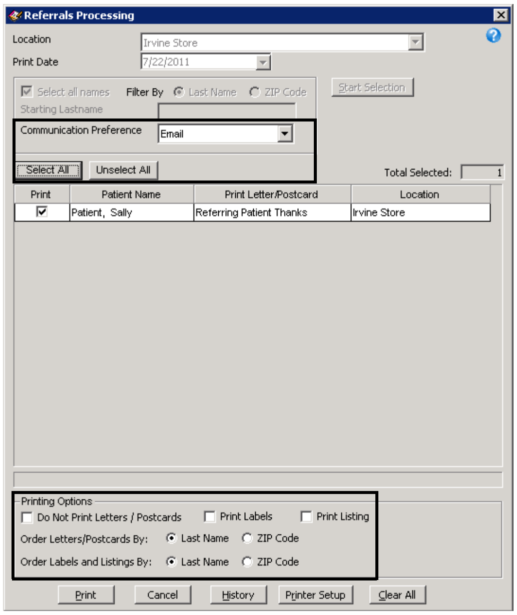
4. Select or deselect patients by clicking the check box in the **Print** column.

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.



Location: Irvine Store
Print Date: 7/22/2011
☑ Select all names Filter By ● Last Name ○ ZIP Code
Starting Lastname
Communication Preference: Email
Total Selected: 1

Print	Patient Name	Print Letter/Postcard	Location
☑	Patient, Sally	Referring Patient Thanks	Irvine Store

Printing Options
☐ Do Not Print Letters / Postcards ☐ Print Labels ☐ Print Listing
Order Letters/Postcards By: ● Last Name ○ ZIP Code
Order Labels and Listings By: ● Last Name ○ 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 295.

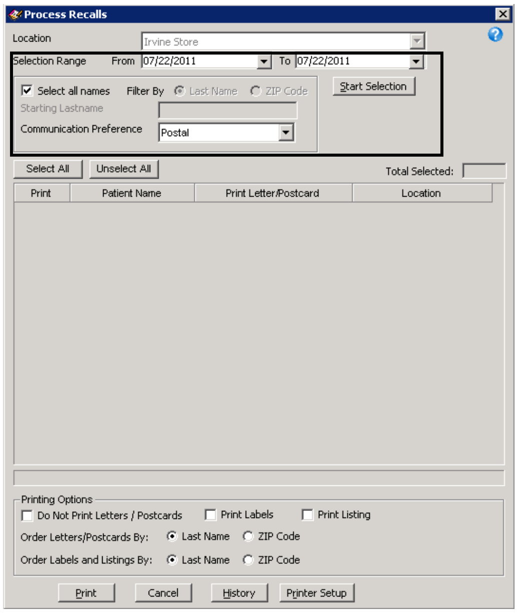
1. Click **Tasks** on the main window toolbar, select **Correspondence [MU]**, and then select **Recall [MU]**.

   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 206.
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.


Process Recalls

Location: Irvine Store

Selection Range From 07/22/2011 To 07/22/2011

☑ Select all names Filter By ● Last Name ○ ZIP Code

Starting Lastname:

Communication Preference: Postal

Total Selected:

Print	Patient Name	Print Letter/Postcard	Location

Printing Options

☐ Do Not Print Letters / Postcards ☐ Print Labels ☐ Print Listing

Order Letters/Postcards By: ● Last Name ○ ZIP Code

Order Labels and Listings By: ● Last Name ○ ZIP Code

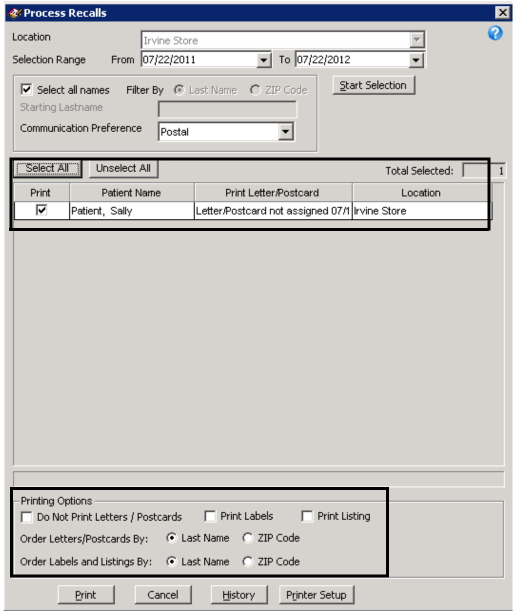
A list of patients meeting your selection criteria is displayed.

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.



Process Recalls

Location: Irvine Store

Selection Range From 07/22/2011 To 07/22/2012

☑ Select all names Filter By ● Last Name ○ ZIP Code

Starting Lastname

Communication Preference: Postal

Total Selected: 1

Print	Patient Name	Print Letter/Postcard	Location
☑	Patient, Sally	Letter/Postcard not assigned 07/1	Irvine Store

Printing Options

☐ Do Not Print Letters / Postcards ☐ Print Labels ☐ Print Listing

Order Letters/Postcards By: ● Last Name ○ ZIP Code

Order Labels and Listings By: ● Last Name ○ 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.

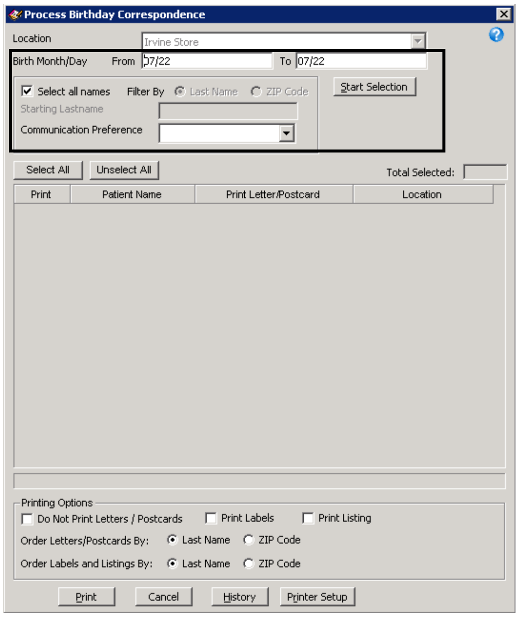
1. Click **Tasks** on the main window toolbar, select **Correspondence [MU]**, and then select **Birthday**.

   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 206.
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.



Process Birthday Correspondence

Location: Irvine Store

Birth Month/Day From 07/22 To 07/22

☑ Select all names Filter By ● Last Name ○ ZIP Code

Starting Lastname

Communication Preference

Total Selected:

Print	Patient Name	Print Letter/Postcard	Location

Printing Options

☐ Do Not Print Letters / Postcards ☐ Print Labels ☐ Print Listing

Order Letters/Postcards By: ● Last Name ○ ZIP Code

Order Labels and Listings By: ● Last Name ○ ZIP Code

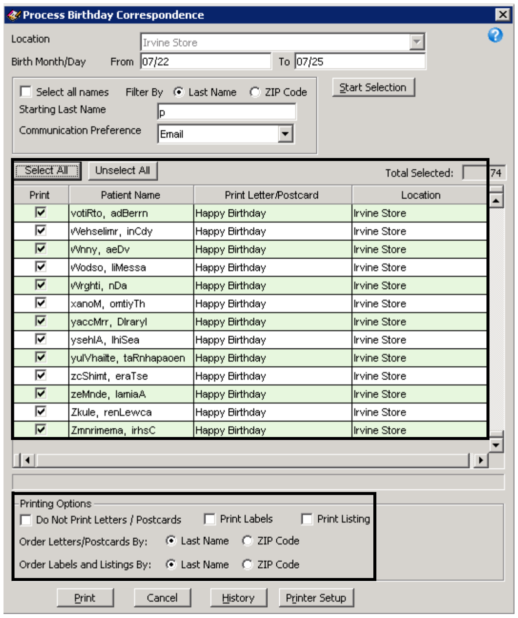
A list of patients meeting your selection criteria is displayed.

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.



Location: Irvine Store
Birth Month/Day From 07/22 To 07/25
☐ Select all names
Filter By ● Last Name ○ ZIP Code
Starting Last Name: p
Communication Preference: Email
Total Selected: 74

Print	Patient Name	Print Letter/Postcard	Location
☑	votiRto, adBerrn	Happy Birthday	Irvine Store
☑	Wehselimr, inCdy	Happy Birthday	Irvine Store
☑	Wnny, aeDv	Happy Birthday	Irvine Store
☑	Wodso, liMessa	Happy Birthday	Irvine Store
☑	Wrghti, nDa	Happy Birthday	Irvine Store
☑	xanoM, omtiyTh	Happy Birthday	Irvine Store
☑	yaccMrr, Dlraryl	Happy Birthday	Irvine Store
☑	ysehlA, lhiSea	Happy Birthday	Irvine Store
☑	yulVhailte, taRnhapaoen	Happy Birthday	Irvine Store
☑	zcShimt, eraTse	Happy Birthday	Irvine Store
☑	zeMnde, lamiaA	Happy Birthday	Irvine Store
☑	Zkule, renLewca	Happy Birthday	Irvine Store
☑	Zmnrimema, irhsC	Happy Birthday	Irvine Store

Printing Options
☐ Do Not Print Letters / Postcards ☐ Print Labels ☐ Print Listing
Order Letters/Postcards By: ● Last Name ○ ZIP Code
Order Labels and Listings By: ● Last Name ○ 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 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 311.

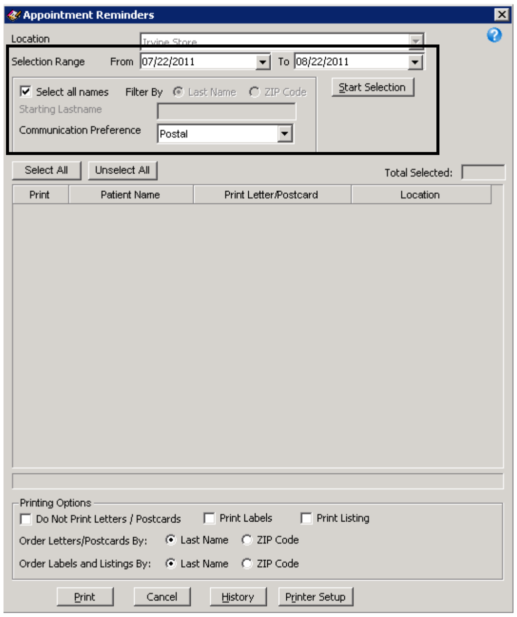
1. Click **Tasks** on the main window toolbar, select **Correspondence [MU]**, and then select **Appointments**.

   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 206.
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.



Location: Irvine Store
Selection Range From: 07/22/2011 To: 08/22/2011
☑ Select all names
Filter By: ● Last Name ○ ZIP Code
Starting Lastname:
Communication Preference: Postal
Total Selected:

Print	Patient Name	Print Letter/Postcard	Location

Printing Options
☐ Do Not Print Letters / Postcards ☐ Print Labels ☐ Print Listing
Order Letters/Postcards By: ● Last Name ○ ZIP Code
Order Labels and Listings By: ● Last Name ○ ZIP Code

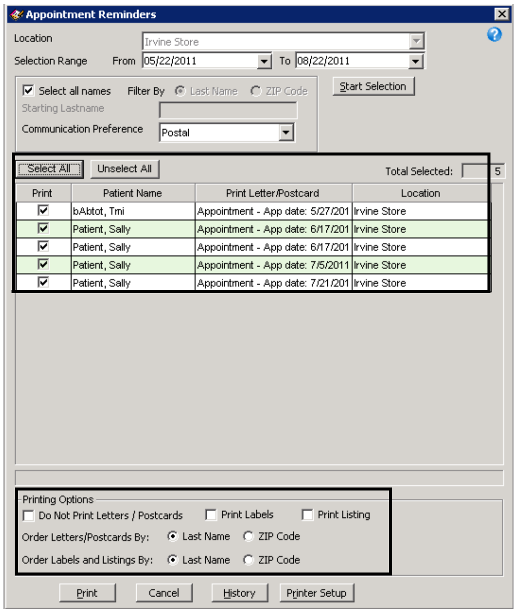
A list of patients meeting your selection criteria is displayed.

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.



Location: Irvine Store
Selection Range From 05/22/2011 To 08/22/2011
☑ Select all names Filter By ● Last Name ○ ZIP Code
Starting Lastname
Communication Preference: Postal
Total Selected: 5

Print	Patient Name	Print Letter/Postcard	Location
☑	bAbtot, Tmi	Appointment - App date: 5/27/201	Irvine Store
☑	Patient, Sally	Appointment - App date: 6/17/201	Irvine Store
☑	Patient, Sally	Appointment - App date: 6/17/201	Irvine Store
☑	Patient, Sally	Appointment - App date: 7/5/2011	Irvine Store
☑	Patient, Sally	Appointment - App date: 7/21/201	Irvine Store

Printing Options
☐ Do Not Print Letters / Postcards ☐ Print Labels ☐ Print Listing
Order Letters/Postcards By: ● Last Name ○ ZIP Code
Order Labels and Listings By: ● Last Name ○ 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 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” 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 206.
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.

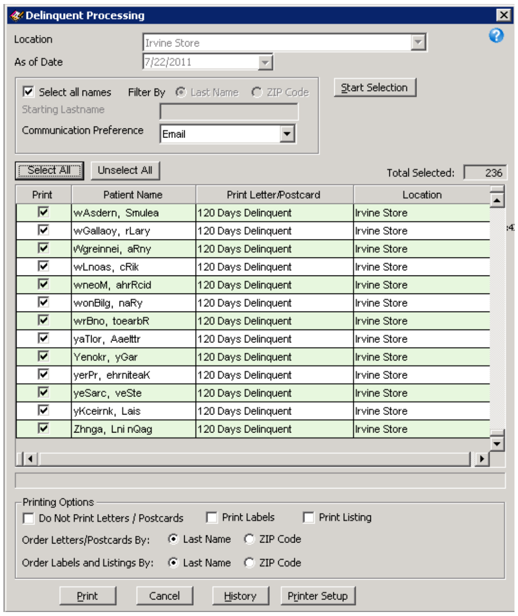
NOTE	To further narrow your selection, deselect the **Select all names** check box, select a filter option from the **Filter By** radio buttons, and type a letter (if you are filtering patients by last name) or number (if you are filtering patients by ZIP code) in the **Starting Last Name** or **Starting 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.



Location: Irvine Store
As of Date: 7/22/2011
☑ Select all names
Filter By ● Last Name ○ ZIP Code
Starting Lastname
Communication Preference: Email
Total Selected: 236

Print	Patient Name	Print Letter/Postcard	Location
☑	wAsdern, Smulea	120 Days Delinquent	Irvine Store
☑	wGallaoy, rLary	120 Days Delinquent	Irvine Store
☑	Wgreinnei, aRny	120 Days Delinquent	Irvine Store
☑	wLnoas, cRik	120 Days Delinquent	Irvine Store
☑	wneoM, ahrRcid	120 Days Delinquent	Irvine Store
☑	wonBilg, naRy	120 Days Delinquent	Irvine Store
☑	wrBno, toearbR	120 Days Delinquent	Irvine Store
☑	yaTlor, Aaelttr	120 Days Delinquent	Irvine Store
☑	Yenokr, yGar	120 Days Delinquent	Irvine Store
☑	yerPr, ehrniteaK	120 Days Delinquent	Irvine Store
☑	yeSarc, veSte	120 Days Delinquent	Irvine Store
☑	yKceirnk, Lais	120 Days Delinquent	Irvine Store
☑	Zhnga, Lni nQag	120 Days Delinquent	Irvine Store

Printing Options
☐ Do Not Print Letters / Postcards ☐ Print Labels ☐ Print Listing
Order Letters/Postcards By: ● Last Name ○ ZIP Code
Order Labels and Listings By: ● Last Name ○ 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 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 220.

1. Click **Tasks** on the main window toolbar, select **Correspondence [MU]**, and then select **Service Agreement**.

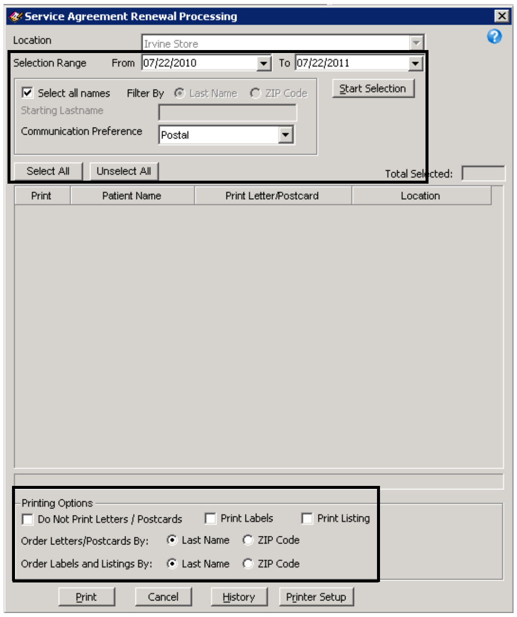
   The Service Agreement Renewal Processing window opens.

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 206.

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.



Location: Irvine Store
Selection Range From 07/22/2010 To 07/22/2011
☑ Select all names
Filter By ● Last Name ○ ZIP Code
Starting Lastname
Communication Preference: Postal
Total Selected:

Printing Options
☐ Do Not Print Letters / Postcards ☐ Print Labels ☐ Print Listing
Order Letters/Postcards By: ● Last Name ○ ZIP Code
Order Labels and Listings By: ● Last Name ○ ZIP Code

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 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.

Maintaining Documents

20

In this chapter:

For information on maintaining documents, watch the "Maintaining Documents" video.

- Creating & Modifying Letters, 835
- Creating & Modifying Postcards, 842

Creating & Modifying Letters

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, 836
- To merge letters, 837
- To modify letters, 839
- To print letters, 840
- To rename letters, 840
- To delete letters, 841

NOTE All letters are created with the following default specifications:

- Page size: 8.5 inches × 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**.

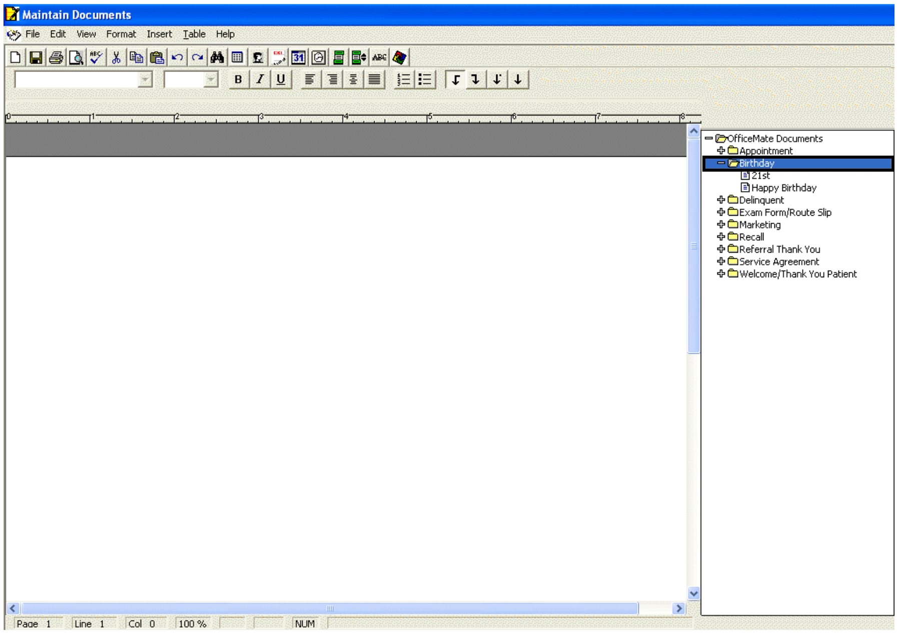
To modify the font style and size, click the icons, select new options from the font style and size drop-down menus, or click **Format** on the toolbar and select **Font**. Record modifications in the Font window and click **OK**.

▶ To create letters

1. Click **Tasks** on the main window toolbar and select **Maintain Documents**.

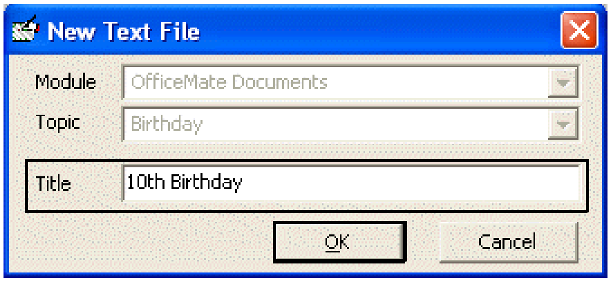
   The Maintain Documents window open.
2. Click **Setup** and select **Letters**.
3. Click on the **OfficeMate Documents** folder on the right side of the window.
4. Click on the name of the folder where you want to store your new letter.

NOTE You cannot create new letters in the Delinquent folder.


Maintain Documents
File Edit View Format Insert Table Help
OfficeMate Documents
Appointment
Birthday
21st
Happy Birthday
Delinquent
Exam Form/Route Slip
Marketing
Recall
Referral Thank You
Service Agreement
Welcome/Thank You Patient
Page 1
Line 1
Col 0
100 %
NUM

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**.


New Text File
OK
Cancel

Module: OfficeMate Documents
Topic: Birthday
Title: 10th Birthday

8. Type the letter in the word processing window.

NOTES

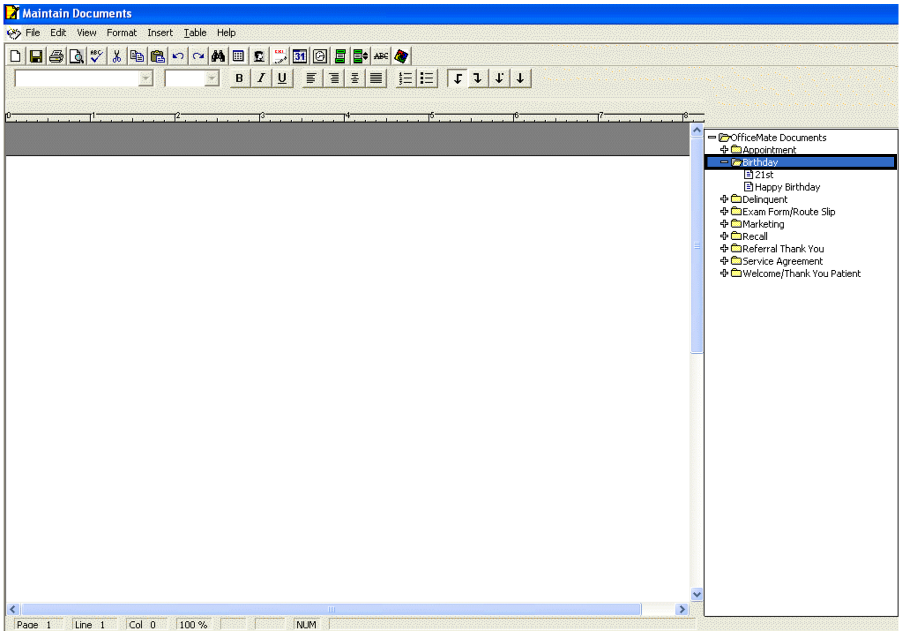
- To format text, click on the icons or click **Format** on the toolbar and select appropriate font, paragraph, and color options.
- To insert page breaks, dates, times, and pictures, click **Insert** on the toolbar and select an appropriate option.
- To insert tables or table objects into your file, 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**.

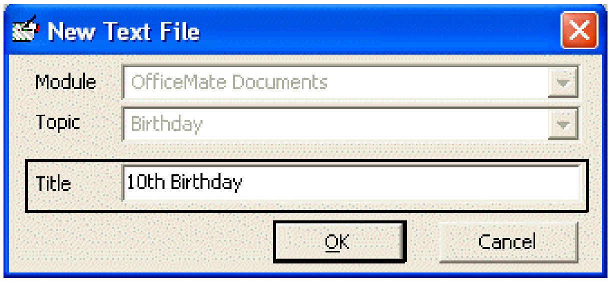
   The Maintain Documents window open.
2. Click **Setup** and select **Letters**.
3. Click on the **OfficeMate Documents** folder on the right side of the window.
4. Click on the name of the folder where you want to store your merged letter.


Maintain Documents
File
Edit
View
Format
Insert
Table
Help
B
I
U
OfficeMate Documents
Appointment
Birthday
21st
Happy Birthday
Delinquent
Exam Form/Route Slip
Marketing
Recall
Referral Thank You
Service Agreement
Welcome/Thank You Patient
Page 1
Line 1
Col 0
100 %
NUM

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**.

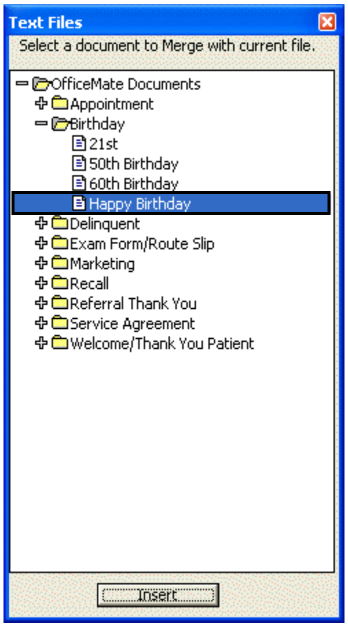
   The New Text File window opens.

6. Type a title for the merged letter in the **Title** box.
7. Click **OK**.


New Text File
OK
Cancel

Module: OfficeMate Documents
Topic: Birthday
Title: 10th Birthday

8. Click **Insert** on the toolbar and select **Existing Document**.
9. Click on the name of the letter that you want to merge into the letter that is already open.


Text Files
OfficeMate Documents
Appointment
Birthday
21st
50th Birthday
60th Birthday
Happy Birthday
Delinquent
Exam Form/Route Slip
Marketing
Recall
Referral Thank You
Service Agreement
Welcome/Thank You Patient
Insert

Select a document to Merge with current file.

10. Click **Insert**.

11. Edit the text in the word processing window, if necessary.

NOTES

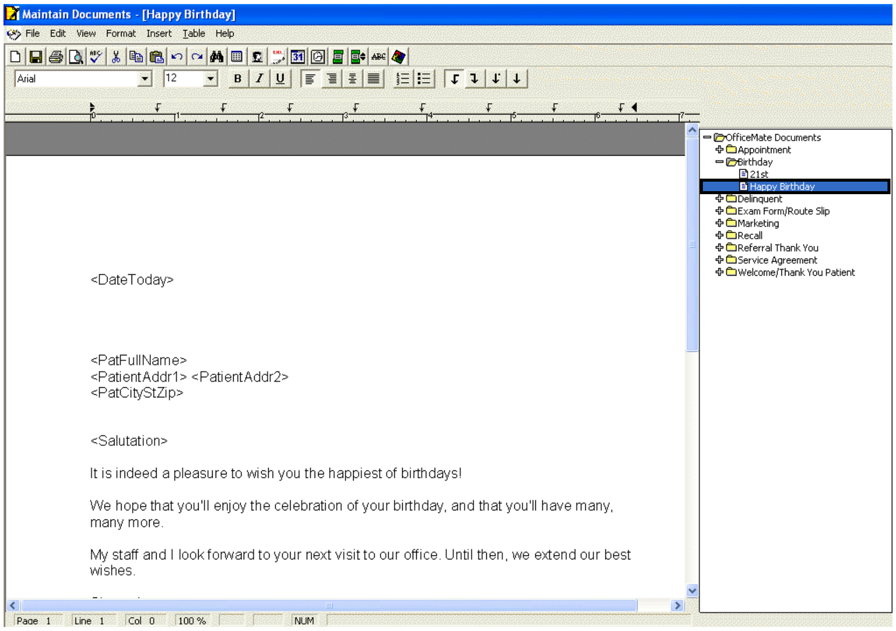
- To format text, click on the icons or click **Format** on the toolbar and select appropriate font, paragraph, and color options.
- To insert page breaks, dates, times, and pictures, click **Insert** on the toolbar and select an appropriate option.
- To insert tables or table objects into your file, 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.


Maintain Documents - [Happy Birthday]
File
Edit
View
Format
Insert
Table
Help
Arial
12
B
I
U
OfficeMate Documents
Appointment
Birthday
21st
Happy Birthday
Delinquent
Exam Form/Route Slip
Marketing
Recall
Referral Thank You
Service Agreement
Welcome/Thank You Patient
Page 1
Line 1
Col 0
100 %
NUM

<DateToday>

<PatFullName>
<PatientAddr1> <PatientAddr2>
<PatCityStZip>

<Salutation>

It is indeed a pleasure to wish you the happiest of birthdays!

We hope that you'll enjoy the celebration of your birthday, and that you'll have many, many more.

My staff and I look forward to your next visit to our office. Until then, we extend our best wishes.

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

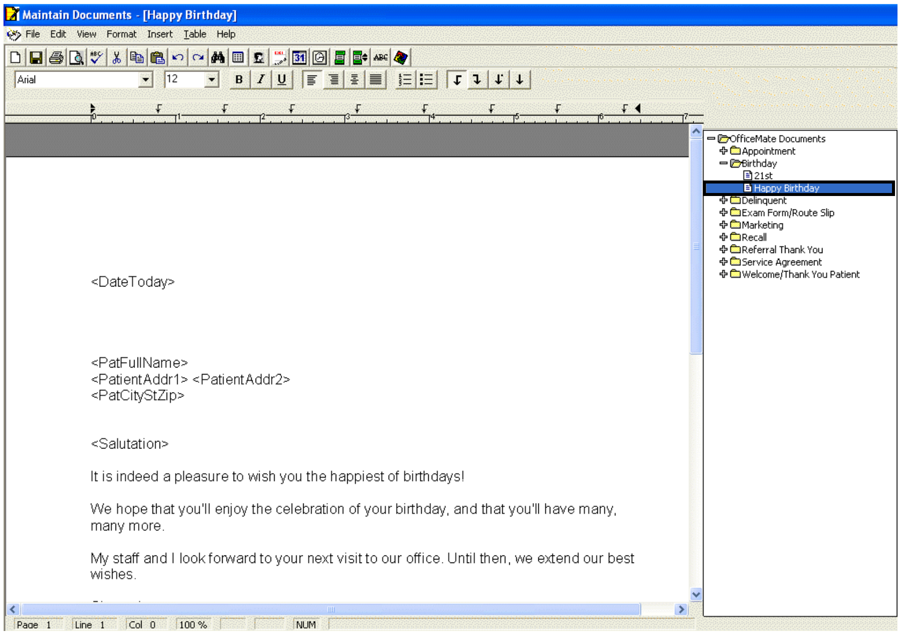
- To preview letters that you want to print, create a letter, click **File**, and select **Print Preview**. For more information on creating letters, go to To create letters on page 836.
- To print letters that you have created or modified, go to Printing Correspondences on page 819.

▶ 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.

5. Click on the name of the text file that you want to rename.


Maintain Documents - [Happy Birthday]
File Edit View Format Insert Table Help
Arial
12
OfficeMate Documents
Appointment
Birthday
21st
Happy Birthday
Delinquent
Exam Form/Route Slip
Marketing
Recall
Referral Thank You
Service Agreement
Welcome/Thank You Patient
Page 1
Line 1
Col 0
100 %
NUM

<DateToday>

<PatFullName>
<PatientAddr1> <PatientAddr2>
<PatCityStZip>

<Salutation>

It is indeed a pleasure to wish you the happiest of birthdays!

We hope that you'll enjoy the celebration of your birthday, and that you'll have many, many more.

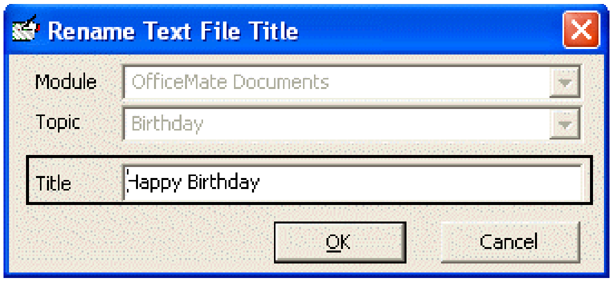
My staff and I look forward to your next visit to our office. Until then, we extend our best wishes.

The letter opens in the word processing window.

6. 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.

7. Type the new text file title in the **Title** text box.


Rename Text File Title
OK
Cancel

Module: OfficeMate Documents
Topic: Birthday
Title: Happy Birthday

8. 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.

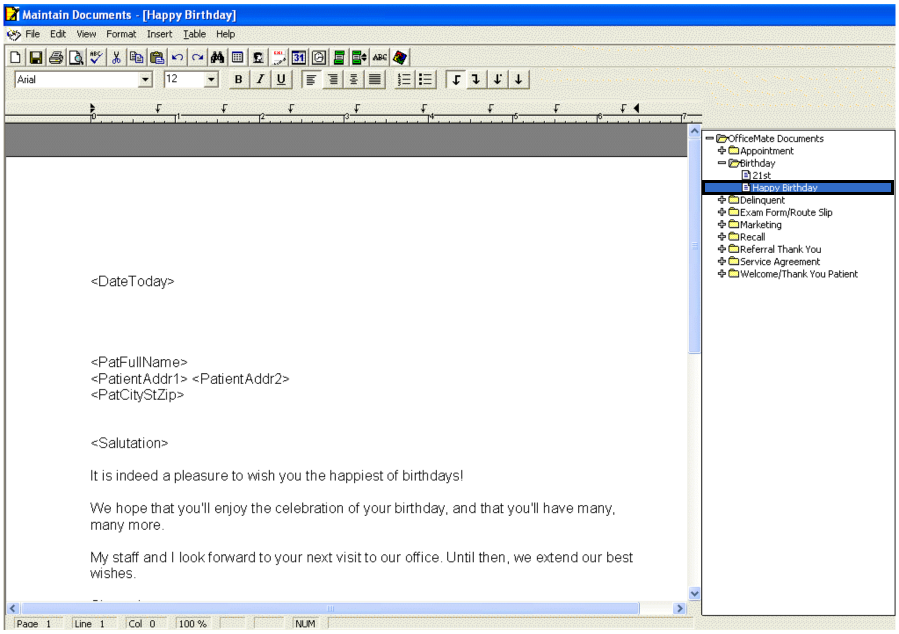
1. Click **Tasks** on the main window toolbar and select **Maintain Documents**.

   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 delete.
5. Click on the name of the text file that you want to delete.


Maintain Documents - [Happy Birthday]
File
Edit
View
Format
Insert
Table
Help
Arial
12
B
I
U
OfficeMate Documents
Appointment
Birthday
21st
Happy Birthday
Delinquent
Exam Form/Route Slip
Marketing
Recall
Referral Thank You
Service Agreement
Welcome/Thank You Patient
Page 1
Line 1
Col 0
100 %
NUM

<DateToday>

<PatFullName>
<PatientAddr1> <PatientAddr2>
<PatCityStZip>

<Salutation>

It is indeed a pleasure to wish you the happiest of birthdays!

We hope that you'll enjoy the celebration of your birthday, and that you'll have many, many more.

My staff and I look forward to your next visit to our office. Until then, we extend our best wishes.

The letter opens in the word processing window.

6. 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.

7. 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, 842
- To modify postcards, 844
- To print postcards, 845
- To rename postcards, 845
- To delete postcards, 846

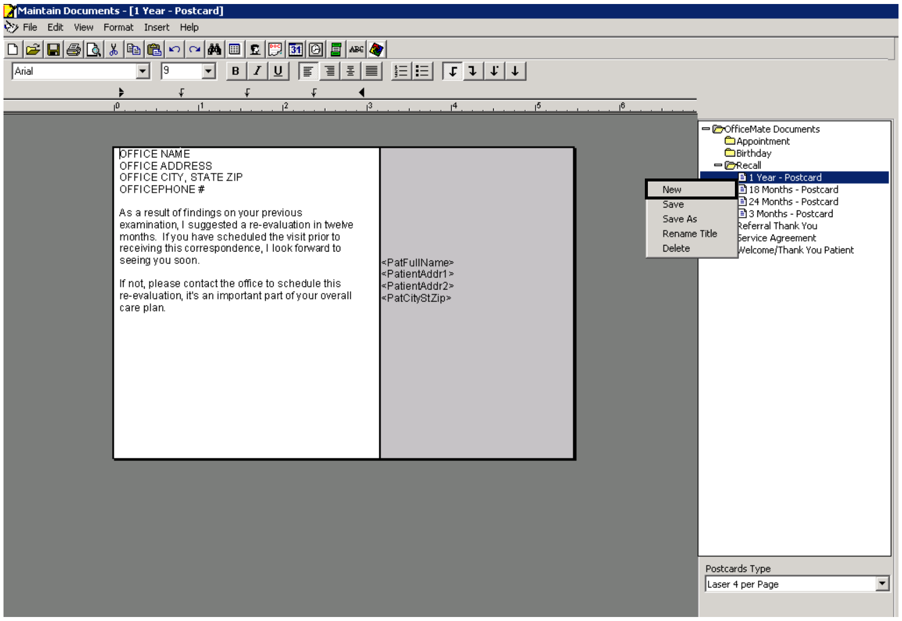
NOTE To create postcards for mass mailings, go to Post Card on page 690 and create and print the postcards through the Reports & Statements window.

▶ To create 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 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**.



Maintain Documents - [1 Year - Postcard]
File Edit View Format Insert Help
Arial
9
OfficeMate Documents
Appointment
Birthday
Recall
1 Year - Postcard
18 Months - Postcard
24 Months - Postcard
3 Months - Postcard
Referral Thank You
Service Agreement
Welcome/Thank You Patient
New
Save
Save As
Rename Title
Delete
Postcards Type
Laser 4 per Page

OFFICE NAME
OFFICE ADDRESS
OFFICE CITY, STATE ZIP
OFFICEPHONE #

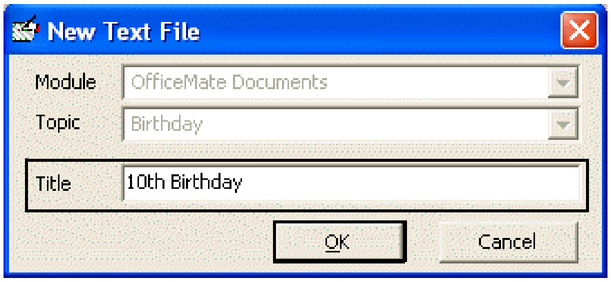
As a result of findings on your previous examination, I suggested a re-evaluation in twelve months. If you have scheduled the visit prior to receiving this correspondence, I look forward to seeing you soon.

If not, please contact the office to schedule this re-evaluation, it's an important part of your overall care plan.

<PatFullName>
<PatientAddr1>
<PatientAddr2>
<PatCityStZip>

The New Text File window opens.

6. Type a title for the new postcard in the **Title** box.
7. Click **OK**.



New Text File
OK
Cancel

Module OfficeMate Documents
Topic Birthday
Title 10th Birthday

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

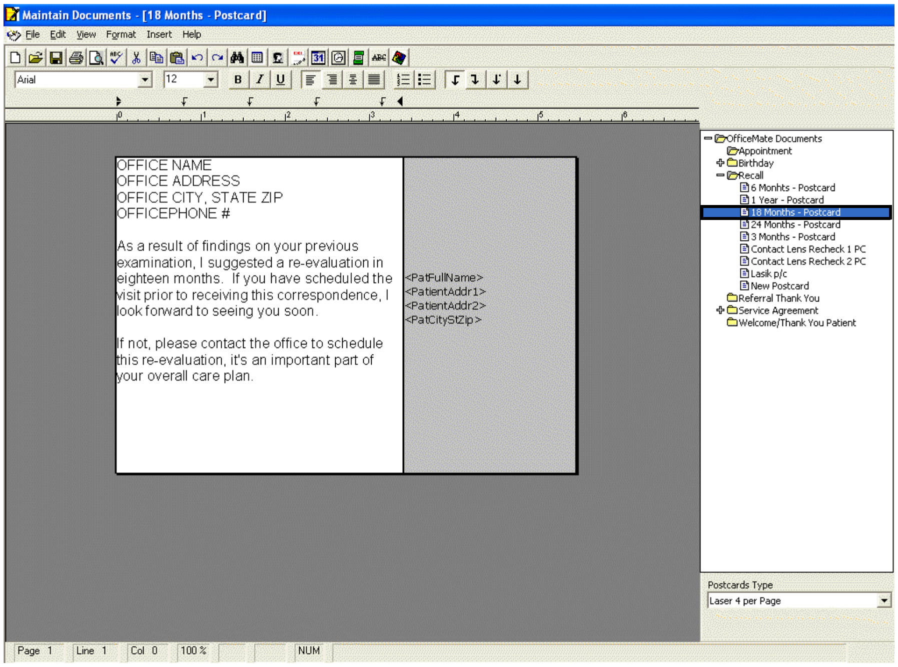
- To format text, click on the icons or click **Format** on the toolbar and select appropriate font, paragraph, and color options.
- To insert dates, times, and pictures, click **Insert** on the toolbar and select an appropriate option.
- To insert merge fields into your file, click **Insert** on the 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.


Maintain Documents - [18 Months - Postcard]
File
Edit
View
Format
Insert
Help
Arial
12
B
I
U
OfficeMate Documents
Appointment
Birthday
Recall
6 Monhts - Postcard
1 Year - Postcard
18 Months - Postcard
24 Months - Postcard
3 Months - Postcard
Contact Lens Recheck 1 PC
Contact Lens Recheck 2 PC
Lasik p/c
New Postcard
Referral Thank You
Service Agreement
Welcome/Thank You Patient
Page 1
Line 1
Col 0
100 %
NUM

OFFICE NAME
OFFICE ADDRESS
OFFICE CITY, STATE ZIP
OFFICEPHONE #

As a result of findings on your previous examination, I suggested a re-evaluation in eighteen months. If you have scheduled the visit prior to receiving this correspondence, I look forward to seeing you soon.

If not, please contact the office to schedule this re-evaluation, it's an important part of your overall care plan.

<PatFullName>
<PatientAddr1>
<PatientAddr2>
<PatCityStZip>

Postcards Type: Laser 4 per Page

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

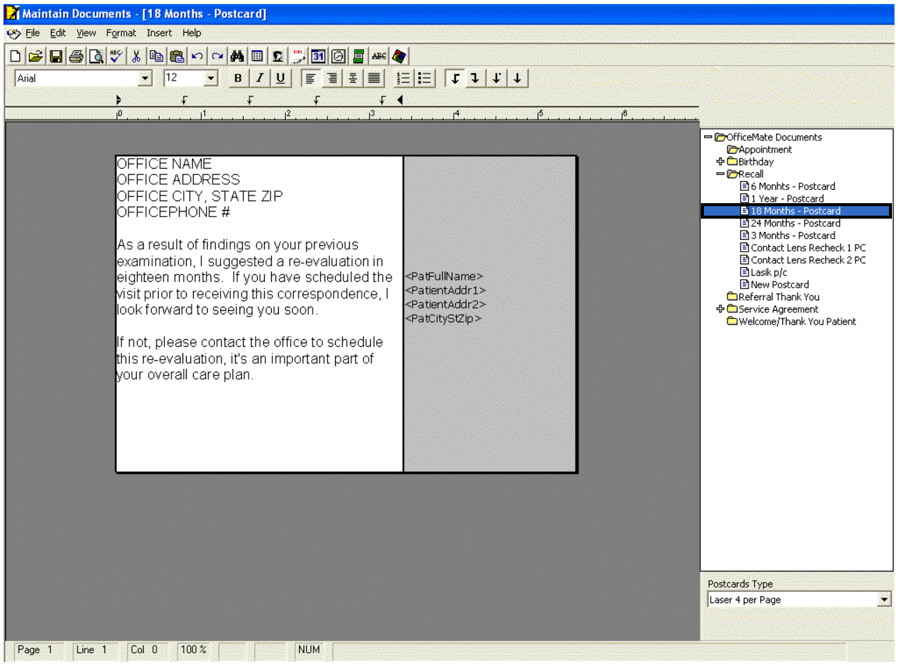
❖ To print postcards that you have created or modified, go to Printing Correspondences on page 819.

▶ 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.

5. Click on the name of the postcard that you want to rename.


Maintain Documents - [18 Months - Postcard]
File Edit View Format Insert Help
Arial
12
OfficeMate Documents
Appointment
Birthday
Recall
6 Monhts - Postcard
1 Year - Postcard
18 Months - Postcard
24 Months - Postcard
3 Months - Postcard
Contact Lens Recheck 1 PC
Contact Lens Recheck 2 PC
Lasik p/c
New Postcard
Referral Thank You
Service Agreement
Welcome/Thank You Patient
Postcards Type
Laser 4 per Page
Page 1
Line 1
Col 0
100 %
NUM

OFFICE NAME
OFFICE ADDRESS
OFFICE CITY, STATE ZIP
OFFICEPHONE #

As a result of findings on your previous examination, I suggested a re-evaluation in eighteen months. If you have scheduled the visit prior to receiving this correspondence, I look forward to seeing you soon.

If not, please contact the office to schedule this re-evaluation, it's an important part of your overall care plan.

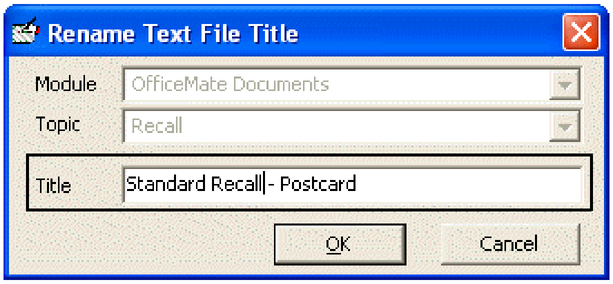
<PatFullName>
<PatientAddr1>
<PatientAddr2>
<PatCityStZip>

The postcard opens in the word processing window.

6. 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.

7. Type the new text file title in the **Title** text box.


Rename Text File Title
OK
Cancel

Module: OfficeMate Documents
Topic: Recall
Title: Standard Recall - Postcard

8. Click **OK**.

▶ To delete postcards

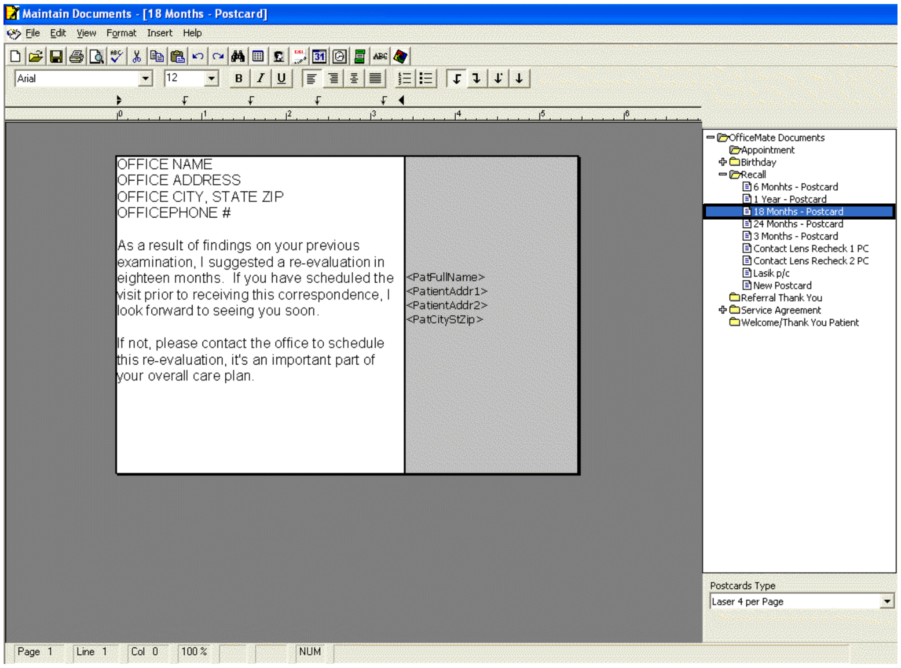
NOTE	You cannot delete postcards that are assigned to a recall mailing schedule, postcards assigned to a service agreement renewal notice, or postcards selected for correspondence printing.

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 delete.
5. Click on the name of the postcard that you want to delete.


Maintain Documents - [18 Months - Postcard]
File
Edit
View
Format
Insert
Help
Arial
12
B
I
U
OfficeMate Documents
Appointment
Birthday
Recall
6 Monhts - Postcard
1 Year - Postcard
18 Months - Postcard
24 Months - Postcard
3 Months - Postcard
Contact Lens Recheck 1 PC
Contact Lens Recheck 2 PC
Lasik p/c
New Postcard
Referral Thank You
Service Agreement
Welcome/Thank You Patient
Page 1
Line 1
Col 0
100 %
NUM

OFFICE NAME
OFFICE ADDRESS
OFFICE CITY, STATE ZIP
OFFICEPHONE #

As a result of findings on your previous examination, I suggested a re-evaluation in eighteen months. If you have scheduled the visit prior to receiving this correspondence, I look forward to seeing you soon.

If not, please contact the office to schedule this re-evaluation, it's an important part of your overall care plan.

<PatFullName>
<PatientAddr1>
<PatientAddr2>
<PatCityStZip>

Postcards Type: Laser 4 per Page

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.

Backing Up & Restoring Data

21

In this chapter:

- Determining Your SQL Database Server & Name, 850
- Determining the Location of Your DATA Folder, 850
- Automatically Backing Up Databases, 851
- Manually Backing Up Databases, 854
- Restoring Databases, 855

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 850.

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.

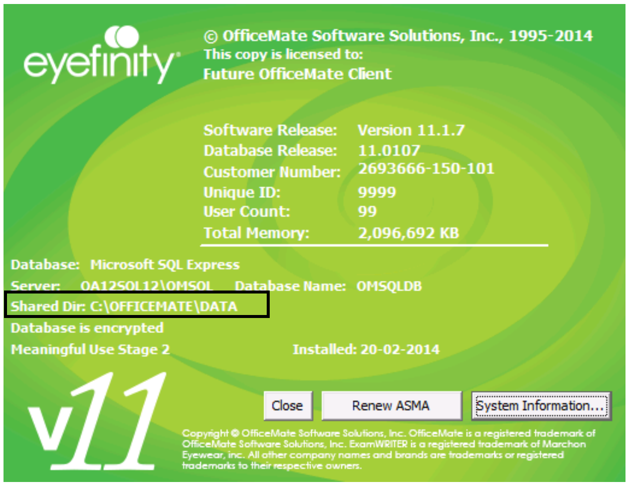
Determining the Location of Your DATA Folder

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.
4. Look for the *Shared Dir* or *Data Dir* information to determine the location of the DATA folder.



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Future OfficeMate Client

Software Release: Version 11.1.7
Database Release: 11.0107
Customer Number: 2693666-150-101
Unique ID: 9999
User Count: 99
Total Memory: 2,096,692 KB

Database: Microsoft SQL Express
Server: OA12SQL12\OMSQL Database Name: OMSQLDB
Shared Dir: C:\OFFICEMATE\DATA
Database is encrypted
Meaningful Use Stage 2 Installed: 20-02-2014

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NOTE The DATA folder is usually located at \\Server\OfficeMate\DATA.

5. 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, 851
- Automatically Backing Up a SQL Database, 853

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	• 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	• 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	**DataHEALTH** 800.269.3666 or sales@eyefinity.com **Practice Shadow by Think Smart Group, Inc.** 800.941.4913.
Local	• Ideal for large practices with in-house IT • No need to worry about data limitations or service interruptions	• 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	For SQL databases: **Veritas Backup Exec with Agent for Applications and Databases** www.veritas.com

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 850.

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 850.

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, 854
- Manually Backing Up a SQL Database, 854

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 850.

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 850.

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 850.

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 850.

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.

Getting Support

22

In this chapter:

- Phone Support, 857
- Online Support, 857
- Terms of Support, 857

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 http://www.eyefinity.com/education-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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