

Medical Office System

Chapter 11: The Reports Main Menu

This chapter discusses

- The Main Reports Menu.
- The contents of each report sub-menu.
- The purpose of each report, selection and sort, and the paper required.

Reports Main Menu

To get to the Reports Main Menu choose option "5" for the Main Menu. When this option is selected, the MOS Reports Menu is displayed:

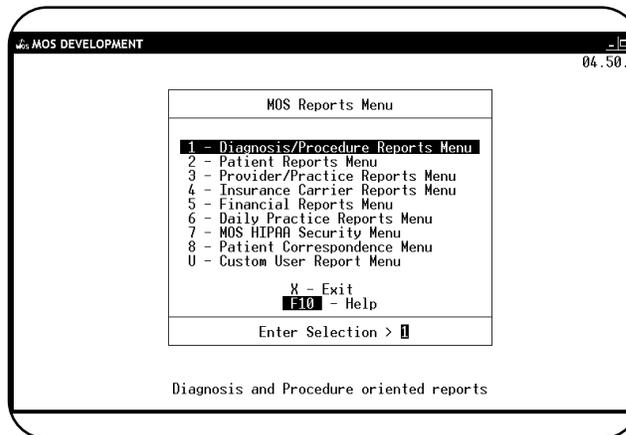


Figure 11-1 : MOS Reports Menu

All reports have been enhanced. HIPPA requires better control. Review these options and Chapter 22 for all the details.

HIPPA Logging Options

New HIPPA regulations require all PHI data to be better secured. The most obvious way data is taken out of the computer and given to someone else is by running a report. To handle this new security, each report has been given security levels that you can control and manage. They will add prompts before each and every report that contains PHI data, in order to properly track what happens to that data. The full security has been explained in Chapter 22. Please take an active approach to handling the security on your system and become familiar with this feature.

PLEASE ENTER YOUR USER ID >

Enter the login you now use with the MOS.

NOW ENTER YOUR PASSWORD >

Enter the correct password for your login. Then the purpose of the report is requested and you can select this purpose from a list by sliding the cursor to the correct answer.

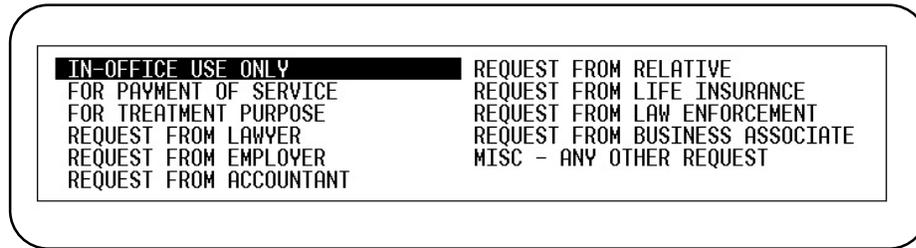


Figure 11-2:Select Type of Authorized Party

This will allow the correct type of disclosure to be properly tracked. Most times the response will correctly be “IN-OFFICE USE ONLY”, “FOR PAYMENT OF SERVICE”, or “FOR TREATMENT PURPOSE”. These are the normal reasons that PHI data is put on paper. These choices will not require any additional information to be collected to continue printing the report. Each category will properly track the information based on the HIPPA regulations. Just select the correct category at this point. If a selection is made that does not require more information the next prompt will be about changing the printer destination. Just skip down to that heading.

Authorized Parties

The information about who received this data and why must be collected. It is important that a name, address, and phone number be collected for any person added at this point. The questions will look like this:



Figure 11-3: Authorized Parties Slide Box

This list contains the parties in the category of authorized parties that you indicated in the list above. If you selected “Lawyers”, then the list will contain all the lawyers that currently in the authorized parties data base, listed by last name or company name. Select an existing party or jump to the section on Adding New Party.

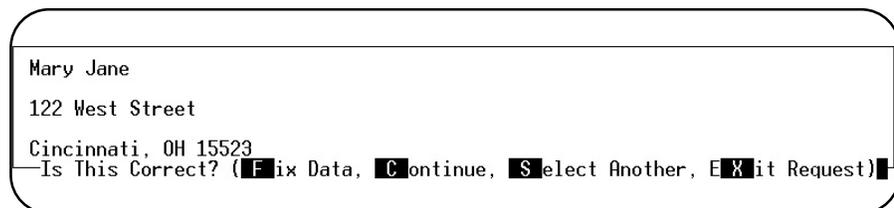


Figure 11-4:Disclosure Party Verify Screen

Press **F** to Fix the address displayed. It will prompt for information like you were adding a new party.

Press **C** to run the report. Continue at the printer selections.

Press **S** to go back and select another party from the list. If the person selected is not correct, that would be the appropriate choice.

Press **X** to cancel the report request.

If MISC is selected, a REASON must be supplied. Please enter a brief reason when requested.

Adding New Party

You can also add a new party, by selecting the first choice. Prompts will ask for the First Name, Last Name, Company, Address Line 1, Address Line2, City, State, Zip, Phone Number, Phone Extension. Then give you a chance to proofread the input. That screen will look like this:

First Last Name of person and/or Company Name must be supplied.

Is this address correct? {Y/N/X} |

Mary Johnson
123 West Street
Bethel Park PA 15120
(412) 555-1212 X123

Figure 11-5: Is Address Correct?

Printer Destination Option

Each option that prints a report will now offer a printer selection. This can be disabled by indicating in the Practice Information (Page 5-9) “Present Printer Options on Reports = N”.

This list of printers is taken from the Printer Configuration that is defined from the MOS Utility Menu. Refer to Chapter 21 - Printer Maintenance for more information on the setup of this option.

In addition to the printers you have listed on your Printer Configuration, special output options are listed also. These options provide some special output characteristics that might help you better manage the output.

LOCAL - this option is displayed on Unix/Linux clients. This will send the output to your client using Transparent local printing. A special code table can be assigned by setting PFPRTCL in the configuration table to the correct code table for use with the LOCAL option.

RTF - Rich Text Format is available on windows systems and would be used to support Windows only printers. This requires some additional setup.

SCREEN DISPLAY - This will send the output to a display software where you will be able to read the output on the screen of your computer. The software used to display this can be defined in the configuration table with the PFPOSTPRINT variable. By default, on Windows the output is sent to “wordpad”, on Unix the output is sent to “more”. By sending the output to more capable software it could be emailed, faxed, printed, or merged. This is a very powerful new feature and can provide some very neat features.

DIGITAL STORAGE - This option was added to provide a way to write the output to a specified file for storage. The file will be stored in ASCII (a very generic format for long term compatibility) to the filename you specify. By default the system name of the report and today’s date is used to name the report. You are given an opportunity to modify that name. If the file already exists, a warning appears and you can change the name or write over the existing file. Use this option for saving the Transaction Review, Daily Recaps, Payment Report, and other reports that pile up and just need to be stored for later access.

The folder that will be used to store these documents can be defaulted in the Configuration Table by entering PFDIGITAL and assigning the folder name. This is an excellent way to write the document to CDROM for permanent storage. (Your hardware must support this function, but it can always be burned on a CDROM at the end of the month.)

Quick Report Reference Page

To select any report, press the menu number from the Reports Menu then the report number or letter.

1 - Diagnosis/Procedure Reports Menu

- 1 - Diagnosis Report
- 2 - Diagnosis Utilization
- 3 - Diagnosis by Patient
- 4 - Multiple Diagnoses by Patient

- 5 - Diagnosis History by Patient
- 6 - Procedure History by Patient

- M - Annual Procedure Utilization

- A - Procedure Report
- B - Procedure Utilization
- C - Procedure by Patient
- D - Change MC Allowance
- E - Procedure Payment Report
- F - Procedure Count & Gross Charges
- G - Procedure List - Medicare Prices
- H - Procedure List - Other Ins Prices
- I - Duplicate Proc Codes for New DR
- J - Procedure Utilization Graphs
- K - Update Standard Charges
- L - Procedures by Carrier

2 - Patient Reports Menu

- 1 - Patient Address List

- 3 - Patient Account Summary
- 4 - Patient Account Summary-Wide
- 5 - Patients' Employer Listing
- 6 - Other Responsible Parties

- 8 - Recall Patient Report

- 0 - Missed Recall Report
- Q - Pre-Coded Test - Medical Notes
- 9 - Inactive Patient List

- A - Recall Letters by Procedure
- B - Patients by Referring M.D.
- C - Patient Birthday Report
- D - Patient Demographics Forms
- E - Patients by Employer
- F - Count of Patients by Carrier
- G - NON MD Referral Source Report
- H - New Patient Graph
- I - New Patient List
- J - Count OF Patients by ZIP
- K - Family List
- L - Patient Tests List

3 - Provider/Practice Reports Menu

- 1 - Providers' Listing
- 2 - Practice Locations
- 3 - Referring Physician Report
- 4 - Daily Office Worksheet Schedule
- 5 - Short Daily Office Schedule
- 6 - Pull List for Appointments
- 7 - Superbills In BATCH
- 8 - Referring Dr. Mailing Labels
- 9 - Print Custom Superbills in Batch
- 0 - Old Superbill format
- J - Very Short Daily Office Schedule

- A - Daily Office Schedule
- B - Referrals Made by Doctor
- C - Practice Closing Report
- D - YTD Patient's by Referring DR
- E - Location Mailing Labels - 1Up
- F - Location Mailing Labels - 3Up
- G - Missed Appointment List
- H - Count Patients/Claim by Provider
- I - Patients by Location

4 - Insurance Carrier Reports Menu

- 1 - Health Insurance Carriers
- 2 - Workers' Compensation Carriers
- 3 - Employer Claim Count
- 4 - Performance by Carrier
- 5 - Electronic Insurance Data
- 6 - Check Track List
- 7 - Code Cross-Reference List
- 8 - Submission Summary
- 9 - Count Patients by Carrier

- A - Drug Definitions List
- B - Diagnostic Lab Testing Providers
- C - Count Patients/Claims By Carrier
- D - Patient Carrier History

5 - Financial Reports Menu

- 1 - Daily Recap - Summary Only
- 2 - Rerun Old Daily Recap
- 3 - Transaction Review
- 4 - W/C By Employer Report
- 5 - Invoices on HOLD
- 6 - Invoices in COLLECTION
- 7 - Credit Balance Invoices
- 8 - A/R Report
- I - A/R Report / By Invoice Date
- H - Patient Balance List
- J-Daily Recap-Select Posting Date
- K-Daily Recap-Sum-Select Date

- 9 - A/R Report with Phone Numbers
- A-Special Daily Summary
- B - Activity Overview Graphs
- C - Year-to-Date Summary
- D - A/R Worksheet
- E - Write-Off Overdue Invoices
- F - Payments Report
- G - Print Daily Recap to Video
- T - Summary Procedure Payment Report
- L - Submission Analysis Report
- V - Year-to-Date Summary

6 - Daily Practice Reports Menu

- A - Day Sheet
- B - Activity by USER
- C - Practice Statistics
- D - Display RECAP ERRORS
- E - Recap Error Report
- F - Special Service Date Summary
- G - Daily Submission Detail
- H - Submission by Carrier
- I - Suspended Claims List
- J - Submission History by Account
- K - Service Date Detail

- L - Invoices PENDING Missing Data
- M - Electronic Submission Report
- N - Hospital Admits Report
- P - Current Hospitalized Patients
- R - Recap List

--- Must Run 1 first ---

- 1 - Collect Data for Provider TOTALS
- 2 - Provider Monthly Summary
- 3 - Detail with Patient Names
- 4 - Daily Recap Edit Report
- 7 - Diagnoses/Procedure Verify

This menu is described in the DAILY RECAP chapter 8.

7 - MOS HIPPA Security Menu

- U - Authorized Users

- R - Output Authorizations
- S - Output Authorizations List
- T - Add Output Authorizations

- A - View User Activity Log
- B - Print User Activity Log

- 1 - Add/Update Disclosure Parties
- 2 - Print Disclosure List

- 4 - View Patient HIPPA Log
- 5 - Patient Disclosure Report

8 - Patient Correspondence Menu

- 1 - Patent Letters

- 3 - Recall Patient Letters
- 4 - Recall Letters by Procedure

- 6 - HIPPA Label for Files - 1 up
- 7 - HIPPA Label for Files - 3 up

- A - Patient Mailing Labels - 1 up
- B - Patient Mailing Labels - 3 up

- C - Recall Patient Labels - 1up
- D - Recall Patient Labels - 3up

- E - Patient Letter Log

9 - Export Menu

- Export Options

- 1 - Patient Demographics - CSV
- 8 - Collection Reports / Export
- 9 - Invoice Data

U - Custom User Report Menu

This choice has been added to allow your local custom programmer to add items without changing the basic MOS package. This prompt will load a menu called "mosrepu". It is not included in the MOS package and can be used to list reports or functions that are used in your practice, but are not part of the basic MOS package.

Notes:

1 - Diagnosis Report

- Purpose:** Prints a list of all the diagnosis on file in the Medical Office System.
- Sort:** The report can be sorted by your diagnosis code, standard ICD-9-CM code, YTD times used, Diagnosis category, or diagnosis description.
- Selection:** The report selects all or only utilized diagnoses on file in the MOS.
- Paper:** Default printer with 80 column report for 8.5" paper. No special printer control.
- Procedure:** At the Reports Main Menu press **[1]** for the "MOS Diagnosis/Procedure Menu", then press **[1]** for Diagnosis Report to display the Sort Diagnosis Report Menu.

```
Change Printer Selection? (Y/N) >
```

Press **[Y]** to change the printer destination. A new selection for only Utilized Codes has been added.

```
SELECT: <A>ll, <U>tilized Codes Only: >
```

Press **[A]** to print all diagnosis codes as before. Press **[U]** to only print codes that were utilized. This can shorten the list dramatically.

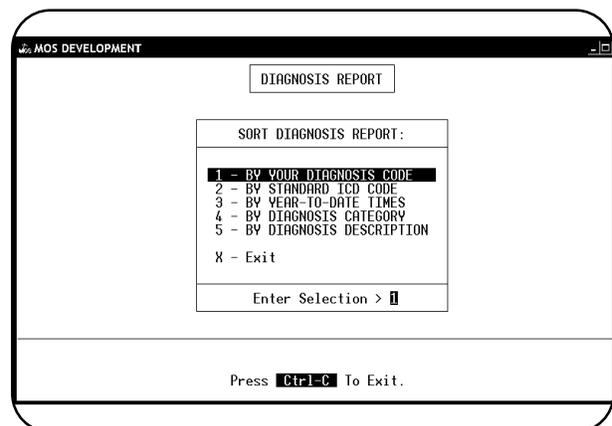


Figure 11-6 : Sort Diagnosis Menu

Select one sort option by highlighting your choice using the arrow keys and pressing **[ENTER]** or press the number corresponding to your choice. To cancel the report, press **[X]**.

After choosing a sort option, the system will select, sort, then print those records.

See Appendix C for a sample printout.

2 - Diagnosis Utilization Report

- Purpose:** Prints a list of all the diagnoses on file with the usage for each month and year-to-date totals.
- Sort:** The report can be sorted by diagnosis code, I.D. code, year-to-date times used, or a diagnosis category.
- Paper:** Default Printer, 132 column report with Printer Initialization code 13 to set 16.7 pitch. This should allow the report to print on 8.5" paper. If your printer cannot print this size, the report will require 15" paper.
- Selection:** The report selects all diagnosis on file in the MOS.
- Procedure:** At the Reports Main Menu, press **[1]** for the "MOS Diagnosis/Procedure Menu" then press **[2]** for Diagnosis Utilization. If you assigned a FINANCIAL PASSWORD, you will need to supply it at this time. Then the Sort Diagnosis Report Menu is displayed.

Change Printer Selection? (Y/N) >

Press **[Y]** to change the printer destination.

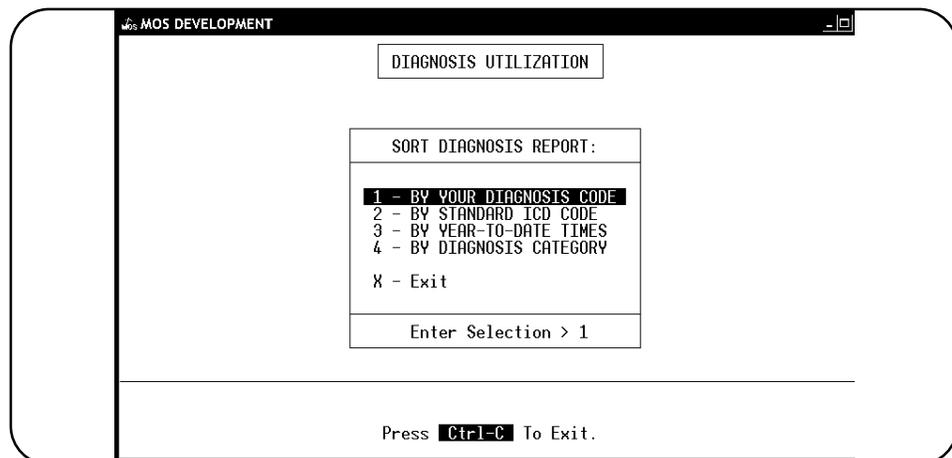


Figure 11-7 : Sort Diagnosis Report Menu

Select one sort option by highlighting your choice using the arrow keys and pressing **[ENTER]** or press the number corresponding to your choice. To cancel the report, press **[X]**.

After choosing one of the sort options, the system will select, sort and then print those records.

See Appendix C for a sample printout.

3 - Diagnosis by Patient

Purpose: Prints a list of selected diagnosis currently listed on invoices in the MOS showing the usage between the date range with the patient's name. Since the source of the data is the patient invoices, this report is only accurate in the recent past. Once the invoices reach the age where they are being purged, the report would not include all invoices.

Sort: The report is sorted by patient name, then date.

Selection: Provider, diagnosis category (or diagnosis code), from-date and to-date are entered to determine which records are to be selected.

Paper: Default Printer with a 95 column width, with special printer initialization code 12 to select 12 pitch print. This will enable the report to print on 8.5" paper. If your printer is unable to print smaller than 10 pitch you will require 15" paper.

Procedure: At the Reports Main Menu press **[1]** for the "MOS Diagnosis/Procedure Menu" then press **[3]** for the Diagnosis By Patient. Answer the following record selection questions:

Change Printer Selection? (Y/N) >

Press **[Y]** to change the printer destination.

Then a slide list is displayed where you can select all providers or one provider.

Highlight your selection and press **[ENTER]**.

```
ALL PROVIDERS
1  -Vicki Henry
11 -Dennis Spanish
12 -John Candy
18 -Ima Badboy
8  -Wilson Pickit
```

ENTER DIAGNOSIS CATEGORY >

If you press **[ENTER]** to the diagnosis category, you will asked for a diagnosis code.

ENTER DIAGNOSIS CODE>

Press **[ENTER]** to select all diagnosis codes.

ENTER FROM DATE >

then

ENTER TO DATE >

After entering the last question, the system sorts then prints the records.

See Appendix C for a sample printout.

Diagnosis/Procedure Menu

4 - Multiple Diagnoses by Patient

Purpose: Prints a list of all patients that have been diagnosed with the same group of diagnoses.

Sort: The report is sorted by Patient Account..

Selection: All patients that have been diagnosed with the list of codes given will be selected.

Paper: Default Printer with a 80 column width. This will print on 8 ½ x 11" paper.

Procedure: At the Reports Main Menu press **[1]** for the "MOS Diagnosis/Procedure Menu" then press **[4]** for Multiple Diagnoses By Patient. Answer the following record selection questions:

```
ADD A DIAGNOSIS
START SEARCHING
```

Select "ADD A DIAGNOSIS" and enter a diagnoses code. It is added to the list. Repeat that for as many codes as you wish to search. If you add one in error, highlight it and press **[ENTER]**. It will be deleted. When all the codes have been indicated, highlight "START SEARCHING" and the report will begin its search. Then the printer selection question will be displayed.

```
Change Printer Selection? (Y/N) >
```

Press **[Y]** to change the printer destination.

See Appendix C for a sample printout.

5 - Diagnosis History by Patient

- Purpose:** Prints a list of diagnosis history by patient. This can be used to discover what patients have a given diagnosis, or look at the demographics of your practice for treatment and care considerations.
- Sort:** The report is sorted by patient, then date of diagnosis. If the summary version is selected, the report is sorted by patient, then diagnosis code and the oldest date for that diagnosis is listed.
- Selection:** A variety of selection options are available. By provider, by diagnosis category, by one diagnosis and then between two dates provided by the users.
- Paper:** Sent to Default Printer, 85 column report with special printer code 12 to print at 12 pitch. At this setting the report should fit on 8.5" paper
- Procedure:** At the Reports Main Menu press **[1]** for the "MOS Diagnosis/Procedure Menu" and then press **[5]** for Diagnosis History by Patient. Enter your access information, login, password, reason and then the printer option appears.

Change Printer Selection? (Y/N) >

Press **[Y]** to change the printer destination. Then a slide list is displayed where you can select all providers or one provider. Highlight your selection and press **[ENTER]**.

At this point you may select only one diagnosis category. Enter the code in the prompt or leave it blank for all codes.

```
ALL PROVIDERS
1  -Uicki Henry
11 -Dennis Spanish
12 -John Candy
18 -Ina Badboy
8  -Wilson Pickit
```

Enter Diagnosis Category (BLANK to Select ONE DIAGNOSIS CODE)

If the diagnosis category is blank then the diagnosis code prompt appears:

Enter Diagnosis Code:

Then a date range may be entered. This will default to all possible dates. Then an option to allow the report to be summarized by listing the diagnosis code only once for each patient. This will reduce the volume of the report, since each time a patient is treated for the diagnosis it will be entered in the file. This prompt will shorten the report.

Summarize and list one line per patient? (Y/N) N

The default is No but change it to save paper. The report will show the first date the patient was diagnosed with that condition, if you selected only a summary.

6 - Procedure History by Patient

Purpose: Prints a list of procedure history. This can be used to discover what patients have had a given procedure, or look at the demographics of your practice for treatment and care considerations.

Sort: The report is sorted by procedure then patient, then date of procedure. If the summary version is selected, the report is will only list a procedure once for each patient.

Selection: A variety of selection options are available. By provider, by type of service, by one procedure and then between two dates provided by the users.

Paper: Sent to Default Printer, 85 column report with special printer code 12 to print at 12 pitch. At this setting the report should fit on 8.5" paper

Procedure: At the Reports Main Menu press **[1]** for the "MOS Diagnosis/Procedure Menu" and then press **[5]** for Diagnosis History by Patient. Enter your access information, login, password, reason and then the printer option appears.

```
Change Printer Selection? (Y/N) >
```

Press **[Y]** to change the printer destination. Then a slide list is displayed where you can select all providers or one provider. Highlight your selection and press **[ENTER]**.

```
ALL PROVIDERS
1  -Uicki Henry
11 -Dennis Spanish
12 -John Candy
18 -Ina Badboy
8  -Wilson Picket
```

At this point you may select only one diagnosis category. Enter the code in the prompt or leave it blank for all codes.

```
Enter Diagnosis Category (BLANK to Select ONE DIAGNOSIS CODE)
```

If the diagnosis category is blank then the diagnosis code prompt appears:

```
Enter Diagnosis Code:
```

Then a date range may be entered. This will default to all possible dates. Then an option to allow the report to be summarized by listing the diagnosis code only once for each patient. This will reduce the volume of the report, since each time a patient is treated for the diagnosis it will be entered in the file. This prompt will shorten the report.

```
Summarize and list one line per patient? (Y/N) N
```

The default is No but change it to save paper. The report will show the first date the patient was diagnosed with that condition, if you selected only a summary.

Diagnosis/Procedure Menu

M - Annual Procedure Utilization

Purpose: Prints a list of selected procedures on file in the Medical Office System with the usage for each month with a year-to-date total.

Sort: The report can be sorted by either: your ID code, year-to-date times used, standard CPT code, year-to-date amount, type of service code, or alphabetically by description.

Selection: Selects any given year,

Paper: Sent to Default Printer, 132 column report with special printer code 13 to print at 16.7 pitch. At this setting the report should fit on 8.5" paper. If your printer is not capable of printing this small this report will require 15" paper.

Procedure: At the Reports Main Menu press **[1]** for the "MOS Diagnosis/Procedure Menu" and then press **[B]** for Procedure Utilization. If a FINANCIAL PASSWORD was assigned to your system you will be prompted for password at this point.

Change Printer Selection? (Y/N) >

Press **[Y]** to change the printer destination. The Selection Procedure Browse will then be displayed as shown in Figure 11.1, 11.1, 11.1.

Choose one of the selections by highlighting your choice using the arrow keys and then pressing

[ENTER].

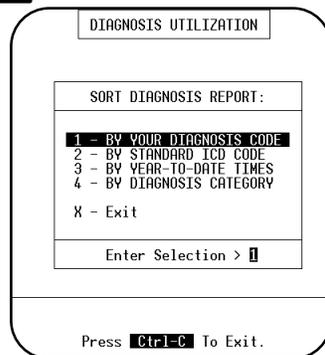


Figure 11-11 : Sort Procedure Report Menu

The Sort Procedure Report Menu will then be displayed as shown in Figure 11.1, 11.1.

Select one of the sort options by highlighting your choice using the arrow keys and then pressing **[ENTER]** or press the number corresponding to your choice. To cancel the report press **[X]**. After choosing one of the sort options the report will start to select and sort the records and then print.

Add Descriptions in last column? (Y/N) >

A prompt to add a description to the last column will be displayed. This will print the procedure description, but will require wider paper. It is left as an option.

See Appendix C for a sample printout.

Diagnosis/Procedure Menu

A - Procedure Report

Purpose: Prints a list of procedures on file in the MOS.

Sort: The report can be sorted by either: your ID code, year-to-date times used, standard CPT code, year-to-date amount, type of service code, or alphabetically by description.

Selection: The report can select all procedures on file in the MOS, which includes procedures assigned to an individual provider, or all default procedures, which do not include procedures assigned to an individual provider, or procedures assigned to one individual provider.

Paper: Sent to Default Printer, 92 column report with special printer code 12 to print at 12 pitch. At this setting the report should fit on 8.5" paper. If your printer is not capable of printing this small, this report will require 15" paper.

Procedure: At the Reports Main Menu press **[1]** for the "MOS Diagnosis/Procedure Menu" and then press **[A]** for the Procedure Report. The Selection Procedure Browse will then be displayed:

```
Change Printer Selection? (Y/N) >
```

Press **[Y]** to change the printer destination. Then a selection indicates which procedures should be printed. Only procedures for a given provider, default procedures or all procedures can be selected at this time. Choose one of the selections by highlighting your choice using the arrow keys and then pressing **[ENTER]**.

```
ALL PROCEDURE CODES
DEFAULT PROCEDURE CODES
1 -Uicki Henry
11 -Dennis Spanish
12 -John Candy
18 -Ina Badboy
8 -Wilson Pickit
```

Figure 11-12 : Selection Procedure Browse

Then an additional selection allows all codes of that group to be selected or only utilized codes. This can shorten the list even further.

```
SELECT: <A>11, <U>tilized Codes Only: >
```

Press **[A]** to print all procedure codes as before. Press **[U]** to only print codes that were utilized. This can shorten the list dramatically.

The Sort Procedure Report Menu will then be displayed:

Select one of the sort options by highlighting your choice using the arrow keys and then pressing **[ENTER]** or press the number corresponding to your choice. To cancel the report press **[X]**. After choosing one of the sort options the report will begin to select and sort.

See Appendix C for a sample printout.

```
PROCEDURE REPORT

SORT PROCEDURE REPORT:

1 - BY YOUR PROCEDURE CODE
2 - BY STANDARD CPT CODE
3 - BY YEAR-TO-DATE TIMES
4 - BY YEAR-TO-DATE AMOUNT
5 - BY TYPE OF SERVICE CODE
6 - BY PROCEDURE DESCRIPTION
X - Exit

REPOR Enter Selection > 1

Press BREAK To Exit.
```

Figure 11-13 : Sort Procedure Report Menu

B - Procedure Utilization

Purpose: Prints a list of selected procedures on file in the Medical Office System with the usage for each month with a year-to-date total.

Sort: The report can be sorted by either: your ID code, year-to-date times used, standard CPT code, year-to-date amount, type of service code, or alphabetically by description.

Selection: The report can select all procedures on file in the MOS, which includes procedures assigned to an individual provider, or all default procedures, which do not include procedures assigned to an individual provider, or procedures assigned to one individual provider.

Paper: Sent to Default Printer, 132 column report with special printer code 13 to print at 16.7 pitch. At this setting the report should fit on 8.5" paper. If your printer is not capable of printing this small this report will require 15" paper.

Procedure: At the Reports Main Menu press **[1]** for the "MOS Diagnosis/Procedure Menu" and then press **[B]** for Procedure Utilization. If a FINANCIAL PASSWORD was assigned to your system you will be prompted for password at this point.

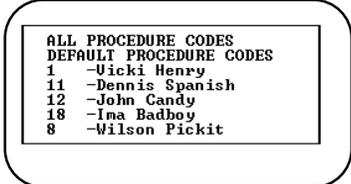
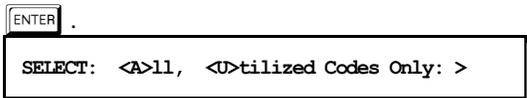


Figure 11-14 : Selection Procedure Browse



Press **[Y]** to change the printer destination. The Selection Procedure Browse will then be displayed as shown in Figure 11.1, 11.1, 11.1.

Choose one of the selections by highlighting your choice using the arrow keys and then pressing



Press **[A]** to print all procedure codes as before. Press **[U]** to only print codes that were utilized. This can shorten the list dramatically.

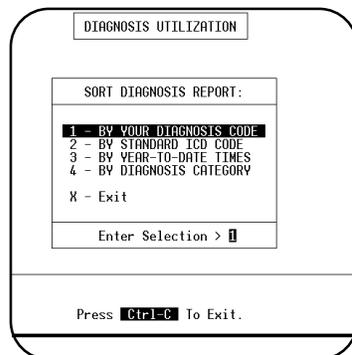


Figure 11-15 : Sort Procedure Report Menu

The Sort Procedure Report Menu will then be displayed as shown in Figure 11.1, 11.1.

Select one of the sort options by highlighting your choice using the arrow keys and then pressing **[ENTER]** or press the number corresponding to your choice. To cancel the report press **[X]**. After choosing one of the sort options the report will start to select and sort the records and then print.



A prompt to add a description to the last column will be displayed. This will print the procedure description, but will require wider paper. It is left as an option.

See Appendix C for a sample printout.

Diagnosis/Procedure Menu

C - Procedure by Patient

Purpose: Prints a list of patients that had selected procedures (performed over a given period of time). The patient's name, date of service, age, number of services, and sex are listed. This report is based on invoice information. It will be valid for any time frame that has not been purged.

Sort: The report is sorted by provider, then type of service (or procedure), then by date.

Selection: Provider, type of service code (or procedure), from-date and to-date are entered by the user to determine the records to be selected.

Paper: Sent to default printer, 95 column report with special printer code 13 to print at 16.7 pitch. At this setting the report should fit on 8.5" paper. If your printer is not capable of printing this small this report will require 15" paper.

Procedure: At the Reports Main Menu press **[1]** for the "MOS Diagnosis/Procedure Menu" and then press **[C]** for Procedure by Patient. Then answer the following selection questions:

Change Printer Selection? (Y/N) >

Press **[Y]** to change the printer destination. A listbox then appears with a choice of providers. Highlight your selection and press **[ENTER]**.

```
ALL PROVIDERS
1  -Vicki Henry
11 -Dennis Spanish
12 -John Candy
18 -Ima Badboy
8  -Wilson Pickit
```

The next selection can be either by TOS or Procedure code. If you give a TOS, the procedure code prompt will not be displayed. If you would like to select an individual procedure code, leave the TOS blank.

ENTER TYPE OF SERVICE CODE >

If you would rather select by procedure codes press **[ENTER]**. If you entered a TOS code, the next question is not displayed.

ENTER PROCEDURE CODE (ENTER FOR ALL) >

To select all procedures press **[ENTER]**.

ENTER FROM DATE (ENTER FOR Earliest) >

then

ENTER TO DATE (ENTER FOR Latest) >

After entering the last question the report will start to select and sort the records and then print.

See Appendix C for a sample printout.

D - Change MC Allowances

Purpose: Provides an easy way to change the Medicare charge and allowance for selected procedures. You would run this report after receiving Medicare's charge and allowance report.

Sort: The report is sorted by CPT Procedure code or Your Code.

Selection: The report selects the procedures for a given provider or all procedures on file.

Paper: Sent to Default Printer, 80 column report with no special printer codes. This will print on standard 8.5" by 11" paper.

Procedure: At the Reports Main Menu press for the "MOS Diagnosis/Procedure Menu" and then press for Charge MC Allowances. Then answer the following selection questions:

Change Printer Selection? (Y/N) >

Press to change the printer destination.

A slide box is displayed with a list of providers that can be selected. Highlight your selection and press .

```

ALL PROVIDERS
1  -Vicki Henry
11 -Dennis Spanish
12 -John Gandy
18 -Ima Badboy
8  -Wilson Pickit
    
```

New Sort on Change MC Allows

Then a prompt will request the SORT required.

SORT BY: our Code Or tandard CPT
Y

Select the sort you would like.

Then enter the expected payment factor.

Note: This will change the expected factor value in the setup file, see chapter 5, Setting Up the Practice File, for more information.

Enter % Factor for Expected MC Payment >80.000

The next question asks if you are participating with Medicare. Answer if you accept assignment, answer if you do not. This will enter the NON PAR payment amount base don the percent given. It is now possible to make exceptions to this general update. Do what will apply to the most items here and then update the exceptions with the alternate information. If your practice is varied, it may require various factors be defined.

If you indicated you are NOT participating, a question will ask if the MC NON PAR fee should be added automatically to each procedure. Answer if each should be done automatically. Answer to have a prompt for each procedure give you a choice. The NON PAR payment amount would be (Allowed Amount x Expected MC payment Factor) X NON Par Allowance Factor. For example, Standard Charge: \$100, MC Allowance= \$92, MC payment factor=80% , and NON PAR

Allowance % = 95% would give a payment of 92x.8x.95 or \$72.20. The factors can be changed on the Practice Information Default Screen.

Then the first procedure you requested will be displayed:

```
MOS DEVELOPMENT
CHANGE MC ALLOWANCES
Selecting Provider Code ~ALL
Expected Payment Factor = 80.0000%

Provider 1
22222 -98989 -TEST 22222
Standard Charge $ 51.00
Old MC Allowance: 38.00, Expected Payment: 30.40
New Charge: > 38.00

NEW MC ALLOWANCE for: 22222 - 98989 or 8 to EXIT >
```

Figure 11-18 : Changing Medicare Allowances

You may change the charge amount and expected payment by entering a new charge value and pressing . The MOS will automatically calculate the new expected payment to the charge times the Medicare Factor. Then the next procedure will be displayed.

If you do not want to change the charge, just press to keep the old charge and to automatically recalculate the new expected payment. Then the next procedure is displayed until all procedures have been completed, or press then to cancel the rest of the report. Note: This report only changes the charge amount for Medicare.

See Appendix C for a sample printout.

E - Procedure Payment Report

Note: *Payments and write offs must be applied to each charge line to analysis your income in this manner.*

Purpose: Print an analysis of the charges, payments, write-offs and refunds made by procedure. This report will only give accurate data if the payments and write-offs are entered by line items. In other words, a payment and write-off must be applied to each charge individually.

Sort: This report is sorted by procedure code.

Selection: One or all providers can be selected. One or all procedures can be selected. Only invoices paid in full will be considered. A date range is required which will select charges and payments posted against them based on the date of service of the charge.

Paper: Sent to default printer this report will print 115 columns with printer code for condensed print size so the report will print on 8.5" wide paper if your printer supports this size print, otherwise it will require 15 inch paper.

Procedure: Press **G** from the "Financial Reports Menu". If you assigned a FINANCIAL PASSWORD, you will be asked to enter it at this time. Then the following questions will be displayed:

Change Printer Selection? (Y/N) >

Press **Y** to change the printer destination.

Highlight the correct provider and press **ENTER**. This option selects based on the provider listed on the invoice.

ALL PROVIDERS	
1	- Vicki Henry
11	- Dennis Spanish
12	- John Candy

Then the next prompt is displayed:

Enter Selected Procedure Code: (**ENTER** for ALL)

Enter one procedure code, if only one should be selected. If this is left blank, all procedures will be selected.

Select on Referring Provider: (**ENTER** for ALL)

Enter a code for the referring provider. This will limit the invoices selected to ones that have the referring provider that you have listed.

The next prompt will request the data range

Starting Date: (01/01/98) >

Supply the starting date or press **ENTER** to use beginning of the current year. This selects based on the date of service of the charge. Then a prompt for the ending date will be displayed.

Ending Date: (mm/dd/yy) **ENTER** for 01/28/98 >

Enter the ending date. Today's Date is the default ending date supplied.

ONLY Select INVOICES with a Zero Balance? (Y/N) >

Enter **Y** to omit invoices with outstanding balances. This will allow you to include invoices with partial payments, but will affect the ratio that will tell you if the procedure is profitable

The report will then select and print. Then a last chance box is displayed to recap what you selected.

ALL PROVIDERS All Procedures, Procedures done between 01/01/98 and 01/28/98 Redo? <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> X -Exit

Verify the information and press or to create the report. Press to repeat the selections. Press to exit to the menu without printing.

See Appendix C for a sample printout.

F - Procedure Count & Gross Charges

Purpose: Print an analysis of procedures done by each provider. Columns for each provider will display a count of procedures done and the gross charges billed for that procedure. Up to 8 providers can be listed.

Sort: This report is sorted by procedure code, Provider code. A total number of procedures done and total gross charges for each provider, is printed.

Selection: All services are selected between a given range of dates. If your system has more than 8 doctors on file, a selection will allow you to select up to 8 providers. Highlight and press on any provider you wish included. Select the last one called "END SELECTION" when you are done.

Paper: Sent to default printer this report will print 132 columns with printer code for condensed print size so the report will print on 8.5" wide paper if your printer supports this size print, otherwise it will require 15 inch paper.

Procedure: Press from the "Financial Reports Menu", then the following questions will be displayed:

Change Printer Selection? (Y/N) >

Press to change the printer destination.

ENTER FROM DATE (mm/dd/yy) (for Earliest) >

Supply the starting date for selecting based on the date of service of the charge. Then a prompt for the ending date will be displayed.

ENTER TO DATE (for Latest) >

Enter the ending date or press for today's date plus one year. That should adequately include all transactions to the latest date.

If your practice has more than 8 doctors on file, a window will appear here and you can highlight any providers you wish included on this report and press . Continue to highlight and select until up to 8 doctors have been selected. The codes selected are displayed in the bottom left corner of the screen. When you are finished with your list, highlight "END SELECTION" and press .

ALL Procedures done between 01/30/83 and 01/26/99
REDO? e it

Press or to create the report. Press to repeat the selections or to exit without printing.

See Appendix C for a sample printout.

G - Procedure List - Medicare Prices

- Purpose:** Prints a list of procedures on file in the MOS with Medicare Allowance and expected payments.
- Sort:** The report can be sorted by either: your Procedure code, year-to-date times used, standard CPT code, year-to-date amount, type of service code, or alphabetically by description.
- Selection:** The report can select all procedures on file in the MOS, which includes procedures assigned to an individual provider, or all default procedures, which do not include procedures assigned to an individual provider, or procedures assigned to one individual provider. It is also possible to further narrow the scope of the report by only selecting codes that have been used in the last year.
- Paper:** Sent to Default Printer, 132 column report with special printer code 13 to print at 16.7 pitch. At this setting the report should fit on 8.5" paper. If your printer is not capable of printing this small, this report will require 15" paper.
- Procedure:** At the Reports Main Menu press **[1]** for the "MOS Diagnosis/Procedure Menu" and then press **[G]** for the Procedure List. The following prompts will then be displayed.

```
Change Printer Selection? (Y/N) >
```

Press **[Y]** to change the printer destination.

Then you will be able to select the procedures codes by provider or all codes defined as shown in the figure at the right. Choose one of the selections by highlighting your choice using the arrow keys and then pressing **[ENTER]**. Then to make the report more helpful, you can narrow the report to just the utilized codes by selection **[U]** at the following prompt.

```
SELECT: <A>ll, <U>tilized Codes Only: >
```

Press **[A]** to print all procedure codes as before. Press **[U]** to only print codes that were utilized. This can shorten the list dramatically.

The Sort Procedure Report Menu will then be displayed:

Select one of the sort options by highlighting your choice using the arrow keys and then pressing **[ENTER]** or press the number corresponding to your choice. To cancel the report press **[X]**. After choosing one of the sort options the report will begin to select and sort.

See Appendix C for a sample printout.

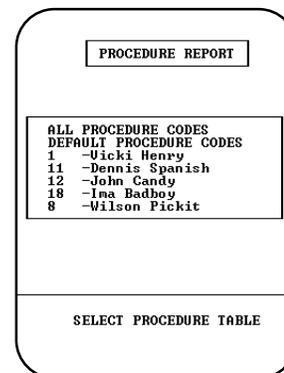


Figure 11-19 : Selection Procedure Browse

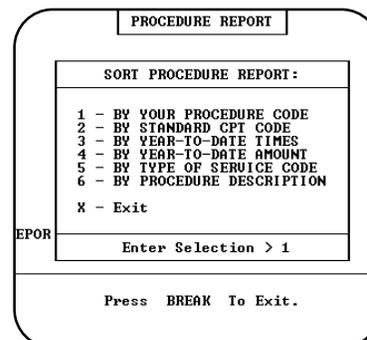


Figure 11-20 : Sort Procedure Report Menu

H - Procedure List - Other Ins Prices

Purpose: Prints a list of procedures on file in the MOS with selected procedure allowance. This will print a price list for carriers other than Medicare with allowed charge and expected payments.

Sort: The report can be sorted by either: your Procedure code, year-to-date times used, standard CPT code, year-to-date amount, type of service code, or alphabetically by description.

Selection: The report can select all procedures on file in the MOS, which includes procedures assigned to an individual provider, or all default procedures, which do not include procedures assigned to an individual provider, or procedures assigned to one individual provider. It is also possible to further narrow the scope of the report by only selecting codes that have been used in the last year.

Paper: Sent to Default Printer, 132 column report with special printer code 13 to print at 16.7 pitch. At this setting the report should fit on 8.5" paper. If your printer is not capable of printing this small, this report will require 15" paper.

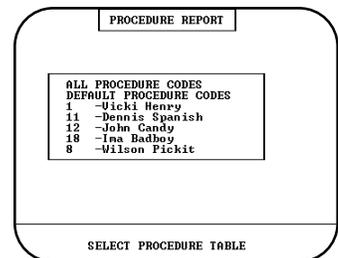
Procedure: At the Reports Main Menu press **[1]** for the "MOS Diagnosis/Procedure Menu" and then press **[G]** for the Procedure List. The following prompts will then be displayed.

```
Change Printer Selection? (Y/N) >
```

Press **[Y]** to change the printer

Choose one of the selections by highlighting your choice using the arrow keys and then pressing **[ENTER]**.

```
SELECT: <A>11, <U>tilized Codes Only: >
```



Press **[A]** to print all procedure codes as before. Press **[U]** to only print codes that were utilized. This can shorten the list dramatically.

Figure 11-21 : Selection Procedure Browse

A prompt appears for you to select the Price Level that should print on this report:

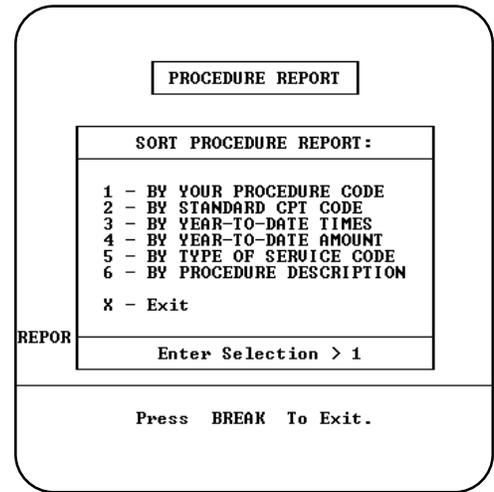
```
Price Level 1 - Pennsylvania Medical Assistance
Price Level 2 - Keystone Health Plan West
Price Level 3 - Blue Shield of PA Special 65
```

This list will vary depending on the procedure allowances you defined for your carriers and procedures.

The Sort Procedure Report Menu will then be displayed:

Select one of the sort options by highlighting your choice using the arrow keys and then pressing or press the number corresponding to your choice. To cancel the report press . After choosing one of the sort options the report will begin to select and sort.

See Appendix C for a sample printout.



```
PROCEDURE REPORT
-----
SORT PROCEDURE REPORT:
1 - BY YOUR PROCEDURE CODE
2 - BY STANDARD CPT CODE
3 - BY YEAR-TO-DATE TIMES
4 - BY YEAR-TO-DATE AMOUNT
5 - BY TYPE OF SERVICE CODE
6 - BY PROCEDURE DESCRIPTION
X - Exit
REPORT Enter Selection > 1
-----
Press BREAK To Exit.
```

Figure 11-22: Procedure Sort Selection

I - Duplicate Procedure Codes for New DR

- Purpose:** This option is used to duplicate all procedure codes currently on file for a new provider that has been added your practice. If you use different procedure codes for each provider, then this is a quick way to set-up the procedure file for a new provider.
- Sort:** No sort is necessary.
- Selection:** All procedure codes are selected.
- Paper:** No paper is required.
- Procedure:** At the Reports Main Menu press **[1]** for the "MOS Diagnosis/Procedure Menu" and then press **[1]** for the Duplicate Procedure Codes for New DR to run. Run it again for each provider that should be added. If you need to make exceptions to the duplicates then do that in the procedure maintenance option.

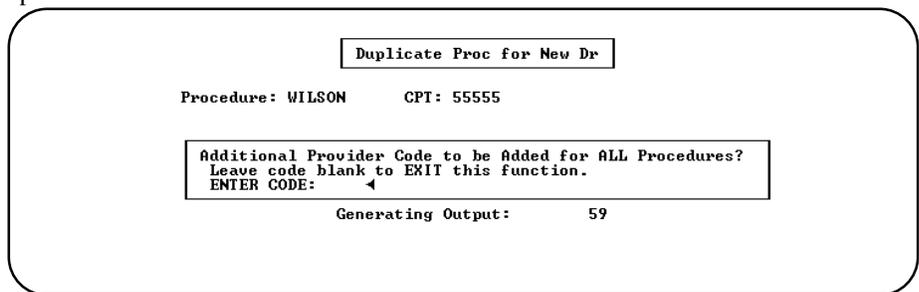


Figure 11-23: Duplicate Procedures for New Doctor

Diagnosis/Procedure Menu

J - Procedure Utilization Graphs

Purpose: This option will print a bar graph that is useful in comparing the utilization frequency of various codes YTD for a provider. The percent of the whole of each code is also displayed.

Sort: This will print all procedures by Provider, then break on the first 3 digits of the procedure code and then list all the codes in that group.

Selection: All default procedure codes are selected, or all procedures for a given provider may be selected. This report always reports YTD totals.

Paper: This report requires 8 ½ x 11" paper.

Procedure: At the Reports Main Menu press for the "MOS Diagnosis/Procedure Menu" and then press for the Procedure Utilization Graphs. Run it again for each provider that should be printed.

Change Printer Selection? (Y/N) >

Press to change the printer destination. Then a prompt to select the which group of procedures should be used to search. Highlight DEFAULT to select from the procedures that are not attached to any particular provider. Select a provider to only select procedures from the ones attached to their provider ID.

```
DEFAULT PROCEDURE CODES
1   - Vicki Henry
11  - Dennis Spanish
12  - John Candy
```

Highlight your choice and press . The default procedures have no provider code listed. Then you must list the procedures that should be selected and graphed.

```
ADD A PROCEDURE
START SEARCHING
```

Select "ADD A PROCEDURE" and enter a procedure code. Each code entered will be added to the list. Repeat that for as many codes as you wish to search. If you add one in error, highlight it and press . It will be deleted. When all the codes have been indicated, highlight "START SEARCHING" and the report will begin its search. Then the printer selection question will be displayed.

See Appendix C for a sample printout.

K - Update Standard Charges

Purpose: Provides an easy way to change the Standard Charge for procedures. You would run this report when a large number of procedures need to be corrected.

Sort: The report is sorted by procedure code.

Selection: The report selects the procedures for a given provider or all procedures on file.

Paper: Sent to Default Printer, 80 column report with no special printer codes. This will print on standard 8.5" by 11" paper.

Procedure: At the Reports Main Menu press **[1]** for the "MOS Diagnosis/Procedure Menu" and then press **[K]** for Update Standard Charges. Then answer the following selection questions:

```
Change Printer Selection? (Y/N) >
```

Press **[Y]** to change the printer destination. A slide box is displayed with a list of providers that can be selected. Highlight your selection and press **[ENTER]**. When updating all providers, the standard default charge is displayed first then it can be assigned to each provider listed for that charge. Then it will display the next procedure.

```
ALL PROVIDERS
1  -Uicki Henry
11 -Dennis Spanish
12 -John Candy
18 -Ima Badboy
8  -Wilson Pickit
```

We might suggest that you update the ALL PROVIDERS choice first, updating all providers. Then return and select only the providers with varied prices and update just their procedure records.

Highlight your choice and press **[ENTER]**.

```
Start with what CPT Code:
```

Enter the CPT code you wish to start updating the prices. Leave it blank to start at the beginning of the list.

```
Your Code - CPT CODE - Procedure Description
Current Charge: 55.00          New Charge: >

Enter NEW Standard Charge for CPT CODE or X to Exit
```

Press **[ENTER]** to leave the charge the same, type a new charge or press **[X]** to Exit the update. Make a note of the CPT code if you want to return later.

The codes are displayed in order by the YOUR CODE field. So you might want to print a Procedure Report from option G or H, mark the new prices and then use that as a reference when updating the prices.

Then the next procedure is displayed until all procedures have been completed, or press **X** then **ENTER** to cancel the rest of the report. Note: This report only changes the charge amount for Medicare.

See Appendix C for a sample printout.

Diagnosis/Procedure Menu

L - Procedures by Carrier

Purpose: This option will list procedures by carrier for one or all providers. The type of service can be selected and a date range. Also certain carriers can be excluded from the list.

Sort: By procedure code, carrier code the date of service. This will display subtotals for procedure codes and a line for each carrier.

Selection: All or one provider, type of service or by procedure code, between given dates. Certain carriers can be excluded. The selects from the transaction data and the data is only available until the data is purged in the end of month purge.

Paper: This report requires 8 ½ x 11" paper, using 16.7 pitch font, or print code 13

Procedure: At the Reports Main Menu press **1** for the "MOS Diagnosis/Procedure Menu" and then press **L** for the Procedures by Carrier. Run it again for each provider that should be printed.

Change Printer Selection? (Y/N) >

Press **Y** to change the printer destination. A slide box is displayed with a list of providers that can be selected. Highlight your selection and press **ENTER**. When you select ALL PROVIDERS, an option allows the default price to be applied to all Provider records. Select one provider to update only the prices listed for that provider. We might suggest that you update the ALL PROVIDERS choice first, updating all providers. Then return and select only the providers with varied prices and update just their procedure records.

```
ALL PROVIDERS
1  -Uicki Henry
11 -Dennis Spanish
12 -John Candy
18 -Ima Badboy
8  -Wilson Pickit
```

Highlight your choice and press **ENTER**.

ENTER TYPE OF SERVICE CODE:

Enter the Type of Service code. This may be left blank and then a procedure code may be selected or all procedure codes. Then a prompt for selecting a range of dates will be selected. Remember that data older than your end of month purge cycle may be incomplete. The start date will default to the oldest date possible. Enter the date or press **ENTER** to accept the default.

The TO date may then be supplied. Press **ENTER** to accept the default or enter the date to use.

Then a prompt will display your choices and give you a chance to change them before the report is selected. Press **N** or **ENTER** to run the report.

See Appendix C for a sample printout.

Patient Reports Menu

1 - Patient Address List

Purpose: Prints an patient list with a complete address and telephone numbers.

Sort: The default is by last name or the user can modify/change the sort field(s).

Selection: Using the extended selection screen the user defines the record selection criteria.

Paper: Sent to default printer, 80 column report with no special print control.

Procedure: At the Reports Main Menu press for the "Patient Reports Menu" then press for Patient Address List. A sort screen will be displayed, modify the sort as needed and then press . The next screen displayed will be the extended selection screen which is used to select the records to be printed. Press to select all, or supply the required selection criteria.

Change Printer Selection? (Y/N) >

Press to change the printer destination. Then a prompt to select the provider is displayed.

For more information about sorting and the extended selection screen see chapter 13.

See Appendix C for a sample printout.

3 or 4 - Patient Account Summary

Purpose: Prints an abbreviated aged Accounts Receivable and demographic report with a balance for insurance and patient. Totals for the group selected are also printed. The option 4 will print on wide paper - offering more information.

Sort: The default is by account number, or the user can modify/change the sort field(s).

Selection: Using the extended selection screen the user defines the record selection criteria.

Paper: Sent to default printer, 90 column report has special printer code 12 to set 12 pitch that should fit this report on 8.5" paper. If your printer is not capable of printing at this pitch, you will require 15" paper to print this report. Select option 4 for the wider report option.

Procedure: At the Reports Main Menu press **[2]** for the "Patient Reports Menu" then press **[3]** for Patient Account Summary. A sort screen will be displayed, modify the sort as needed and then press **[ESC]**. The next screen displayed will be the extended selection screen which is used to select the records to be printed. Enter your selection, then press **[ENTER]** to generate the report. For more information about sorting and the extended selection screen see chapter 13.



Change Printer Selection? (Y/N) >

Press **[Y]** to change the printer destination. Then a prompt to select the provider is displayed.

See Appendix C for a sample printout.

5 - Patients' Employer Listing

- Purpose:** Prints a list of the patients' employers.
- Sort:** The default is alphabetic by company name or the user can modify/change the sort field(s).
- Selection:** The report selects all the patients' employers.
- Paper:** Sent to default printer, 82 column report with no special printer codes. This report should fit on 8.5" paper with most printers.

Procedure: At the Reports Main Menu press **[2]** for the "Patient Reports Menu" then press **[5]** for Patients' Employer Listing. A sort screen will be displayed, modify the sort as needed and then press **[ESC]** to execute. For more information about sorting and selecting see chapter 12.

Change Printer Selection? (Y/N) >

Press **[Y]** to change the printer destination. Then a prompt to select the provider is displayed.

See Appendix C for a sample printout.

6 - Other Responsible Parties

- Purpose:** A list of responsible parties and their codes. (Note: This report does not contain patients.)
- Sort:** The default is numeric by account code or the user can modify/change the sort field(s).
- Selection:** The report selects all the responsible parties.
- Paper:** This report is sent to the default printer. It is an 80-column report with special printer code 11 to select 10 pitch.
- Procedure:** At the Reports Main Menu press **[2]** for the "Patient Reports Menu" then press **[6]** for Other Responsible Parties. A sort screen will be displayed, modify the sort as needed and then press **[ESC]** to execute. For more information about sorting see chapter 12.

```
Change Printer Selection? (Y/N) >
```

Press **[Y]** to change the printer destination. Then a prompt to select the provider is displayed.

See Appendix C for a sample printout.

Patient Reports Menu

8 - Recall Patient Report

Purpose: A list of patients marked for recall in a given month and year.

Sort: The report is sorted by patient last names then by first names.

Selection: The user enters the month and year to be selected.

Paper: Sent to the default printer. The report is 80 column report will fit on 8.5" paper.

Procedure: At the Reports Main Menu press **2** for the "Patient Reports Menu" then press **8** for Recall Patient Report.

```
Change Printer Selection? (Y/N) >
```

Press **Y** to change the printer destination. Then a prompt to select the provider is displayed.

The following prompt will be displayed:

```
Input RECALL DATE (MM/YYYY) >
```

If no patients are listed for recall in the month given the message "No Patients Set for Recall During: MM/YYYY" is displayed and the menu appears.

See Appendix C for a sample printout.

0 - Missed Recall Report

Purpose: Prints mailing labels for recall patients marked for a given month and year. Increments count of missed recalls. This will give you a reminder of the number of times a patient has been listed on this report for missing a notice of a recall. Use this as a followup list to insure that important recall notices have been brought to the attention of the patient and all prudent effort has been made to get the patient to respond.

Sort: The report is sorted by Number of Missed Recalls, and by patient account. The recalls with the most missed recall count will list first.

Selection: The user enters the month and year to be selected. All recalls in or before the month given that have at least one contact attempt marked will be selected.

Paper: Sent to default printer. Set for 40 column labels (4 inches wide) by 1 inch long with one across.

Procedure: At the Reports Main Menu press **[2]** for the "Patient Reports Menu" then press **[9]** for Recall Patient Labels.

```
Change Printer Selection? (Y/N) >
```

Press **[Y]** to change the printer destination. Then a prompt to select the provider is displayed.

The following prompt will be displayed:

```
Input RECALL DATE (MM/YYYY) >
```

Then you will be able to select how long since the last contact. A prompt appears:

```
Days since last Contact Attempt:
```

The default is 7 days. Any recall that is from a month prior to the month indicated and has not had a contact in the number of days indicated will be selected. This report will add one to the missed contact count if the last contact date is older than today.

See Appendix C for a sample printout.

Patient Reports Menu

Q - Pre-Coded Text - Medical Notes

- Purpose:** Prints Pre-Coded Text file to allow editing and reference information to be created.
- Sort:** The report is sorted by Pre-Coded text name.
- Selection:** The user selects Medical Note Text or Data Fields Available for Merging.
- Paper:** Sent to default printer. Set for 40 column labels (4 inches wide) by 1 inch long with one across.
- Procedure:** At the Reports Main Menu press **[2]** for the "Patient Reports Menu" then press **[Q]** for Pre-Coded Text - Medical Notes.

```
Change Printer Selection? (Y/N) >
```

Press **[Y]** to change the printer destination. Then a prompt to select the provider is displayed.

The following prompt will be displayed:

```
Medical Note Text
Data Fields Available
```

Highlight the type of data that should be printed.

Data fields are coded with different leading characters to identify the type of file that can make use of this data.

- * Patient Letters data fields to load data in position indicated.
- @ Letter Note for merging text
- { Medical Notes data fields to load data in position indicated.

Items with these characters are programmed to work correctly, do not try to add your own. Only items without these codes are modified or added by the user. A list can be printed from this report for reference.

See Appendix C for a sample printout.

9 - Inactive Patient List

Purpose: Prints a list of patients that have been marked as inactive, by provider. The report includes patient name, patient balance, insurance balance, and carrier codes.

Sort: The report is sorted by Default Provider ID, then by patient name.

Selection: The report selects all the patients that have a Date Last Seen date less than the given date.

Paper: Sent to default printer. This function prints an 80-column report on 8.5" paper with no special printer controls.

Procedure: At the Reports Main Menu press for the "Patient Reports Menu" then press for Patients by Referring M.D. Report.

Change Printer Selection? (Y/N) >

Press to change the printer destination.

Enter LAST SEEN Date (mm/dd/yy) (ENTER for Earliest)

Enter the cut off date and press . The report gives a total after each provider and a count of inactive patients. This might be useful to do some marketing to encourage patients to continue treatment.

Patient Reports Menu

B - Patients by Referring M.D.

- Purpose:** Prints a report by referring physician, listing patients referred and revenue generated.
- Sort:** The report is sorted by referring ID, then by patient name. A new page will start for each different referring physician ID.
- Selection:** The report selects all the patients that have a referring physician listed on their patient demographics screen. The user can select one referring physician code or all.
- Paper:** Sent to default printer. This function prints an 80-column report on 8.5" paper with no special printer controls.
- Procedure:** At the Reports Main Menu press **[2]** for the "Patient Reports Menu" then press **[B]** for Patients by Referring M.D. Report.

Change Printer Selection? (Y/N) >

Press **[Y]** to change the printer destination.

Then a prompt will allow one referring physician to be specified.

Referring Physician Code: (ENTER for ALL) >

Press **[ENTER]** to print all patients that have a referring physician code. To select all patients that have one particular code enter that code at this time.

See Appendix C for a sample printout.

C - Patient Birthday Report

- Purpose:** Prints a list of patients with a birthday in a specified month or a list of all patients.
- Sort:** The report is sorted the physician code then by the patients' month and day of birth.
- Selection:** The report selects all the patients with a given birth month, or all patients if no month is given.
- Paper:** Sent to default printer. This function prints an 80-column report with special printer code 11 to set 10 pitch.
- Procedure:** At the Reports Main Menu press for the "Patient Reports Menu" then press for Patient Birthday Report. The following prompt will be displayed:

```
Change Printer Selection? (Y/N) >
```

Press to change the printer destination. Then the prompt will appear to allow you to select a month.

```
Type month desired or  for ALL patients >
```

Enter 1 for January, 2 for February, etc. to pick a month.

See Appendix C for a sample printout.

Patient Reports Menu

D - Patient Demographics Form

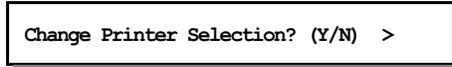
Purpose: Prints a patient demographic form the same as the one that can be printed from Daily Input.

Sort: The default is by account code or the user can modify/change the sort field(s).

Selection: Using the extended selection screen the user defines the record selection criteria. Press to select all patients.

Paper: Sent to default printer, 80 column / 66 line form with no special print control.

Procedure: At the Reports Main Menu press for the "Patient Reports Menu" then press for Patient Demographics Forms. A sort screen will be displayed, modify the sort as needed and then press . The next screen displayed will be the extended selection screen used to select the records to be printed. For more information about sorting and the extended selection screen, see Chapter 13.



Change Printer Selection? (Y/N) >

Press to change the printer destination.

See Appendix C for a sample printout.

E - Patient's by Employer Report

- Purpose:** Prints a list of patients sorted by the employer code.
- Sort:** The report is sorted by employer name and then by patient last name, first name.
- Selection:** The report can be printed for all employers or one employer can be selected.
- Paper:** Sent to default printer, 80 column / 66 line form with no special print control.
- Procedure:** At the Reports Main Menu press **[2]** for the "Patient Reports Menu" then press **[D]** for Patient Demographics Forms. A sort screen will be displayed, modify the sort as needed and then press **[ESC]**. The next screen displayed will be the extended selection screen used to select the records to be printed. For more information about sorting and the extended selection screen, see Chapter 13.

```
Change Printer Selection? (Y/N) >
```

Press **[Y]** to change the printer destination.

Then a prompt will display the employers similar to the following:

```
All Employers  
ABC Company  
Pittsburgh Plate Glass  
Westinghouse Beatice
```

Up to 200 employers could be listed. Highlight the selection you would like and press **[ENTER]**. Then your report will be generated.

See Appendix C for a sample printout.

Patient Reports Menu

F - Count of Patients by Carrier

Purpose: This will print a list of your patients by primary carrier. Each patient is listed, their sex, birth date and SS number. This can be used to reconcile with any HMO or managed care systems that might offer you as a PCP.

Sort: The report is sorted by doctor code, carrier code and then by patient last name & first name.

Selection: This selects all patients or only patients with the carrier code indicated.

Paper: Sent to default printer, 80 column / 66 line form with no special print control.

Procedure: At the Reports Main Menu press **[2]** for the "Patient Reports Menu" then press **[F]** for Count of Patients by Carrier.

Change Printer Selection? (Y/N) >

Press **[Y]** to change the printer destination. Then a prompt to select the carrier will appear.

Enter Carrier Code or (ENTER for ALL) >

Enter the carrier code that should be selected or press **[ENTER]** to print all carriers.

Only select Active Patients (Y/N) >

Press **[Y]** to select patients with a status of A - Active. All other status settings will be omitted from this report. Press **[N]** to include active, inactive, deceased, terminated and completed status patients.

See Appendix C for a sample printout.

G - NON MD Referral Source Report

Purpose: This will print a list of your patients that had a NON MD Referral Source. This data field can allow you to enter the method your patient used to locate your practice, such as referral service, phonebook, friend, etc. The report will help you analyze the best way to advertise your business to future customers by seeing how your patients found your practice.

Sort: The report is sorted by source code, then by patient last name & first name.

Selection: This selects all patients that have a non-blank NON-MD Referral Source field.

Paper: Sent to default printer, 80 column / 66 line form with no special print control.

Procedure: At the Reports Main Menu press **[2]** for the "Patient Reports Menu" then press **[G]** for NON MD Referral Source Report.

Change Printer Selection? (Y/N) >

Press **[Y]** to change the printer destination.

See Appendix C for a sample printout.

Patient Reports Menu

H - New Patient Graph

Purpose: This report will give a graphic representation of the new patients by provider for a given range of months. A date range allows this to be selected with a particular time period.

Sort: The report is sorted by doctor code, and month.

Selection: This selects all patients that have a "Patient Since" date between the dates given.

Paper: Sent to default printer, 80 column / 66 line form with no special print control.

Procedure: At the Reports Main Menu press **[2]** for the "Patient Reports Menu" then press **[H]** for New Patient Graphs.

Change Printer Selection? (Y/N) >

Press **[Y]** to change the printer destination. Then a prompt to select the provider will appear.

1 - Vicki G Henry M.D.
11 - Dennis Spanish M.D.
All DOCTORS

Highlight your selection and press **[ENTER]**.

ENTER FROM DATE (MM/DD/YY) (**[ENTER]** for Earliest) >

Enter the beginning date to begin the selection. Press **[ENTER]** to use a starting date 10 years before today's date. Then a prompt will request the closing date.

ENTER TO DATE (**[ENTER]** for Today's Date) >

Enter the closing date to be selected or press **[ENTER]** for today's date. Then a box indicating the selections given is displayed.

SELECTING NEW PATIENTS FROM 01/01/83 to 01/26/98
Correct **[D]**ates, **[C]**ontinue, **[X]**-Exit.

Press **[X]** to cancel the report. Press **[D]** to change the dates selected or press **[C]** or **[ENTER]** to continue.

See Appendix C for a sample printout.

Patient Reports Menu

I - New Patient List

Purpose: This report will provide a list of new patients that came to your practice in a given time period.

Sort: The report is sorted by doctor code, and by Patient Since Date.

Selection: This selects all patients that have a "Patient Since" date between the dates given.

Paper: Sent to default printer, 80 column / 66 line form with no special print control.

Procedure: At the Reports Main Menu press for the "Patient Reports Menu" then press for New Patient List.

```
Change Printer Selection? (Y/N) >
```

Press to change the printer destination. Then a prompt to select the provider will appear.

```
1 - Vicki G Henry M.D.  
11 - Dennis Spanish M.D.  
All DOCTORS
```

Highlight your selection and press .

```
ENTER FROM DATE (MM/DD/YY) ( for Earliest) >
```

Enter the beginning date to begin the selection. Press to use a starting date 10 years before today's date. Then a prompt will request the closing date.

```
ENTER TO DATE ( for Today's Date) >
```

Enter the closing date to be selected or press for today's date. Then a box indicating the selections given is displayed.

```
SELECTING NEW PATIENTS FROM 01/01/83 to 01/26/98  
Correct  ates,  ontinue,  -Exit.
```

Press to cancel the report. Press to change the dates selected or press or to continue.

See Appendix C for a sample printout.

Patient Reports Menu

J - Count of Patients By Zip

Purpose: This report will count the number of patients by 5 digit and 3 digit zip codes. The report can be useful in analyzing your advertising market or determining if bulk mailing is a viable option for your practice. This is only analyzing the zip codes for your patients. If your mailings are sent to responsible parties or insurance companies, this might not be the best list for bulk mailing. A zip report is also listed on the statement menu which will look at the disbursement of your statements by zip.

Sort: The report is sorted by zip code. A total count of patients by 5 digit and then 3 digit zip sorts are given.

Selection: This selects all patients.

Paper: Sent to default printer, 80 column / 66 line form with no special print control.

Procedure: At the Reports Main Menu press for the "Patient Reports Menu" then press for Count of Patients by Zip.

Press to change the printer destination.

See Appendix C for a sample printout.

Patient Reports Menu

K - Family List

Purpose: This report will list all patients grouped by "Statement bill to". The report prints the carrier and responsible party information for each family member.

Sort: The report is sorted by statement code, then by birth date. The parents will list first then any children will list oldest to youngest.

Selection: This selects all patients or one family group can be selected.

Paper: Sent to default printer, 80 column / 66 line form with no special print control.

Procedure: At the Reports Main Menu press **[2]** for the "Patient Reports Menu" then press **[K]** for Family List..

```
Change Printer Selection? (Y/N) >
```

Press **[Y]** to change the printer destination. Then a prompt to select the provider will appear.

```
Statement TO (Bill TO) Code  
Patient's Account  
Cancel Report
```

Highlight your selection and press **[ENTER]**.

Statement TO Code

This option will allow you to enter the code used in the "Send Statement TO" selection. A number or a "P" then a number would indicate a Patient Account. An "R" and a number would indicate a Responsible Party. Either can be entered to select the correct family. If you do not know the correct "Send Statement To" for the patient use the following option.

Patient's Account

Enter the patient account code to select all patients in the same family. The Send Statement for this patient is pulled and used to select the family. This will allow a quick way to simply reference the patient without referencing the code used as a family reference on the patient.

See Appendix C for a sample printout.

Patient Reports Menu

L - Patient Tests List

- Purpose:** This report will list all patient tests. .
- Sort:** The report is sorted by test name then patient account code.
- Selection:** This selects one patient or all, then all pending tests or all tests/completed tests, over a given time span.
- Paper:** Sent to default printer, 120 column / 66 line form with printer code at 13 for 16.7 pitch. This font size will allow the report to fit on 8 ½ x 11" paper.
- Procedure:** At the Reports Main Menu press **[2]** for the "Patient Reports Menu" then press **[K]** for Family List..

```
Change Printer Selection? (Y/N) >
```

Press **[Y]** to change the printer destination. Then a prompt to select the provider will appear.

```
Select ONE Patient: (Blank for ALL)
```

Enter the patient account number or press **[ENTER]** to select all patient's tests.

```
Pending Tests (First result is blank)
All Tests
Completed Tests (First Result is not blank)
Exit
```

This list of options is displayed, highlight your choice and press **[ENTER]** .

If All tests or Completed Tests, were selected a date range is requested.

Provider/Practice Reports Menu

1 - Provider's Listing

- Purpose:** The providers currently on file in the MOS are listed with their addresses and their ID codes.
- Sort:** The list is sorted providers' last name.
- Selection:** The report selects all the providers.
- Paper:** Sent to default printer. This function prints an 80-column report with special printer code 11 for 10 pitch print letters.
- Procedure:** At the Reports Main Menu press for the "MOS Provider Practice Reports Menu" then press for Provider's Listing Report.

Change Printer Selection? (Y/N) >

Press to change the printer destination.

See Appendix C for a sample printout.

Provider/Practice Reports Menu

2 - Practice Locations

- Purpose:*** A list of the service locations in the MOS.
- Sort:*** The list is alphabetic by the service name.
- Selection:*** The report selects all the locations on file.
- Paper:*** Sent to default printer. This function prints an 80-column report with special printer code 11 for 10 pitch print letters.
- Procedure:*** At the Reports Main Menu press for the "MOS Provider Practice Reports Menu" then press for the Practice Locations Report.

Press to change the printer destination.

See Appendix C for a sample printout.

Provider/Practice Reports Menu

3 - Referring Physician Report

- Purpose:** A list of referring physicians including name, address, telephone numbers and ID codes.
- Sort:** The report is sorted by referring physicians last name then by first name.
- Selection:** The report select all the referring physicians on file.
- Paper:** Sent to default printer. This function prints an 90-column report with special printer code 12 for printing to fit on 8 ½ “ paper.
- Procedure:** At the Reports Main Menu press for the "MOS Provider Practice Reports Menu" then press for the Referring Physician Report.

Change Printer Selection? (Y/N) >

Press to change the printer destination.

See Appendix C for a sample printout.

Provider/Practice Reports Menu

4 - Print a Schedule

- Purpose:** Prints a form with a day's schedule of appointments with an area to add notes.
- Sort:** The report is sorted by the physician's name and then by the time.
- Selection:** The default is by today's date or the user can enter any date and physician they desire to determine the records to be selected. (Only one day at a time.)
- Paper:** Sent to default printer for 80-column report to print on 8.5" paper. No special printer codes.
- Procedure:** At the Reports Main Menu press **[3]** for the "MOS Provider Practice Reports Menu" then press **[4]** for Print a Schedule.

Change Printer Selection? (Y/N) >

Press **[Y]** to change the printer destination. The following prompt will be displayed:

Enter Date or Press **[ENTER]** for 02/06/95 >

After entering the date a browse screen with all the physicians in the MOS will be displayed:

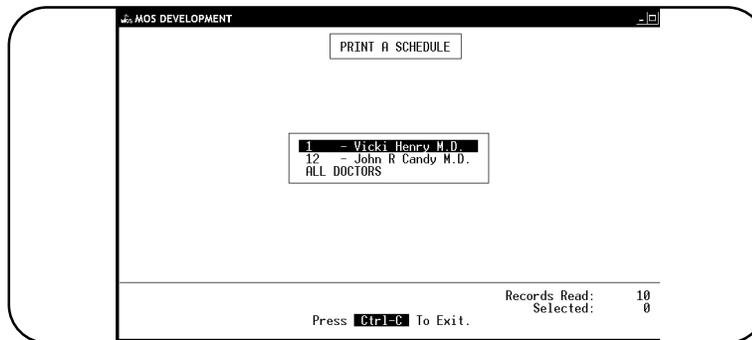


Figure 11-26: Select the provider

Highlight the desired physician using your arrow keys and then press **[ENTER]** to select. Highlight the "ALL DOCTORS" choice to print a schedule for all doctors.

See Appendix C for a sample printout.

Provider/Practice Reports Menu

5 - Print a Short Schedule

7-Print a VERY Short Schedule

Purpose: This report lists the day's appointments by doctor for a quick reference list. This will allow the doctor to have a one page daily list for his/her desk. This is similar to the browse displays available in the appointment scheduler with all the information included on one page.

Sort: This report is sorted by doctor, date of appointment and time of day.

Selection: Enter the date you wish to print. Then you can select one doctor or all doctors.

Paper: Sent to default printer. Report is 80-column and will print on 8.5" paper.

Procedure: At the Reports Main Menu press **[3]** for the "MOS Provider Practice Reports Menu" then press **[5]** for Print a Short Schedule or press **[7]** for a VERY Short Schedule. The Very Short Schedule has the extra blank lines removed for a shorter output.

```
Change Printer Selection? (Y/N) >
```

Press **[Y]** to change the printer destination. The following prompt will be displayed:

```
Enter Date or Press [ENTER] for 02/06/95 >
```

Today's date will be displayed as the default answer. After entering the date a browse screen with all the physicians in the MOS will be displayed:

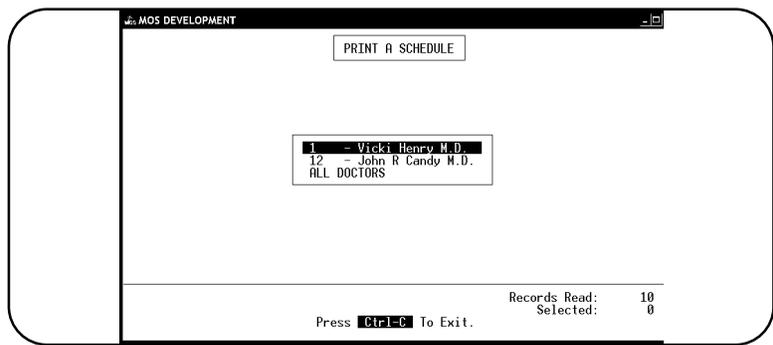


Figure 11-27:Short Schedule Selection

Highlight the desired physician using your arrow keys and then press **[ENTER]** to select. Highlight the "ALL DOCTORS" choice to print a schedule for all doctors.

See Appendix C for a sample printout.

Provider/Practice Reports Menu

6 - Pull List for Appointments

Purpose: This report lists the patients scheduled for appointments today alphabetically so the files can be easily pulled for the days appointments.

Sort: This report is sorted by alphabetically by patient last name.

Selection: Enter the date you wish to print. In addition, you can select one doctor or all doctors.

Paper: Sent to default printer. Report is 80-column and will print on 8.5" paper.

Procedure: At the Reports Main Menu press **[3]** for the "MOS Provider Practice Reports Menu" then press **[6]** for Pull List for Appointments.

```
Change Printer Selection? (Y/N) >
```

Press **[Y]** to change the printer destination. The following prompt will be displayed:

```
Enter Date or Press [ENTER] for 02/06/95 >
```

Today's date is always displayed as the default response. After entering the date a browse screen with all the physicians in the MOS will be displayed:

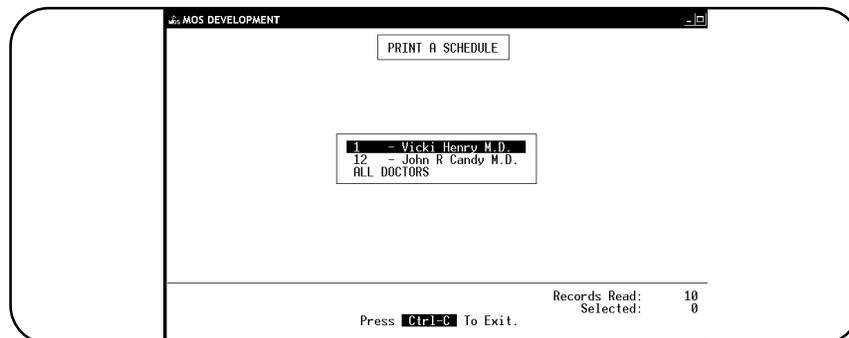


Figure 11-28: Pull List Provider Selection

Highlight the desired physician using your arrow keys and then press **[ENTER]** to select. Highlight the "ALL DOCTORS" choice to print a schedule for all doctors.

See Appendix C for a sample printout.

Provider/Practice Reports Menu

7 - Print Superbills in BATCH

Purpose: Prepare for the days appointments by printing super bills at the beginning of the day or the day before.

Sort: Super bills will be printed by appointment time.

Selection: All patients that have appointments scheduled on a given date are selected.

Paper: This report prints a form on 8 ½ x 11 inch paper.

Procedure: From the MOS Reports Menu press for the Provider/Practice Menu. Then select to print the super bills.

Change Printer Selection? (Y/N) >

Press to change the printer destination. A prompt will ask for the appointment date to select.

Appointment Date to Select: (MM/DD/YYYY) >

Enter a date or press for today's date. A prompt will give you a chance to change your mind then the report will print.

Selecting All Patients with Appointments for 01/28/1998
Continue? es o -Exit

Press or to print the superbills. Press to repeat the selection. Press to cancel the report entirely.

Provider/Practice Reports Menu

8 - Referring Dr. Mailing Labels

Purpose: Print Mailing Labels for the Referring Physicians currently on file. This can be used for Holiday greetings or other mass mailings.

Sort: The report is sorted by referring physician's last name.

Selection: All referring physicians will be selected.

Paper: The paper required is tractor-feed labels in 1" by 4.5" size. The labels should be one across.

Procedure: At the Reports Main Menu press for the "MOS Provider Practice Reports Menu" then press for the Referring Dr. Mailing Labels.

Change Printer Selection? (Y/N) >

Press to change the printer destination.

Vicki L Hilton
444 West South Street
Pittsburgh PA 15236

Vern C Shipper MD
1501 Louise Street
Pittsburgh PA 15222

Provider/Practice Reports Menu

9 - Print Custom Superbills in Batch

- Purpose:** Allow a local programmer to attach a special super bill to the system and print all the super bills required for a date at the same time. This option will do nothing unless a super bill called “mospat/superx” has been designed and added to the system. The MOS support staff can give a programmer more information if necessary.
- Sort:** The sort is part of the custom design.
- Selection:** The option will select all patients that have an appointment scheduled on a given date. The date is supplied by the user. If the date is omitted then today’s date is used.
- Paper:** The paper required is up to the custom programmer. Usually this would be a sheet of paper, however, a special form might be used.
- Procedure:** At the Reports Main Menu press **3** for the “MOS Provider Practice Reports Menu” then press **9** for the Custom Super Bills in Batch option.

Custom Routing Slip

This same custom superbill discussed above, can be printed one at a time from the Daily Input. The option “M - Custom Routing Slip” on the Forms Menu can be used to attach the custom superbill to Daily Input.

Provider/Practice Reports Menu

A - Daily Office Schedule

Purpose: Print a list of all appointments by time of day. All providers or one provider can be selected. This report will print a few blank lines at lunch time to allow an appointment to be pencilled in at the last minute.

Sort: The report is sorted by time of day. If more than one provider is selected, the report will list the appointments for each provider mixed by time.

Selection: The report selects all appointments for a given date. Then an option allows one or all providers to be selected.

Paper: Sent to default printer for 92 column report with special printer code 12 for 12 pitch printing. This should allow the report to print on 8.5" paper. If your printer is not capable of printing this small, you will require 15" paper to print this report.

Procedure: Press **A** from the "Provider /Practice Reports Menu".

```
Change Printer Selection? (Y/N) >
```

Press **Y** to change the printer destination.

```
Enter Date or Press ENTER for 01/28/98 >
```

Enter the date or press **ENTER** to select today's date. Then a slide box with a list of providers is displayed.

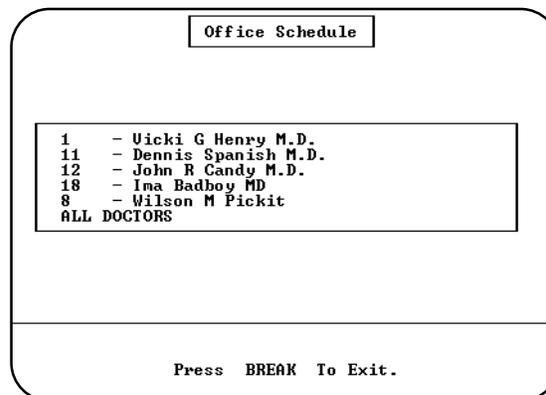


Figure 11-29: Daily Office Schedule Providers

Highlight your selection and press **ENTER**.

See Appendix C for a sample printout.

Provider/Practice Reports Menu

B - Print Refer TO by Doctor

Purpose: Print a list of patients that were referred to other doctors. All referring providers or one provider can be selected. This report will give you follow-up information on tests pending and results. This will also track average days to complete, number completed and number outstanding for each refer to doctor.

Sort: The report is sorted by refer to doctor code, then date procedure is referred. If more than one provider is selected, the report will allow you to select a page break between doctors. list the appointments for each provider mixed by time.

Selection: The report selects procedures referred to another doctor. The list can be printed for a date range, selection for pending, all or completed tests can be done. Then an option allows one or all providers to be selected.

Paper: Sent to default printer for 102 column report with special printer code 13 for 16.75 pitch printing. This should allow the report to print on 8.5" paper. If your printer is not capable of printing this small, you will require 15" paper to print this report.

Procedure: Press **B** from the "Provider /Practice Reports Menu".

Change Printer Selection? (Y/N) >

Press **Y** to change the printer destination.

Select ONE Refer To Dr Code: (Blank for ALL) >

Enter the Refer TO Doctor code to pick one doctor or leave this option blank to select all doctors. Then a slide box with a list of test choices is displayed.

Ordered Not Scheduled
Scheduled not Received
Received Hardcopy
All Tests
Exit

Highlight your selection and press **ENTER**. Then a prompt is displayed to select a starting date.

Starting Dates: (mm/dd/yy) Blank for Earliest

Enter the date and press **ENTER**. Then a prompt for the Closing Date is displayed.

Closing Date: (mm/dd/yy) Blank for Today's Date

Enter the date and press **ENTER**. Then a prompt will ask about page breaks:

One Page for Each Referral Dr? (Y / N) >

Press **Y** to print a new page for each referring doctor listed. Press **N** or **ENTER** for a list of all tests.

Provider/Practice Reports Menu

C - Practice Close Report

Purpose: Print a list of invoices created prior to a user supplied date. The money from these invoices is then split into columns showing the totals before the date given and after the date give. The balance due on these invoices is also given. This report can be useful when the practice changes organization structure and the dollars before and after a given time must be detailed.

Sort: The report is sorted by patient account and invoice number.

Selection: The report selects all invoices that were created before a given date. All transactions for those invoices are selected and summarized.

Paper: Sent to default printer for 132 column report with special printer code 13 for 16.75 pitch printing. This should allow the report to print on 8.5" paper. If your printer is not capable of printing this small, you will require 15" paper to print this report.

Procedure: Press **C** from the "Provider /Practice Reports Menu".

This report requires the Financial Password to print.

Change Printer Selection? (Y/N) >

Press **Y** to change the printer destination.

Enter Cut-Off Date: (MM/DD/YY) >

Enter the Cut-Off date of the first practice structure.

Provider/Practice Reports Menu

D - YTD Patients' by Referring DR

Purpose: Print a list of patients referred to your practice for the current YTD. This can be useful to find how many patients are referred to you and by whom.

Sort: The report is sorted by patient account and invoice number.

Selection: The report selects all patients that have a default referring provider and were seen in the current year. It is most useful during when running YTD in the current year. This report is using the default referring provider information and if that is changed during the year, the report will no longer be able to select the patient. Use this report with caution.

Paper: Sent to default printer. This report is 83 columns with no special printer codes. It should print on most printers on 8.5" paper.

Procedure: Press from the "Provider /Practice Reports Menu".

Change Printer Selection? (Y/N) >

Press to change the printer destination.

Enter year to report: (YYYY) > 2006

Enter Referring Provider Code to select just one: (Enter for ALL) >

Enter one code or leave blank for all.

This will count the number of referrals by month for each provider with a total for the year and the total charges.

Provider/Practice Reports Menu

E - Location Mailing Labels- 1up

F - Location Mailing Labels- 3up

Purpose: Prints multiple mailing labels for locations or facilities.

Sort: The labels are printed.

Selection: The user enters the month and year to be selected.

Paper: Sent to default printer. Set for 40 column labels (4 inches wide) by 1 inch long with one across.

Procedure: At the Reports Main Menu press **[5]** for the "Provider/Practice Reports Menu" then press **[ENTER]** or **[E]** or **[F]** for Location Labels.

```
Change Printer Selection? (Y/N) >
```

Press **[Y]** to change the printer destination. Then a prompt to select the provider is displayed.

The following prompt will be displayed:

```
How many copies of each label would you like?
```

It will then print that number of labels for each location you have in the Place of Service file. This can be very useful if you commonly mail reports to nursing homes, hospitals or other facilities where you practice.

See Appendix C for a sample printout.

Provider/Practice Reports Menu

G - Missed Appointment List

Purpose: Print a list of patients that had appointments for a range of dates for one or all providers. The logic will determine missed appointments by the existence of a claim for that date.

Sort: The report is sorted by provider and patient name.

Selection: The report selects all patients that had an appointment between two dates and then looks for a claim with that date of service as the first line item. If your practice commonly lists more than one date of service on each claim, this report might not notice the other dates.

Paper: Sent to default printer. This report is 83 columns with no special printer codes. It should print on most printers on 8.5" paper.

Procedure: Press **G** from the "Provider /Practice Reports Menu".

Change Printer Selection? (Y/N) >

Press **Y** to change the printer destination.

Beginning Schedule Date > 01/05/2006

Ending Schedule Date > 01/05/2006

Enter the date range for your report. Then select the provider from the list or select ALL Providers.

Provider/Practice Reports Menu

H - Count Patient/Claims by Provider

Purpose: Count Patients/Claims by Provider for a given time. This can be used for bonuses or other activities related to practice analysis. It will list each patient and indicate the number of claims created in the time frame selected. A total count of patients is indicated for each provider. A grand total of all claims and patients is also provided.

Sort: The report is sorted by provider and patient name.

Selection: The report selects by invoice date and billing provider on each claim. Be aware that if you are trying to count encounters, this might not be accurate if more than one encounter is entered on any one claim.

Paper: Sent to default printer. This report is 83 columns with no special printer codes. It should print on most printers on 8.5" paper.

Procedure: Press from the "Provider /Practice Reports Menu".

Press to change the printer destination.

Select one or all providers and press .

Then select the date range.

Enter the date range for your report.

Provider/Practice Reports Menu

I - Patients by Location

Purpose: Print a list of patients by location between given dates for one or all providers. This can be useful for nursing home visits and hospital rounds to make sure all patients are handled properly.

Sort: The report is sorted by provider and patient name.

Selection: The report selects all patients that had a claim generated between two dates for the location(s) requested. One or all providers can be selected also.

Paper: Sent to default printer. This report is 83 columns with no special printer codes. It should print on most printers on 8.5" paper.

Procedure: Press from the "Provider /Practice Reports Menu".

Change Printer Selection? (Y/N) >

Press to change the printer destination.

Enter Location Code: (BLANK for ALL) >

Select one or all providers from the list.

Enter From Date > 01/01/2006

Enter To date > 01/31/2006

Enter the date range for your report. Then select the provider from the list or select ALL Providers.

Insurance Carrier Reports Menu

1 - Health Insurance Carriers

Purpose: A list of insurance carriers.

Sort: The sort is alphabetic by carrier name. The user can modify the sort as the sort screen is displayed or press for the default sort.

Selection: The report selects all the insurance carriers on file or all carriers beginning with a given string can be selected for example, all carriers that were coded starting with "B" or "BC" could be selected.

Paper: Sent to default printer. This report is 83 columns with no special printer codes. It should print on most printers on 8.5" paper.

Procedure: At the Reports Main Menu press for the "Insurance Carrier Reports Menu" then press for Health Insurance Carriers.

Change the sort indicated or press to keep the sort by Company Name.

```
Change Printer Selection? (Y/N) >
```

Press to change the printer destination. Then a prompt will display as follows:

```
Select All Carriers Beginning with: (  for ALL) >
```

All carriers with ID's starting with the characters given will be selected.

See Appendix C for a sample printout.

Insurance Carrier Reports Menu

2 - Workers' Compensation Carriers

- Purpose:** A list of workers' compensation carriers.
- Sort:** The sort is alphabetic by carrier name. The user can modify the sort as the sort screen is displayed or press for the default sort.
- Selection:** The report selects all the workers' compensation carriers or only carriers with codes starting with the specified characters.
- Paper:** This report is 80-column and will print on 8.5" paper.
- Procedure:** At the Reports Main Menu press for the "Insurance Carrier Reports Menu" then press for Workers' Compensation Carriers.

```
Change Printer Selection? (Y/N) >
```

Press to change the printer destination. Then a prompt will display as follows:

```
Select All Carriers Beginning with: (  for ALL) >
```

All carriers coded starting with the letters given will be selected. If you would like only carriers beginning with the letters WC then type that and press .

See Appendix C for a sample printout.

Insurance Carrier Reports Menu

3 - Employer Claim Count

Purpose: A count of claims by employer over a given period of time. Lists the number of patients, claims and total charges by employer. If invoices have been purged during this time period, this report is not longer accurate. This report will be useful for worker's compensation and employer funded health care providers.

Sort: The sort is alphabetic by employer's name.

Selection: The report selects all invoices with a date between the given service dates.

Paper: This report is 80-column and will print on 8.5" paper.

Procedure: At the Reports Main Menu press for the "Insurance Carrier Reports Menu" then press for Employer Claim Count.

```
Change Printer Selection? (Y/N) >
```

Press to change the printer destination.

The following prompt appears:

```
From Service Date: (MM/DD/YY) ( for 01/28/93) >
```

Supply the start selection date. If you press a date will be selected 5 years earlier than today's date. Then enter the closing date .

```
End Service Date: (MM/DD/YY) ( for 01/28/98) >
```

Enter the closing date or press or for today's date. A window is displayed indicating the selection made.

```
Report selection between: 01/01/95 - 09/01/95  
Only valid if claims have not been purged in this time frame.  
REDO Responses?  es  o  -Exit
```

Press or if the selection is correct and the report will be generated. Press to cancel the report. Or press to reenter the selection responses.

See Appendix C for a sample printout.

Insurance Carrier Reports Menu

4 - Performance by Carrier

Purpose: This report will list the responsible parties (Insurance companies, patients and workman compensation carriers), with a total charge, payment, variance and Percent of Payment for a given time.

Sort: The report is sorted by Carrier Code.

Selection: A given year, quarter, or user selected consecutive months in a given year. Only data that has been recapped will be included in this report.

Paper: This report requires 8 ½ " by 11" paper. The report prints to the default printer.

Procedure: Press **[4]** for the Insurance Carrier Reports Menu. Then press **[4]** for the Performance by Carrier Report.

```
Change Printer Selection? (Y/N) >
```

Press **[Y]** to change the printer destination.

A drop list appears with a choice of quarters, a year or other. Select a quarter or year and you will be prompted next for the YEAR.

```
ENTER YEAR TO SELECT (ENTER for 1998) >
```

Press **[ENTER]** for the current year or type the year and the report will run. If you select "OTHER", you will be prompted for a starting month number and an ending month number. This report will only select within one year.

```

REQUEST OUTPUT

Select Month's from list below

Jan - Mar
Apr - Jun
Jul - Sep
Oct - Dec
Jan - Dec
Other
EXIT

Press BREAK To Exit.
```

Data: The variance represents the charges minus the payments. The "% CHG" represents the payments / charges x 100. This would indicate the amount normally received from an insurance company compared to the amount that was charged. The higher the percent the better the payments you are receiving from this carrier.

```

Your Practice Name
Medical Office System      Run: Sep 4, 1996
Performance by Carrier     Page: 1
Jan - Dec 1996            FOR RSP PARTY ALL
```

Carrier	Carrier Name	Charges	Payments	Variance	% CHG
BS	Blue Shield Of Pa	.00	.00	.00	
MC	Medicare	200.00	48.01	151.99	24.0
MD	Pennsylvania Medical Assist	10.00	.00	10.00	.0
PT	PATIENT	50.00	46.60	3.40	93.2
Total for Practice:		260.00	94.61	165.39	36.4

Insurance Carrier Reports Menu

5 - Electronic Insurance Data

Purpose: This report can be used to verify the codes and numbers that must be entered on the Insurance Carrier records when submitting claims electronically. This report will identify carriers that have been assigned the same name. It will also list the numbers needed to file electronically. The numbers required vary from state to state so you will need to get a list from your electronic service provider to update your data properly.

Sort: This report will print your insurance carriers alphabetically by company name. This sort can be changed at the time the report is generated.

Selection: All carriers are selected or all carriers starting with a given string can be selected.

Paper: This report will print on 8 1/2" x 11" tractor feed paper. It uses 12 pitch to fit 96 characters.

Procedure: At the Reports Main Menu press **[4]** for the "MOS Insurance Carrier Reports Menu" then press **[5]** for the Electronic Insurance Data Report.

The sort screen will be displayed:

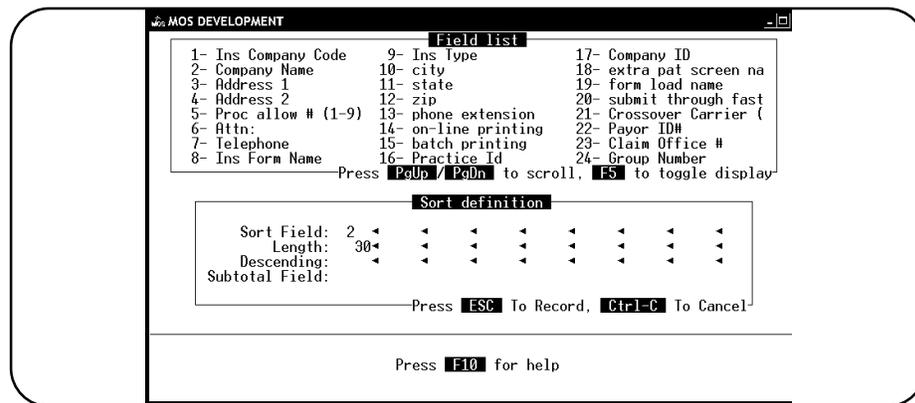


Figure 11-32:Sort Options for Electronic Insurance Data List

The sort is currently designed to print alphabetically. If that is acceptable, then press **[ESC]** and the report will continue. Change the sort if the list from the insurance company is sorted in some other way and it would be easier to match and check the list. Any fields displayed on the list at the top of the screen can be used for the sort.

Change Printer Selection? (Y/N) >

Press **[Y]** to change the printer destination. Then a prompt to allow the list to be narrowed by selecting only carriers with ID's that start with the same characters.

Select All Carriers Beginning with: (**[ENTER]** for ALL) >

This report will print a warning, when the sort is alphabetical and there are two companies with exactly the same name. Use this information to rename the companies, to insure that no two carriers have identical names for the electronic submission portion of the software.

Note: The insurance company match with the electronic insurance file has been improved to eliminate the need to make the names unique, however, it is helpful to keep some uniqueness so the data entry people can distinguish the carriers properly.

Once the two records have been connected, they will always attach correctly.

Sample Electronic Submission Report

Your Practice Name						
Medical Office System						Run: Sep 4, 1996
+-----+						Page: 1
HEALTH INSURANCE CARRIERS						
ELECTRONIC SUBMISSION DATA						
+-----+						
Code	Company Name	Payor ID	Claim Office#	OCNA#	CO SOP	Group #

AARP	AARP					
	P.O. Box 13999					
Y	Philadelphia, PA	19187				

AETN	Aetna					

EAS	Benefit Administrative Systems					
	43 Orland Square Drive					
	Suite 303					
N	Orland Park IL	60462				

BS	Blue Shield Of Pa		12345			Y
	Po Box 890058					
Y	Camp Hill PA	17089-0058				

BS65	Blue Shield Of Pa-Special 65					Y
	456 Blue Street					

Insurance Carrier Reports Menu

6 - Check Track List

Purpose: Print a list of payments applied by check track entries. This report will show what was paid with each check and the list can be compared to the list of invoices paid by a given check.

Sort: The report is sorted by Carrier Code then by check number. A total amount applied and un-applied is calculated.

Selection: The report selects all payments attached to a given check number, all payments entered on a given date or all payments.

Paper: This is an 80 column report and will print on 8.5" paper.

Procedure: Press **[6]** from the "Insurance Carrier Reports Menu".

Change Printer Selection? (Y/N) >

Press **[Y]** to change the printer destination.

Check # to Print or **[ENTER]** to enter a Check Date >

Enter the check number to be listed or press **[ENTER]** to select by check date instead.

Check Date: (MM/DD/YY) (**[ENTER]** to Select ALL) >

Enter the check date that was indicated for the check or press **[ENTER]** to select all checks on file. This file is cleared based on information in the Practice Setup and is purged with your End-Of Month Purge. So it is best to select this report based on the check number or check date to be sure you get just the information needed.

See Appendix C for a sample printout.

Insurance Carrier Reports Menu

7 - Code Cross-Reference List

- Purpose:** Print a list of all cross-reference codes entered.
- Sort:** The report is sorted by Carrier Code then by cross-reference type.
- Selection:** The report selects all cross-reference codes on file.
- Paper:** This is an 80 column report and will print on 8.5" paper.
- Procedure:** Press 7 from the "Insurance Carrier Reports Menu".

Change Printer Selection? (Y/N) >

Press Y to change the printer destination.

See Appendix C for a sample printout.

Insurance Carrier Reports Menu

8 - Submission Summary

Purpose: Print a summary of claims submitted during a given date range and how they were submitted This can be used to double check that claims have been submitted. A detailed version of this report is available on the Daily Reports Menu.

Sort: The report is sorted by Patient Account, Invoice Number, Date Submitted and How Submitted.

Selection: The report selects all claims submitted between user given dates.

Paper: This is an 80 column report and will print on 8.5" paper.

Procedure: Press from the "Insurance Carrier Reports Menu".

```
Change Printer Selection? (Y/N) >
```

Press to change the printer destination.

```
From Submission Date: (mm/dd/yyyy)
( for 01/05/2000)
```

Enter the starting date for the report. Press for today's date. Then another prompt requests the closing date.

```
End Submission Date: (mm/dd/yyyy)
( for 01/05/2000)
```

Enter the end submission date. Press for today's date.

Then you have one more chance to check your answers. This prompt allows you to repeat your answers if they are not correct.

```
Report selection between 01/05/2000 - 01/05/2000

Only valid if claims have not been purged during this time fram.e.
REDO Responses?  es  o  -Exit
```

Insurance Carrier Reports Menu

9 - Count Patients by Carrier

Purpose: Count patients for each carrier listed on their Insurance Screen, Primary, Secondary, Tertiary and Workers Comp. A patient is counted under each carrier listed on their insurance screen.

Sort: The report is sorted by Carrier Code.

Selection: The report selects all patients with the selected patient status. This will allow only active patients to be selected.

Paper: This is an 80 column report and will print on 8.5" paper.

Procedure: Press from the "Insurance Carrier Reports Menu".

Change Printer Selection? (Y/N) >

Press to change the printer destination.

Enter Patient Status Codes to Include:
Active, Inactive, Deceased, Terminated, Completed > AIDTC

No patient data is included on this report, just a list of carriers and a count for each carrier.

Insurance Carrier Reports Menu

A - Drug Definitions List

Purpose: A list of defined drugs.

Sort: The sort is alphabetic by drug name.

Selection: The report selects all items in the file.

Paper: Sent to default printer. This report is 83 columns with no special printer codes. It should print on most printers on 8.5" paper.

Procedure: At the Reports Main Menu press **[4]** for the "Insurance Carrier Reports Menu" then press **[A]** for Drug Definitions List.

Change Printer Selection? (Y/N) >

Press **[Y]** to change the printer destination.

Insurance Carrier Reports Menu

B - Diagnostic Lab Testing Providers

Purpose: A list of diagnostic lab testing providers.

Sort: The sort is alphabetic by provider name.

Selection: The report selects all items in the file.

Paper: Sent to default printer. This report is 83 columns with no special printer codes. It should print on most printers on 8.5" paper.

Procedure: At the Reports Main Menu press **[4]** for the "Insurance Carrier Reports Menu" then press **[B]** for Diagnostic Lab Testing Providers.

Change Printer Selection? (Y/N) >

Press **[Y]** to change the printer destination.

Insurance Carrier Reports Menu

C - Count Patients/Claim by Carrier

Purpose: A list of patients for a given carrier with number of claims submitted. This is helpful for HMO's and other payment plans that might want to see how many patients you treated in the plan and how much you billed the plan.

Sort: The sort is will page break by carrier code and then list each patient alphabetic by patient last name.

Selection: The report selects all claims for a given carrier and between two dates.

Paper: Sent to default printer. This report is 83 columns with no special printer codes. It should print on most printers on 8.5" paper.

Procedure: At the Reports Main Menu press for the "Insurance Carrier Reports Menu" then press for Count Patients/Claims by Carrier. Supply the normal security information for HIPAA.

```
Change Printer Selection? (Y/N) >
```

Press to change the printer destination. Then the following prompt is offered:

```
Enter Primary Carrier Code: (BLANK for ALL) >
```

Then you must supply the date range. The default will be for the current month. Supply the starting date and then the closing date.

A detailed explanation of the data printed is included in the report summary. This was intended to try to get an encounter count for the patients, but the data can only count claims accurately.

Insurance Carrier Reports Menu

D - Patient Carrier History

Purpose: A list of patients insurance policies, both active and terminated policies. This can tell what patients were listed for a give carrier at a give time.

Sort: The sort is alphabetic by insurance carrier.

Selection: The report selects all carriers or selected carrier. Then policies by active date, defaulting to all policies on file.

Paper: Sent to default printer. This report is 83 columns with no special printer codes. It should print on most printers on 8.5" paper.

Procedure: At the Reports Main Menu press **[4]** for the "Insurance Carrier Reports Menu" then press **[D]** for Patient Carrier History. Supply HIPAA security information.

Change Printer Selection? (Y/N) >

Press **[Y]** to change the printer destination.

Enter Carrier Code: (Blank for ALL) >

Then supply the date range which will default to the earliest possible to the latest possible. Change this as required.

1 - Daily Recap - Summary Report

Purpose: Prints the summary recap sheet without transaction detail and then allows you to run three optional recap reports. This report is run instead of the "Daily Recap", see chapter 8 for more information about the Daily Recap. This report posts the information just as the regular detailed recap would.

Note: *Review the Recap Error file carefully when using this version of the Daily Recap. That is the only way any errors found during the recap function will be reported with this report.*

Sort: The report is sorted by the order of the transactions as they were entered into the MOS.

Selection: The report selects all the transactions for the current day's activities.

Procedure: Press from the "MOS Financial Reports". If you assigned a RECAP PASSWORD, you will be asked to enter it at this time.

```
Change Printer Selection? (Y/N) >
```

Press to change the printer destination.

The recap will select and process all records that would be processed on any normal recap. This selection will only print the summary page at the end of the recap. If any message is displayed indicating errors were found in your data, it is important that the Recap Error file be reviewed and the errors corrected.

After completion of the report the MOS Daily Recap Menu will be displayed:

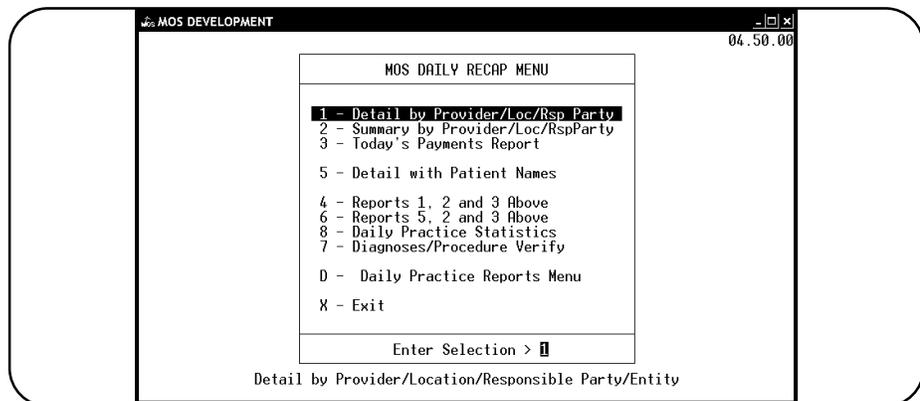


Figure 11-33: Daily Recap Menu

For more information about the DAILY RECAP MENU, see Chapter 8, "DAILY RECAP".

See Appendix C for a sample printout.

Financial Reports Menu

2 - Rerun Old Daily Recap

Purpose: To print a re-run of a daily recap for a specified date. The date entered must be a legitimate previous recap date. This report does not post any information and will only select information printed on a previous recap report from invoices still on file. Remember if this is older than your purge cut-off some invoices may already have been deleted.

Sort: The report is sorted by the account number, then invoice number, and then by date.

Selection: The report selects all the invoices still in the MOS that were printed on the recap date given.

Note: *If the recap date entered is older than your invoice purge date, information could be missing.*

Procedure: Press **[2]** from the "MOS Financial Reports Menu". If you assigned a RECAP PASSWORD, you will be asked to enter it at this time. The following prompt is displayed:

```
Change Printer Selection? (Y/N) >
```

Press **[Y]** to change the printer destination.

```
ENTER DATE OF RECAP TO BE RE-RUN >
```

It will be a recap containing all the information that was recapped on that date. It will be unable to distinguish between recaps run over a partial day. After completion of the report the MOS Recap/Transaction Review Menu will be displayed:

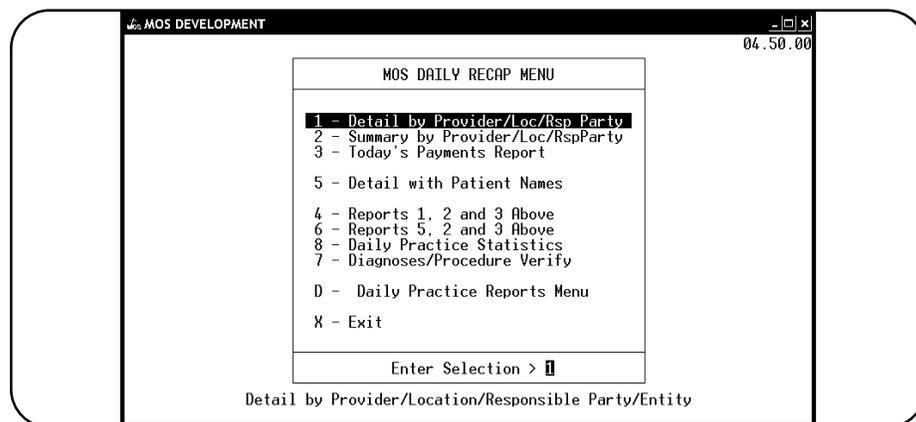


Figure 11-34: Daily Recap Menu

For more information about the MOS Daily Recap/Transaction Menu, see Chapter 8, "Daily Recap".

See Appendix C for a sample printout.

Financial Reports Menu

3 - Transaction Review

Purpose: Prints a detailed list of transactions. Be sure that all your Recaps have been printed to date. It is the same as the Daily Recap Report except that it will select an entire month's transactions. This can be helpful for accounting summaries that might be needed showing the month's transactions. (Note: For more information about Daily Recap Report see Chapter 8, "Daily Recap".)

Sort: The report is sorted by account number, then invoice number, and then by line number.

Selection: The report selects all the transactions printed on the recap reports for a given month.

Procedure: Press from the "Financial Reports Menu". Enter the FINANCIAL PASSWORD, if one has been assigned in the MOS.

```
Change Printer Selection? (Y/N) >
```

Press to change the printer destination. This report especially might be a good one to write to the Digital Storage option. A name is supplied for the report and it can be saved on the hard drive or copied to a CD ROM for storage.

Then the following questions will be displayed:

```
Select by Date Range or YEAR/MONTH
       ate Range  ear >
```

Select by YEAR/MONTH Press to select the month and year.

```
ENTER YEAR TO REVIEW OR press  for 95 >
```

```
ENTER MONTH TO REVIEW OR Press  for all >
```

Select by Date Range Press D to select the transactions by a range of dates. The following prompts will be displayed:

```
Start Date (MM/DD/YY) > 01/01/03
```

The default date supplied will be the beginning of the current year. Change it if you wish.

```
End Date (MM/DD/YY) 02/26/03
```

The closing date supplied will be today's date. Change it as you wish.

A prompt has been added to indicate the selection that was made so it can be verified before printing a long report.

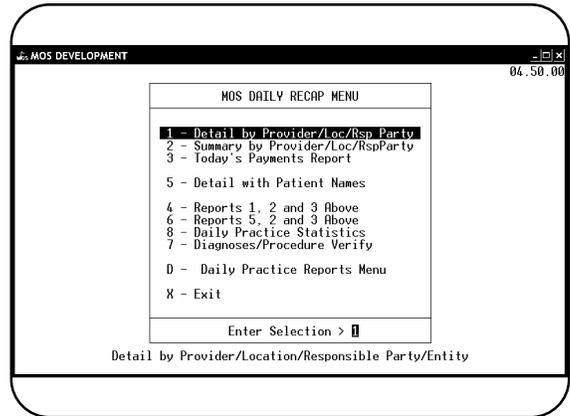
```
Selecting Based on Recap Year: 98
REDO Responses?  es  o  -Exit
```

Press **ENTER** or **N** to continue with the report. Press **X** to exit without selecting the data. Press **Y** to repeat the date selections.

When the report is completed the "MOS Recap/Transaction Review Menu" will be displayed:

These report options are the same as the Daily Recap Menu options except the transaction are for the entire month selected. Other reports can be printed also based on this selection once the transaction review has been processed. For more information about the report options see Chapter 8, "Daily Recap".

See Appendix C for a sample printout.



Financial Reports Menu

4 - W/C by Employer Report (Workers' Compensation)

Purpose: Prints a list of workers' compensation patients.

Sort: The report is sorted by the Employer ID., then by account number.

Selection: The report selects all the patients with employment related invoices. The workers' compensation carrier need not be responsible for payment.

Paper: Sent to default printer for 80-column report which will fit on 8.5" paper.

Procedure: Press from the "Financial Reports Menu".

Change Printer Selection? (Y/N) >

Press to change the printer destination.

See Appendix C for a sample printout.

Financial Reports Menu

5 - Invoices on HOLD

- Purpose:*** Print a list of all invoices on hold.
- Sort:*** The Report is sorted by account number and then by invoice number.
- Selection:*** The report selects all the invoices on hold, that includes invoices for patients on hold. This will also print any invoices that have been held for delay assignment for the location or carrier. This type of claim hold will be released at some point in time automatically.
- Paper:*** Sent to default printer for 80-column report which will fit on 8.5" paper.
- Procedure:*** Press from the "Financial Reports Menu". If you assigned a FINANCIAL PASSWORD, you will be asked to enter it at this time.

Change Printer Selection? (Y/N) >

Press to change the printer destination.

See Appendix C for a sample printout.

Financial Reports Menu

6 - Invoices in COLLECTIONS

- Purpose:** Print a list of all invoices in collection.
- Sort:** The report is sorted by the provider and then by the responsible party codes. There is a page break for each provider with subtotals for the responsible parties.
- Selection:** The report selects all the invoices in collection.
- Paper:** Sent to default printer for 100 column report with special printer code 13 for 16.7 pitch printing. This should allow the report to print on 8.5" paper. If your printer is not capable of printing this small, you will require 15" paper to print this report.
- Procedure:** Press from the "Financial Reports Menu". If you assigned a FINANCIAL PASSWORD, you will be asked to enter it at this time.

Change Printer Selection? (Y/N) >

Press to change the printer destination. A new prompt for a SINCE DATE:

SINCE DATE: (mm/dd/yy) (Blank for ALL) >

Leave this option blank if you want all invoices in collection to print. Enter a date if you want only the items put in collection since the date entered. The date will be included in the list. Use this option if you need to send a list of new claims to a collection agency once a month and only want to list claims that have been added to the collection list since that date.

A prompt has been added to allow additional information to be printed.

Add Information for Collection Agency? (Y/N) >

Press to include information such as SS#, Home and Work Phone. This will provide a more complete list if information for a collection agency to use to try to collect this information.

See Appendix C for a sample printout.

7 - Credit Balance Invoices

- Purpose:** Print a list of all invoices with a credit balance.
- Sort:** The report is sorted by the provider and then by the responsible party codes. There is a page break for each provider with subtotals for the responsible parties.
- Selection:** The report selects all the invoices with a credit balance.
- Paper:** Sent to default printer for 92 column report with special printer code 12 for 12 pitch printing. This should allow the report to print on 8.5" paper. If your printer is not capable of printing this small, you will require 15" paper to print this report.
- Procedure:** Press 7 from the "Financial Reports Menu". If you assigned a FINANCIAL PASSWORD, you will be asked to enter it at this time.

Change Printer Selection? (Y/N) >

Press Y to change the printer destination.

See Appendix C for a sample printout.

Financial Reports Menu

8 - A/R Report (Accounts Receivable)

- Purpose:** Prints a detailed list of information about money owed to you.
- Sort:** The report is sorted by the type of transaction (payment, write off, etc...) then by type of money (check, cash etc...).
- Selection:** The report selects the records from a series of questions and menu options. Please refer to the procedure section of this report.
- Paper:** Sent to default printer for 100 column report with special printer code 13 for 16.7 pitch printing. This should allow the report to print on 8.5" paper. If your printer is not capable of printing this small, you will require 15" paper to print this report.

Procedure: Press **[8]** from the "Financial Reports Menu". Enter the FINANCIAL PASSWORD, if one has been assigned.

Change Printer Selection? (Y/N) >

Press **[Y]** to change the printer destination. Then answer each question as it is displayed. Highlight the provider and press **[ENTER]** to select. Highlight "ALL PROVIDERS" and press **[ENTER]** to select all. Then indicate the other parameters required.

ALL PROVIDERS
1 - Vicki Henry
11 - Dennis Spanish
12 - John Candy

Report INVOICES ASSIGNED TO INSURANCE, PATIENT OR BOTH? >B

Default answer is Both. If the answer is B or P, continue to Report Due or Expected. If your response is Insurance, then a prompt requests the carrier ID.

ENTER INSURANCE COMPANY CODE (**[ENTER]** FOR ALL) >

Enter an insurance company code or press **[ENTER]** to get options to select by category.

The slide box displays the various types of carriers. Highlight "A-ALL TYPES" to select all carriers or slide to the correct one and press **[ENTER]**. Then continue to the subheading "Report Due or Expected".

A/R REPORT

A-ALL TYPES	6-CHAMPUS
1-MEDICARE	7-COMMERCIAL
2-MEDICAID	8-HMO
3-BLUE SHIELD	9-MEDIGAP
4-BLUE CROSS	W-WORKERS' COMP
5-NO FAULT	

REPORT RUNNING FOR: ALL PROVIDERS

CHOOSE AN INSURANCE COMPANY TYPE

Report Due or Expected

REPORT TOTAL DUE or TOTAL EXPECTED? >D

Default answer is Due. Then enter the minimum amount to report.

```
ENTER MINIMUM AMOUNT TO REPORT >
```

If your answer is greater than zero, the credit balance question is omitted.

If you leave this blank or type "0" this prompt is displayed:

```
Report Credit Balance Invoices? N
```

Default answer is "N" for omit credit balance invoices. Then you must indicate arrangement of report so the following list at the right appears.

The arrangement you select identify the page break information. If you arrange your report by provider the A/R will be printed with a page break between providers and totals for each provider.

Then select the sort you would like on the page using the sort menu. The report can be sorted by patient name, account ID, Invoice number, Invoice Balance or it can just print a summary without detail.



Figure 11-37:A/R Arrangement

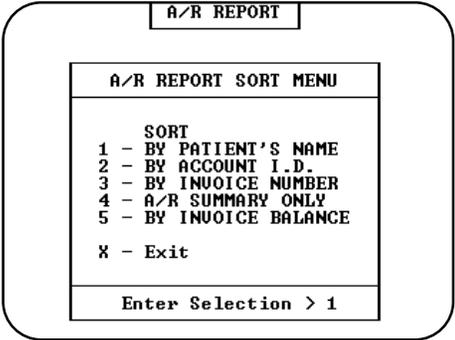


Figure 11-38:A/R Sort Menu

And finally indicate the selection for this A/R report. Your total A/R is printed when you select the ALL OPEN INVOICES choice. If you select "IN COLLECTION" or "ON HOLD" the report will generate with no further questions. Otherwise, a final question is offered for other report selections.

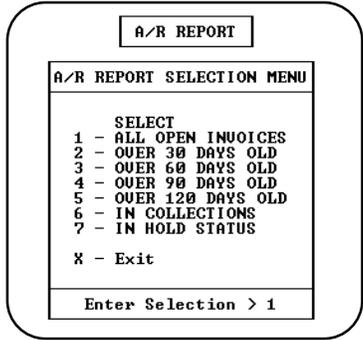


Figure 11-39:A/R Selections

```
Exclude Invoices on HOLD or in COLLECTION? (Y/N) > Y
```

See Appendix C for a sample printout.

Financial Reports Menu

I - A/R Report / By Invoice Date

AGING NOTES: This aging is calculated from the Last Date of service on the claim. This does not adjust for changes in Billing Party during the span of the claim. The normal A/R report(s) will age based on requests for payment from a particular billing party. Changing the Billing Party, also resets the age to current and increments from there each time payment is requested. Patient Aging requires at least 21 days to pass before the invoice will age. Insurance aging will calculate each time the claim is submitted. If you have set zero age to "Y" for a patient then when a payment is made the age is reset to current for that invoice.

Purpose: Prints a detailed list of information about money owed to you. This report will age based on the invoice date and is only to be used if a day to day aged receivable is necessary. The other financial reports will only age an invoice after at least 20 days have passed and it has been submitted again for payment to the carrier or patient. **THESE TWO METHODS PRODUCE VERY DIFFERENT RESULTS.** However, the total dollars in receivables should be the same.

Sort: The report is sorted by the type of transaction (payment, write off, etc...) then by type of money (check, cash etc...).

Selection: The report selects the records from a series of questions and menu options. Please refer to the procedure section of this report.

Paper: Sent to default printer for 100 column report with special printer code 13 for 16.7 pitch printing. This should allow the report to print on 8.5" paper. If your printer is not capable of printing this small, you will require 15" paper to print this report.

The selections are similar to the A/R report listed prior to this. This report will age to 150 days by actual date match against the invoice date.

Financial Reports Menu

H - Patient Balance List

Purpose: Print a list of patients with a patient balance. The report also lists outstanding insurance balances by responsible party.

Sort: The report is sorted by the patient last name.

Selection: The report selects all patients or only patients with an insurance balance or a patient balance.

Paper: Sent to default printer for 92 column report with special printer code 12 for 12 pitch printing. This should allow the report to print on 8.5" paper. If your printer is not capable of printing this small, you will require 15" paper to print this report.

Procedure: Press **[H]** from the "Financial Reports Menu". A FINANCIAL Password is required to print this report.

Change Printer Selection? (Y/N) >

Press **[Y]** to change the printer destination.

Select **[A]** ll, **[B]** alance Due, **[X]** - To Cancel Report >

Press **[A]** to print all patients. Press **[B]** to only select patients that have an insurance balance or patient balance. Credit balances are not considered balances. Aging is not considered.

See Appendix C for a sample printout.

Financial Reports Menu

J - Daily Recap - Select Posting Date

Purpose: Prints the complete recap report just as it would if run from 2 - Daily Recap on the Main menu and then allows you to run optional recap reports. This report is run instead of the "Daily Recap", see chapter 8 for more information about the Daily Recap.

Allows a RECAP DATE to be supplied by the user and will post all selected data based on that recap date. This option will only work if the Authorized Users are activated.

This report posts the information just as the regular detailed recap would.

Sort: The report is sorted by the order of the transactions as they were entered into the MOS.

Selection: The report selects all the transactions for the current day's activities.

Procedure: Press from the "MOS Financial Reports". If you assigned a RECAP PASSWORD, you will be asked to enter it at this time.

```
Change Printer Selection? (Y/N) >
```

Press to change the printer destination.

```
Enter RECAP POSTING DATE: ( ENTER for 09/26/2001) >
```

Press to use the displayed date or type any date up to 14 days before the date displayed. The recap will select and process all records that would be processed on any normal recap. This selection will only print the summary page at the end of the recap. If any message is displayed indicating errors were found in your data, it is important that the Recap Error file be reviewed and the errors corrected.

After completion of the report the MOS Daily Recap Menu will be displayed. For more information about the DAILY RECAP MENU, see Chapter 8, "DAILY RECAP".

See Appendix C for a sample printout.

K - Daily Recap - Sum-Select Date

Purpose: Prints the summary recap sheet without transaction detail and then allows you to run optional recap reports. This report is run instead of the "Daily Recap", see chapter 8 for more information about the Daily Recap.

Allows a RECAP DATE to be supplied by the user and will post all selected data based on that recap date. This option will only work if the Authorized Users are activated.

This report posts the information just as the regular detailed recap would.

Note: *Review the Recap Error file carefully when using this version of the Daily Recap. That is the only way any errors found during the recap function will be reported with this report.*

Sort: The report is sorted by the order of the transactions as they were entered into the MOS.

Selection: The report selects all the transactions for the current day's activities.

Procedure: Press K from the "MOS Financial Reports". If you assigned a RECAP PASSWORD, you will be asked to enter it at this time.

Change Printer Selection? (Y/N) >

Press Y to change the printer destination.

Enter RECAP POSTING DATE: (ENTER for 09/26/2001) >

Press ENTER to use the displayed date or type any date up to 14 days before the date displayed. The recap will select and process all records that would be processed on any normal recap. This selection will only print the summary page at the end of the recap. If any message is displayed indicating errors were found in your data, it is important that the Recap Error file be reviewed and the errors corrected.

After completion of the report the MOS Daily Recap Menu will be displayed. For more information about the DAILY RECAP MENU, see Chapter 8, "DAILY RECAP".

See Appendix C for a sample printout.

Financial Reports Menu

9 - A/R Report with Phone Numbers

Purpose: Prints a detailed list of information about money owed to you and your cash flow with phone numbers used for follow-up calls.

Sort: The report is sorted by the Provider ID, then account number and then by invoice number.

Selection: The report selects the records from a series of questions and menu options. Please refer to the procedure section of this report.

Paper: Sent to default printer for 145 column report with special printer code 13 for 16.7 pitch printing. This will only print on 15" paper.

Procedure: Press from the "Financial Reports Menu". If you assigned a FINANCIAL PASSWORD, you will have to enter it at this time. Then refer to the A/R Report for the selection and sort options.

Press to change the printer destination.

THIS REPORT USES THE SAME PROMPTS AS THE A/R REPORT DISCUSSED PREVIOUSLY.

See Appendix C for a sample printout.

Financial Reports Menu

A - Special Daily Summary

Purpose: Daily summary of practice activity such as number of appointments, missed appointments, new patients, and total summary of A/R activity for a given day. This report is also listed on the Daily Practice Reports Menu.

Sort: None.

Selection: The report selects one given day's activities.

Paper: This report prints on 8.5" by 11" paper with no special printer codes.

Procedure: Press from the "Financial Reports Menu". If you assigned a FINANCIAL PASSWORD, you will be asked to enter it at this time. Then the following question will be displayed:

```
Change Printer Selection? (Y/N) >
```

Press to change the printer destination.

```
Date of Service for Special Summary (MM/DD/YY) > 10/07/97
```

Enter the date in the format MM/DD/YY. A second chance prompt is displayed. Press or to create the report. Press to cancel the report.

```
Service Date Summary for: 01/28/98
```

```
Redo Date Selection?   
```

Press or to select the report. Press to redo the date selection. Press to exit the report and return to the menu.

See Appendix C for a sample printout.

B - Activity Overview Graph

Purpose: Activity overview graphs are important management tools. Use them to see who in your practice has brought in the most business, who has the largest number of outstanding bills, what location is most active, and so on. Graphs, which report all information for the year up to the most recent monthly recap, can be either printed or displayed on the screen. This chapter describes your options.

Sort: None

Selection: Varied. See following instructions.

Procedure:

1. Press **[B]** on the reports menu. If you assigned a FINANCIAL PASSWORD, you will have to enter it at this time. The next prompt is:

```
PRINT GRAPHS? > N
```

Type **[Y]** to print the graph, **[N]** to display it on the screen. The default is answer is "N" if the response is **[ENTER]**.

2. The next prompt is:

```
ENTER YEAR TO GRAPH > 1997
```

Type the 4 digit year to be analyzed. The default is the current year.

This prompt is displayed:

```
SCALE: Self or ALL > S
```

Do you want a graph that shows how well the practice is doing overall press **[A]**, or how well a particular entity is doing press **[S]**? The default is "S".

3. The next prompt asks if you want the graph to be organized by provider, location, or responsible party.

```
Provider, Location, Resp party, Entity, reStart, or eXit? >
```

Press **[P]** to sort the report by providers, press **[L]** to sort the report by location, press **[E]** to sort the report by Entity, or press **[R]** to sort the report by responsible party (billing party). You can also press **[S]** to restart the operation from "Print Graphs?" or **[X]** to exit.

4. Next, you're for the entity to be displayed. If you requested the report by provider you will be asked for an individual provider or all providers. Likewise with the locations or responsible parties graphs.

```
ENTER: LOCATION I.D. or [ENTER] FOR ALL LOCATIONS >
```

5. Next you're asked what should be charted.

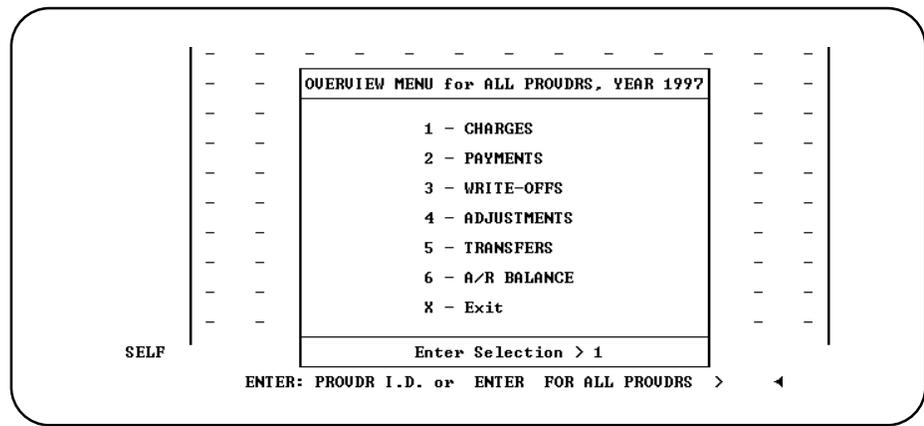


Figure 11-40: Overview Menu for YTD Graphs

The graph is either displayed or printed. Dollar amounts be displayed on the vertical axis, months on the horizontal. At the bottom, the program lists the graph's title, year, and totals to date. If you selected self only that entity is displayed, if you selected all then a stack of asterisks indicates how well the entity did against the whole. A percentage is shown at the top of the bar to show how well the entity did in a percentage.

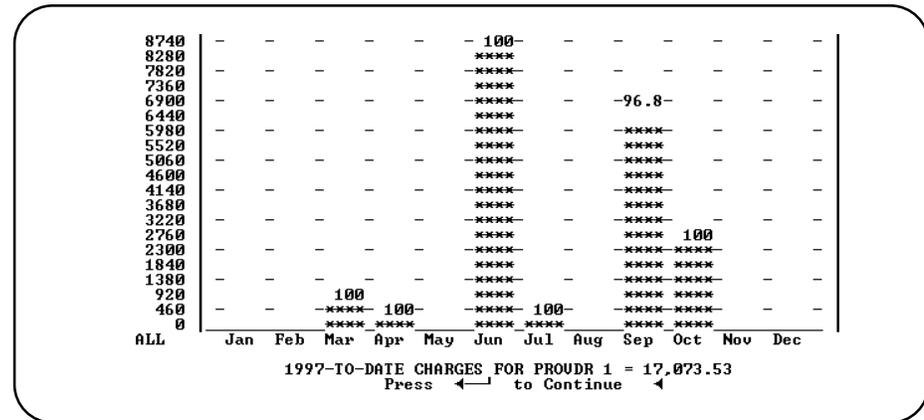


Figure 11-41: Payments for Provider 1 compared to ALL

If you displayed the graph, press to exit; you're returned to step 5.

- If you printed it, you're automatically returned to step 4, so you can then look at another graph or exit from the program.

See Appendix C for a sample printout.

Financial Reports Menu

C - Year-to-Date Summary

Purpose: Prints a report comparing charges, payments, write-offs, and transfers for a given year and the year prior with monthly totals.

Sort: The report is sorted by the month.

Selection: Financial transactions for a given year, then select by provider, location or Responsible carrier.

Paper: Sent to default printer for an 92-column report with special printer codes for 12 pitch and emphasized on and off for the totals line.

Procedure: Press **C** from the "Financial Reports Menu". If you assigned a FINANCIAL PASSWORD, you will be asked to enter it at this time. Then the following questions will be displayed:

Change Printer Selection? (Y/N) >

Press **Y** to change the printer destination.

ENTER YEAR TO SELECT >

Enter the year you wish selected. The prior year will also be listed. The current year is the default answer. Then you must select the organization of the report.

ALL BY PROVIDER
Provider
Location
Responsible Party
Entity

Highlight the selection. If you press **ENTER** all the providers' transactions will be selected and the report will start to select and sort the records and then print.

Depending on which choice you selected (P, L, R or E) one of the following questions will be displayed:

ENTER PROVIDER CODE (**ENTER**) for ALL >

Press **ENTER** to select all the providers or enter the provider you wish summarized.

Or
ENTER LOCATION CODE (**ENTER**) for ALL >

Press **ENTER** to select all the locations or enter the location you wish summarized.

Or
ENTER RESPONSIBLE PARTY CODE (**ENTER**) for ALL >

Press **ENTER** to select all the responsible parties or enter the responsible party that should be summarized. Remember that this indicates the carrier responsible for payment.

Or
ENTER ENTITY CODE (**ENTER**) for ALL >

Enter the correct Entity

Code or press **ENTER** to

select all entities and sort by Entity. After answering the last question the report will start to select and sort the and then print.

Financial Reports Menu

D - A/R Worksheet

Purpose: Prints a report sorted by responsible party with all the information needed to talk to an insurance agent or patient about an unpaid invoice with an area to add comments. A responsible party is the insurance carrier, workers compensation carrier, or Send Statements TO for PT responsible claims.

Sort: The report is sorted by the insurance company name and then by the patient's name.

Selection: Invoices open for certain number of days or invoices in collection or on hold. See the A/R Report Selection Menu in the Procedure section. This will select Insurance responsible or Patient responsible claims.

Paper: Sent to the default printer this report will print a 132 column report with a special printer code 13 for 16.7 pitch report. This will print this report on 8.5" paper. If your printer is not capable of printing this small you may need 15" paper to print this report.

Procedure: Press **[D]** from the "Financial Reports Menu". If you assigned a FINANCIAL PASSWORD, you will be asked to enter it at this time. Then the following questions will be displayed:

Change Printer Selection? (Y/N) >

Press **[Y]** to change the printer destination.

Highlight the provider and press **[ENTER]** to select. Highlight "ALL PROVIDERS" and press **[ENTER]** to select all. Then indicate the other parameters required.

```
ALL PROVIDERS
1 - Vicki Henry
11 - Dennis Spanish
12 - John Candy
```

Then select a single responsible billing party.

ENTER: RESPONSIBLE BILLING PARTY or Press **[ENTER]** for ALL >

Blank for all claims that are not PT responsible (Patient Responsible). Run the report and enter PT to get all the patient claims, sorted and totaled by the "Send Statements TO" party.

Then indicate if you would like to exclude any carriers, such as Medicare or Medicaid.

Exclude Any Carriers(s)? >

This only affects the case where the responsible party was not PT.

Press **[Y]** to enter carriers to be excluded. Press **[N]** if all carriers should be listed.

Carrier to be Excluded: (Leave BLANK to end)

Enter each carrier code to be excluded. They will appear at the bottom of the screen as they are listed.

Finally press **[ENTER]** to continue to the A/R Report Selection Menu will be displayed:

Press **[X]** to exit the report or the number that corresponds with your menu choice.

See Appendix C for a sample printout.

```
A/R REPORT SELECTION MENU

SELECT
1 - ALL OPEN INVOICES
2 - OVER 30 DAYS OLD
3 - OVER 60 DAYS OLD
4 - OVER 90 DAYS OLD
5 - OVER 120 DAYS OLD
6 - IN COLLECTIONS
7 - IN HOLD STATUS

X - Exit
```

Financial Reports Menu

E - Write-Off Overdue Invoice Report

Purpose: Prints a report of overdue invoice for a minimum billing age given for a given responsible party. You can include invoices on hold and in collection. The process also allows the user to write-off any invoice selected as the report is run, to help clean up old invoices. A prompt allows the report only function to be activated at any time. Use this option periodically to write-off old balances that you will be unable to collect on in the future. These invoices can then be purged to make room for new items. This will also keep your financial status more accurate. If the A/R balance includes a lot of invoices that are not collectable, it will give you a false idea of your net worth and actual cash flow potential.

Sort: The report is sorted by the responsible party and then by the invoice number.

Selection: Selects invoices that are overdue. You are asked if you would like to include invoices in collection or on hold.

Paper: Print to the default printer an 80-column report that will fit on 8.5" paper.

Procedure: Press **[E]** from the "Financial Reports Menu". If you assigned a FINANCIAL PASSWORD, you will be asked to enter it at this time. Then the following questions will be displayed

Change Printer Selection? (Y/N) >

Press **[Y]** to change the printer destination.

Enter Minimum BILLING AGE to Report
Current - 30 days
30 days - 59 days
60 days - 89 days
90 days or older

Highlight the age of the invoices that should be selected and press **[ENTER]**.

Enter RSP Code or Press **[ENTER]** for ALL >

Press **[ENTER]** to select all responsible parties. Remember that shows the carrier responsible.

Report Invoices being HELD > N

Press **[Y]** **[ENTER]** for yes or **[ENTER]** for no.

Report Invoices in COLLECTIONS? > N

Press **[Y]** **[ENTER]** for yes or **[ENTER]** for no.

The next display will summarize your selection criteria. Check that the selection is correct and press to continue.

OVERDUE INVOICE REPORT

Minimum Age to Report is: 1
 Reporting for RSP: *ALL
 NOT Reporting Invoices Being HELD
 NOT Reporting Invoices in COLLECTIONS

Press To Continue

Figure 11-43: Write-Off Overdue Invoices

The next screen shows the first invoice

OVERDUE INVOICE REPORT

Account	Name	From	Charges	Age	RSP	Balance
39	Marie Komputer	02/08/93	55.00	55	KEYS	55.00

WRITE-OFF? >

Y es-Write Off. N o Write-Off. R eport Only. E X it

Figure 11-44: Invoice Option for Write-Off function

that meets your criteria. Press to write-off the invoice and get the next. Press or to get the next invoice. Press to print all the invoices with no write-off or press to cancel the report. Each transaction is listed on the report that prints at the end of the function.

See Appendix C for a sample printout.

Financial Reports Menu

F - Payment Report

- Purpose:** Prints a report of money transactions between two given dates.
- Sort:** The report is sorted by the payment type (cash, check, write-offs etc . . .) and then by the patient's name.
- Selection:** Money transactions between two given recap or transaction dates. The adjustments can be excluded and the list will only include the money that was actually collected. If the adjustments are included, the resulting report will match the payment report printed after a recap.
- Paper:** Sent to default printer this report will print 80 columns with no special printer codes. This should fit nicely on 8.5" paper.

Procedure: Press **F** from the "Financial Reports Menu". If you assigned a FINANCIAL PASSWORD, you will be asked to enter it at this time.

Change Printer Selection? (Y/N) >

Press **Y** to change the printer destination. Then the following questions will be displayed:

Select: Recap Date or Transaction Date? R

Indicate if the date range should select by the **R**ecap date or the **T**ransaction date.

INCLUDE: Adjusted Payments ? (Y/N) > N

Indicate if the report should include adjusted payments and the adjustments. Press **Y** to include adjustments. The default is "N".

ENTER: FROM DATE OF PAYMENT REPORT (MM/DD/YY) >

A **FROM** date must be entered. Then answer the following prompt:

ENTER: TO DATE OF REPORT >

If no **TO DATE** is given the **FROM DATE** is used to select only one date. After answering the questions the report will be generated.

Then a subtotal option allow the report to be sorted and subtotaled by location. Press **Y** to add this sort to the report. The default answer is **N**.

Sort and Total by Location / Responsible Party / None (L/R/N) >

Responsible Party or Location will allow a report that will sort and subtotal for each Location or Responsible party (Party who paid the payment).

See Appendix C for a sample printout.

G - Print Daily Recap to Video

- Purpose:** Prints a Daily Recap to the Video display.
- Sort:** The report the same as it would on paper.
- Selection:** This will select all transactions since the last recap or all today's transactions if you have indicated this option on the practice setup.
- Paper:** No paper is used.
- Procedure:** Press **G** from the "Financial Reports Menu". If you assigned a RECAP PASSWORD, you will be asked to enter it at this time. Then the following questions will be displayed:

Financial Reports Menu

T - Summary Procedure Payment Report

Note: *Payments and write offs must be applied to each charge line to analysis your income in this manner.*

Purpose: Print an analysis of the charges, payments, write-offs and refunds made by procedure. This report will only give accurate data if the payments and write-offs are entered by line items. In other words, a payment and write-off must be applied to each charge individually.

Sort: This report is sorted by procedure code.

Selection: One or all providers can be selected. One or all Referring Providers can be selected. One or all procedures can be selected. Also only invoices paid in full or all invoices may be selected. A date range is required which will select charges and payments posted against them based on the date of service of the charge. When selecting all charges, remember that payments and write-offs may not yet have been received for those charges. The best date range might be one older than 60 days to have collected most payments. Since you may collect payments and do write-offs at any time, reports run for any particular time might change. This report is not an accounting report, it is intended to help determine if procedures are profitable.

Paper: Sent to default printer this report will print 115 columns with printer code for condensed print size so the report will print on 8.5" wide paper if your printer supports this size print, otherwise it will require 15 inch paper.

Procedure: Press **G** from the "Financial Reports Menu". If you assigned a FINANCIAL PASSWORD, you will be asked to enter it at this time. Then the following questions will be displayed:

Change Printer Selection? (Y/N) >

Press **Y** to change the printer destination.

Highlight the correct provider and press **ENTER**. This option selects based on the provider listed on the invoice.

```
ALL PROVIDERS
1 - Vicki Henry
11 - Dennis Spanish
12 - John Candy
```

Then the next prompt is displayed:

Enter Selected Procedure Code: (**ENTER** for ALL)

Enter one procedure code, if only one should be selected. If this is left blank, all procedures will be selected.

Select on Referring Provider: (**ENTER** for ALL)

Enter a code for the referring provider. This will limit the invoices selected to ones that have the referring provider that you have listed.

The next prompt will request the data range

Starting Date: (01/01/98) >

Supply the starting date or press **ENTER** to use beginning of the current year. This selects based on the date of service of the charge. Then a prompt for the ending date will be displayed.

Ending Date: (mm/dd/yy) **ENTER** for 01/28/98 >

Enter the ending date. Today's Date is the default ending date supplied.

ONLY Select INVOICES with a Zero Balance? (Y/N) >

Enter Y to omit invoices with outstanding balances. This will allow you to include invoices with partial payments, but will affect the ratio that will tell you if the procedure is profitable

The report will then select and print. Then a last chance box is displayed to recap what you selected.

ALL PROVIDERS All Procedures,
Procedures done between 01/01/98 and 01/28/98
Redo? Y N X -Exit

Verify the information and press or N to create the report. Press Y to repeat the selections. Press X to exit to the menu without printing.

See Appendix C for a sample printout.

Patient Correspondence Menu

1 - Patient Letters

Purpose: Prints user-defined patient letters such as recall, missed appointment, new patients, dunning, patient address for envelopes, pre- appointment, and thank you for your referral letters.

Sort: The report is sorted by patient account.

Selection: Lets you select pre-defined letters supplied with the Medical Office System or letters added by a user. The record selection criteria for each letter depends on how the letter was defined. See Chapter 12, "Support File Maintenance", on how to define a patient letter.

Procedure: At the Reports Main Menu press **[8]** for the "Patient Reports Menu" then press **[1]** for Patient Letters.

```
Change Printer Selection? (Y/N) >
```

Press **[Y]** to change the printer destination. Then a prompt to select the provider is displayed.

A list of defined letters will be displayed:

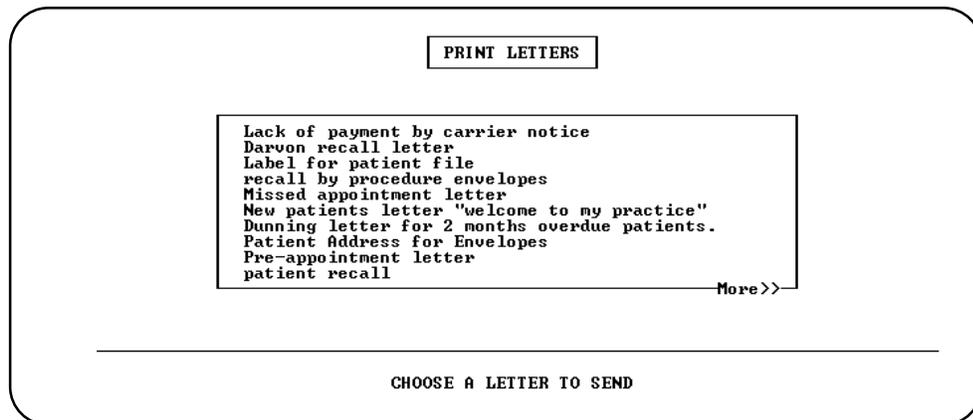


Figure 11-45: Patient Letter Selection

Highlight the desired letter using your arrow keys and then press **[ENTER]** to select. Depending on which letter was chosen, selection question(s) will be displayed.

For example:

- If choosing the Missed Appointment letter, the MOS will prompt you for the FROM and TO date.
- or
- If choosing the recall letter, the MOS will prompt you to enter data to find in the first line of the patient's notes.

The prompts depend on how the letter was defined. For more information see Chapter 12, section Letter Files.

Note: *It is important that the Title, First Name and Last Name be properly entered to print an appropriate letter format.*

See Appendix C for sample printouts.

Patient Correspondence Menu

3 - Recall Patient Letters

Purpose: Prints User defined letters using recall selections, such as missed recall or recall date.

Sort: The letters print by patient account number.

Selection: The patient's are selected based on the criteria selected for the letter to be printed. All letters are based on the recall month and missed appointment recalls can be included at the user's discretion. Letters with a selection of "Monthly Recall" are available to print from this option.

Paper: Standard paper as defined in the letter setup.

Procedure: At the Reports Main Menu press **8** for the "Patient Correspondence Menu" then press **3** for Recall Patient Letters.

```
Change Printer Selection? (Y/N) >
```

Press **Y** to change the printer destination. The following prompt will be displayed:

```
Input RECALL DATE (MM/YYYY) >
```

Then a prompt will ask which recalls to select.

```
First Contact Only
Missed Appointment Only
Both of the Above
```

Highlight your choice and press **ENTER**.

Then a slide list will appear with the letter formats available.

```
Missed Recall Letter
Print Letter to all Patients with Monthly Recall
```

(Your list may vary. These letters can be defined from MOS Support Menu, Letters File.)

Any letter defined with a Select By of "Monthly Recall" will be available from this option.

See Appendix C for a sample printout.

Patient Correspondence Menu

4 - Recall Letters by Procedure

Purpose: Letters can be sent to patients, for any given procedure, that have not been seen since a given date. This can be useful to remind patients of the need for an annual or biannual procedure, such as a mammogram, blood pressure check, PAP Smear, etc. Any letter with the letters "proc" defined in the letter file is listed for selection for this report.

Sort: The report is sorted by account number.

Selection: The user enters the procedure and the date last seen to decide which records should be selected.

Paper: Standard letter paper as defined in the letter setup.

Procedure: At the Reports Main Menu press **[8]** for the "Patient Correspondence Menu" then press **[4]** for Recall Letters by Procedure. The following prompts will be displayed:

```
Change Printer Selection? (Y/N) >
```

Press **[Y]** to change the printer destination.

```
ENTER PROCEDURE CODE TO SELECT PATIENTS BY >
```

```
RECALL PATIENT NOT SEEN SINCE (MM/DD/YY) >
```

After entering the questions a browse screen will be displayed with any letter containing the letters "proc" in their title:

```
Recall by Procedure
Recall by procedure envelope
```

Highlight the desired recall format using your arrow keys then press **[ENTER]** to select. For more information about defining letters see chapter 12, "MOS Support File Maintenance," the section on the Letters File. (Note: Only letters define as recall letters will be displayed.)

See Appendix C for a sample printout.

Patient Correspondence Menu

6 - HIPPA Label for Files - 1up

7 - HIPPA Label for Files - 3up

Purpose: Prints a selected list of patient file labels containing no PHI data. Only the patient account number is included. Select 1 up if there is only one label across. Select 3up if there are 3 labels across

Sort: Default is by account number, or the user can modify/change the sort field(s).

Selection: Using the extended selection screen the user defines the record selection criteria.

Paper: Sent to default printer, 40 column (4" wide) by 6 lines long (1 inch long) labels. The labels are set use special printer code 11 to insure 10 pitch print. An alignment check is included to help you line up the labels. If you are spooling the labels, answer "N" a few times then answer "Y" and wait for the labels to start printing. You will have a few labels at the beginning to quickly adjust the paper before you get to the first actual label.

Procedure: At the Reports Main Menu press **[8]** for the "Patient Correspondence Menu" then press **[6]** or **[7]** for HIPPA File Labels. A sort screen will be displayed, modify the sort as needed and then press **[ESC]**. The next screen displayed will be the extended selection screen which is used to select the records to be printed. Press **[ENTER]** to select all, or supply the required selection criteria.

```
Change Printer Selection? (Y/N) >
```

Press **[Y]** to change the printer destination. Then a prompt to select the provider is displayed.

An alignment question will appear to ask if the label is aligned properly. An alignment form will give you a chance to adjust the paper, a form with X's instead of data is printed for each time the alignment question is answered No. One test form is always printed.

Spooled Printing

On a system with spooled printers, this alignment prompt appears before anything has printed. It can still be useful. Each answer of No will generate one more form as a test to be used to align the paper. If you press **[N]** then additional pages will be inserted to allow time to adjust the paper alignment. No more than 1 page should be necessary, once you become familiar with your printer and how to load the paper or forms properly.

For more information about sorting and the extended selection screen see chapter 13.

See Appendix C for a sample printout.

Patient Correspondence Menu

A - Patient Mailing Labels - 1up

B - Patient Mailing Labels - 3up

Purpose: Prints a selected list of patient mailing labels. Select 1 up if there is only one label across. Select 3up if there are 3 labels across

Sort: Default is by zip code then name, or the user can modify/change the sort field(s).

Selection: Using the extended selection screen the user defines the record selection criteria.

Paper: Sent to default printer, 40 column (4" wide) by 6 lines long (1 inch long) labels. The labels are set use special printer code 11 to insure 10 pitch print. An alignment check is included to help you line up the labels. If you are spooling the labels, answer "N" a few times then answer "Y" and wait for the labels to start printing. You will have a few labels at the beginning to quickly adjust the paper before you get to the first actual label.

Procedure: At the Reports Main Menu press **[8]** for the "Patient Correspondence Menu" then press **[A]** or **[B]** for Patient Mailing Labels. A sort screen will be displayed, modify the sort as needed and then press **[ESC]**. The next screen displayed will be the extended selection screen which is used to select the records to be printed. Press **[ENTER]** to select all, or supply the required selection criteria.

```
Change Printer Selection? (Y/N) >
```

Press **[Y]** to change the printer destination. Then a prompt to select the provider is displayed.

An alignment question will appear to ask if the label is aligned properly. An alignment form will give you a chance to adjust the paper, a form with X's instead of data is printed for each time the alignment question is answered No. One test form is always printed.

Spooled Printing On a system with spooled printers, this alignment prompt appears before anything has printed. It can still be useful. Each answer of No will generate one more form as a test to be used to align the paper. If you press **[N]** then additional pages will be inserted to allow time to adjust the paper alignment. No more than 1 page should be necessary, once you become familiar with your printer and how to load the paper or forms properly.

For more information about sorting and the extended selection screen see chapter 13.

See Appendix C for a sample printout.

Patient Correspondence Menu

C - Recall Patient Labels - 1up

D - Recall Patient Labels - 3up

Purpose: Prints mailing labels for recall patients marked for a given month and year.

Sort: The report is sorted by patient last names then by first names.

Selection: The user enters the month and year to be selected.

Paper: Sent to default printer. Set for 40 column labels (4 inches wide) by 1 inch long with one across.

Procedure: At the Reports Main Menu press **[8]** for the "Patient Correspondence Menu" then press **[C]** or **[D]** for Recall Patient Labels.

```
Change Printer Selection? (Y/N) >
```

Press **[Y]** to change the printer destination. Then a prompt to select the provider is displayed.

The following prompt will be displayed:

```
Input RECALL DATE (MM/YYYY) >
```

See Appendix C for a sample printout.

1 - Patient Demographics

Purpose: Writes Patient Demographics to a file that can be imported to various other software.

Sort: The report is sorted by patient name.

Selection: Lets you select using the Extended Selection options. See Chapter 13 for more details on using this option.

Procedure: At the Reports Main Menu press **[9]** for the "Export Menu" then press **[1]** for Patient Demographics.

Enter the selection data or press **[ENTER]** for all patients.

Next supply the appropriate security information to access the report.

Change Printer Selection? (Y/N) >

Press **[Y]** to change the printer destination.

PfExportFolder - can be defined in the Configuration Editor to indicate where this file will be written. The name should include a final "/". If this is not assigned, then a default folder will be used. This folder is identified by the following variables: PFDATA{PFDIR{"/fpmerge/"

Export File to what filename: (.csv format is created)

Enter the filename. It is not necessary to include the .csv, it will be added automatically. The name should not include spaces or other characters that are not valid for filenames on the operating system in use.

Sample with Headings and one patient.

```
"Last Name","First Name Initial","Sex","Account Number","Provider Name","Social  
Number","Pat Address","Pat Addr2","Pat City","Pat State","Pat Zip","Patient Balance","Total  
Due","DOB","","Last Date of Service","Employer Address","Employer City","Employer  
Phone","Employer Name","Employer State","Employer Zip","","Resp Last Name, First  
Name","Resp Address","Resp Phone","Resp City","Resp State","","Resp Zip","Primary  
Carrier","Secondary Carrier","Tertiary Carrier"  
"Adells","Helena M","F","1","Vicki Henry M.D.,"555-38-5467","558 Senate  
Drive","","Pittsburgh","PA","15236","185.05","2983.42","10/04/1912","","03/26/2008","102 West  
Street","Pittsburgh","","Westinghouse Beatice","PA","15222","","Adells, Helena M","558 Senate  
Drive","4128359415","Pittsburgh","PA","","15236","Medicare","BLUE SHIELD Of  
Kentucky","Retired People Insurance"
```

See Appendix C for sample printouts.

8 - Collection Report / Export

- Purpose:** Send Collection information to a file so it can be sent to a collection agency.
- Sort:** By Account and invoice number. Sort is handled the same as used when printing batch claim forms.
- Selection:** All invoices in collection.
- Paper:** Standard paper as defined in the letter setup.
- Procedure:** At the Reports Main Menu press **[8]** for the "Patient Correspondence Menu" then press **[3]** for Recall Patient Letters.

```
Change Printer Selection? (Y/N) >
```

Press **[Y]** to change the printer destination. The following prompt will be displayed:

```
SINCE DATE: (MM/DD/YY) (Blank for ALL) >
```

Since information is sent to collection once a month, it would be the date since the file was last generated to collect all new items. Leave blank to select all collection items.

Then select the layout to be used for this export file. The data is listed using the same setup as the printed insurance claims. Any data that is available to print on an insurance claim can be included in an export for collection. (These are setup the same as Define Insurance Forms.)

```
EXPINV - (==) Export Invoice Data  
EXPORT - (==) export financial data to collection service.
```

Highlight your choice and press **[ENTER]**.

All the same selection options that are available when printing insurance forms in batch are displayed. If you have any questions, refer to Chapter 9.

PFExportFolder - can be defined in the Configuration Editor to indicate where this file will be written. The name should include a final "/".

If PFExportFolder is not blank, the file will be written in the specified folder. If it is not assigned a location, the file will be found in the folder called: PFDIR{PFDATA{"fpmerge/"

Examples:

```
PFExportFolder = /appl/reports/  
set PFExportFolder=C:\tmp\reports
```

A paper report is also generated to give a record of the data included in the file.

See Appendix C for a sample printout.

Export Menu

9 - Invoice Data

- Purpose:** Write Invoice Data to an export file. This can be helpful to put data in a spreadsheet.
- Sort:** Same as used by Batch printing Insurance Claims.
- Selection:** The invoice data can be selected using the Extended Selection option. The carrier may be specified or all invoices are selected.
- Paper:** Standard 8 ½" by 11" paper, with 12 pitch printing.
- Procedure:** At the Reports Main Menu press **[9]** for the "Export Menu" then press **[9]** for Export Invoice Data. The following prompts will be displayed:

First the extended selection screen, to allow a selection on any data offered in the invoice information. Then supply the security information.

```
Change Printer Selection? (Y/N) >
```

Press **[Y]** to change the printer destination.

Then select the layout to be used for this export file. The data is listed using the same setup as the printed insurance claims. Any data that is available to print on an insurance claim can be included in an export for collection. (These are setup the same as Define Insurance Forms.)

```
EXPINV - (==) Export Invoice Data
EXPORT - (==) export financial data to collection service.
```

Highlight your choice and press **[ENTER]** .

```
Enter INSURANCE COMPANY CODE or PRESS ENTER for ALL >
```

A paper list is generated so you will have a copy of what is selected.

Notes: