EXACT CLINICAL USERS GUIDE

England & Wales

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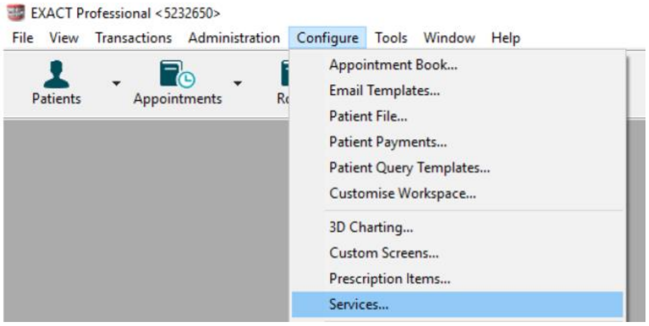
CONFIGURATION

Services

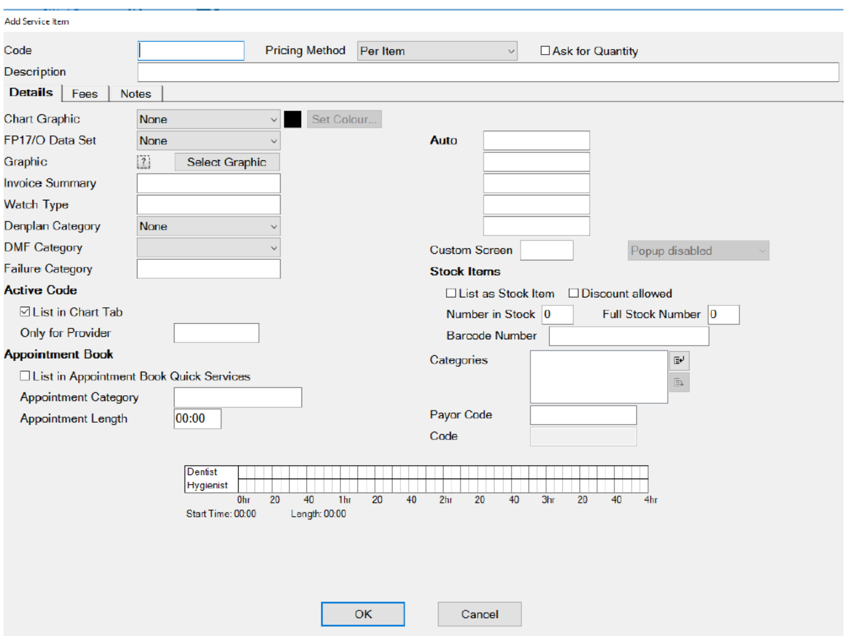
Please note for any of these changes you may need to be logged in as a SUPER user or an Administrator.

Adding Services

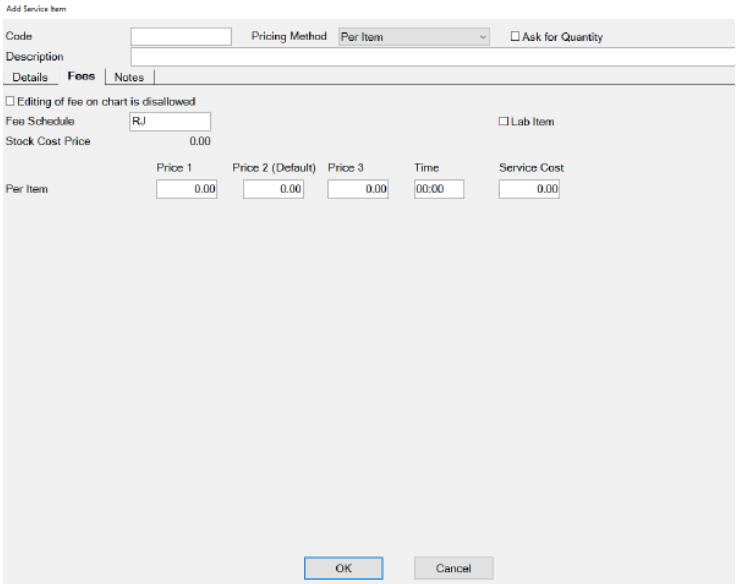
1. From the 'Configure' menu, select 'Services'.



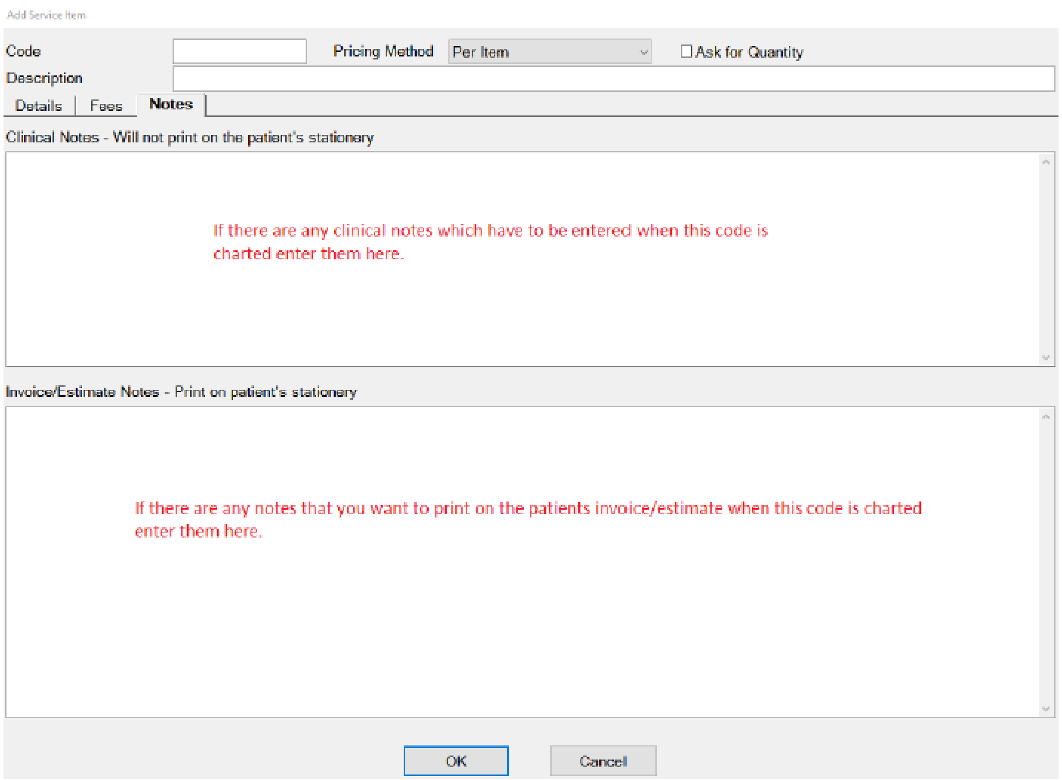
2. At the bottom right hand corner of the screen click on the +1
3. This will bring up the 'Add service item' screen. Enter a code for the new service *Please note you can only use a code if it is not already present in the system.*

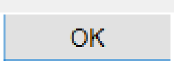


4. Enter a description and select the Pricing Method. If applicable, tick the 'Ask for Quantity' box.
5. Configure the Details Tab information as necessary, i.e. selecting the price code, graphic and colour for the service and add it to any required category. These options control what the service will look like and how it will function.
6. Next click on the 'Fees' tab and enter the pricing information as appropriate. *Enter the price in 'Price 2 (Default)' field as this is where the default fee schedule picks up the prices for charting.*



7. If required, click on the ‘Notes’ tab to enter ‘Clinical Notes’ or ‘Invoice/Estimate’ notes for this service.
Please note that this will show for all patients the service is charted for – you can still edit the invoice/estimate and clinical notes on the chart tab.



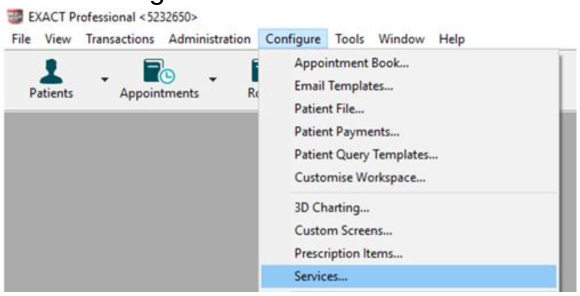
8. Press the  button to create the new service. This will return you to the ‘List Service Items’ screen.

You can also view a helpful video on adding services using the link below:

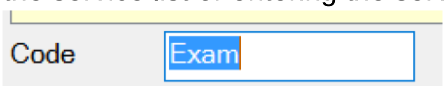
https://www.youtube.com/watch?v=C7zP0_6qPgI

Amending Service Fees

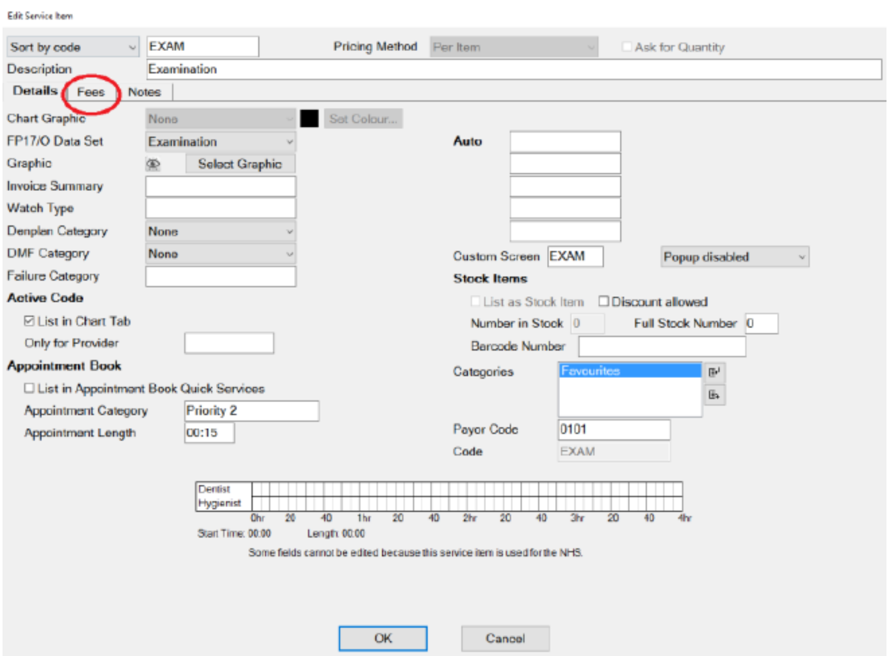
1. Go to Configure > Services



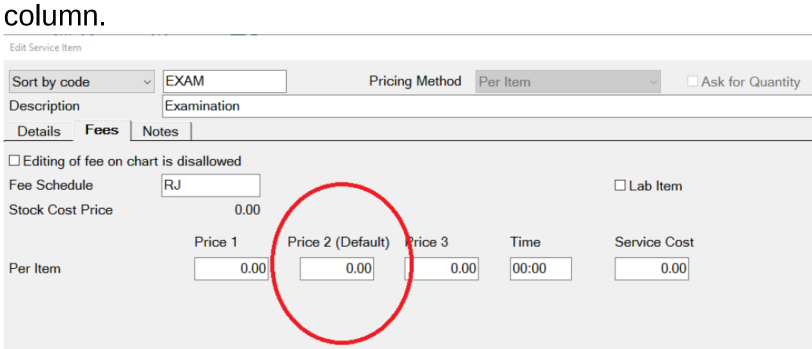
2. Locate the service you wish to change the fee of – you can do this by scrolling through the service list or entering the services code into the bottom left hand corner



3. Double click on the service and it will open the 'Edit Service Item' screen.
4. Click on the 'Fees' tab



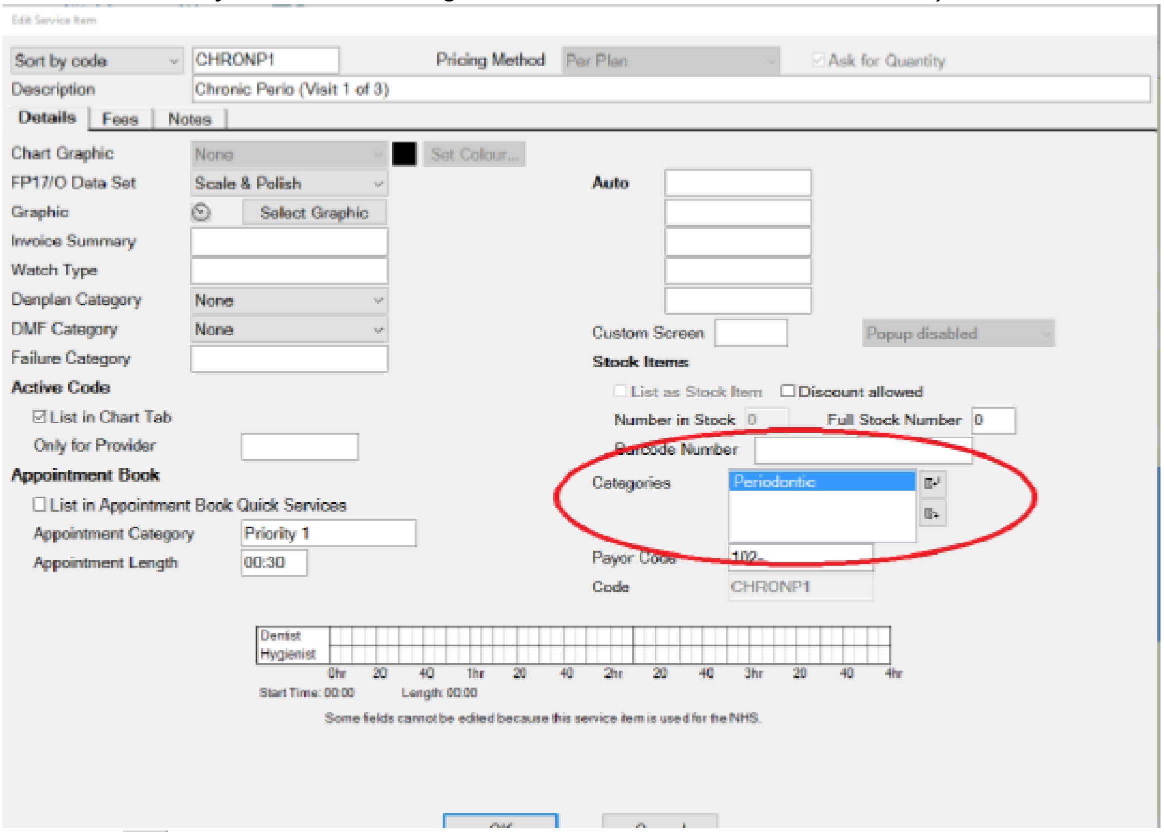
5. From this screen you can change the price of the service in the 'Price 2 (Default) column.



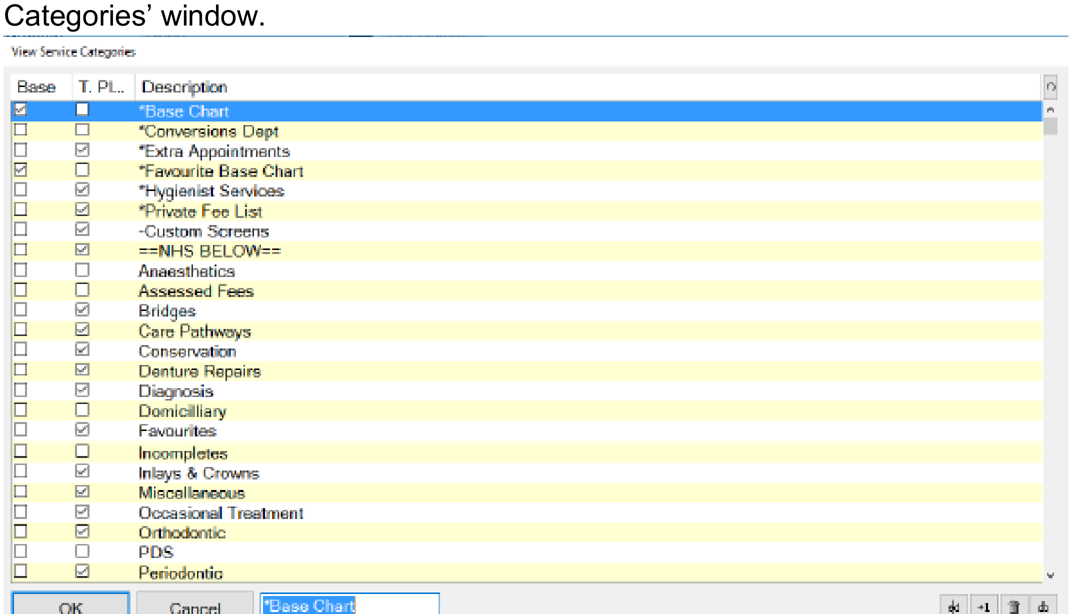
6. Repeat for any other services you need to amend.

Adding Services to Categories

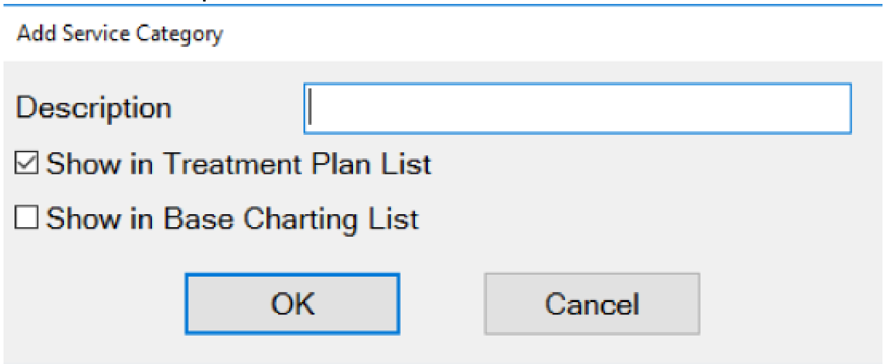
1. Have the required ‘Edit Service Item’ screen open. This is done by locating the service item in the service list and double clicking on it (please note if you are on the service list on the chart tab you will need to right click on the service and select edit)



2. Click the  icon to the right of the ‘Categories’ field; this will open the ‘View Service Categories’ window.



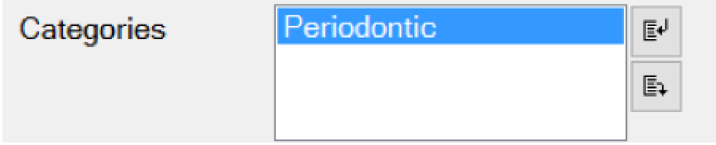
If the category that you would like to add the service to is not in the list click on the +1 in the bottom right hand corner and you will see the 'Add Service Category' window. Give the new category a description and select whether it is for base charting or treatment then press OK



3. Ensure the category you would like to add the service to is highlighted and press OK.
4. You can add a service item to as many categories as you like. In order to add it to more categories follow steps 2 and 3.
5.

Removing a service from a category

1. Have the required 'Edit Service Item' screen open. This is done by locating the service item in the service list and double clicking on it (please note if you are on the service list on the chart tab you will need to right click on the service and select edit)
2. Click on the category you would like to remove the service from in the 'Categories' field



3. Click on the  on the right hand side and select Yes

Adding a Category to the Chart Tab

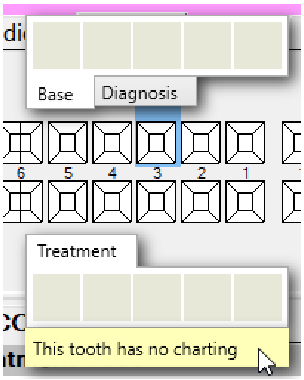
You can view a video guide using the link below:

https://www.youtube.com/watch?v=zSxtGjEv0JY

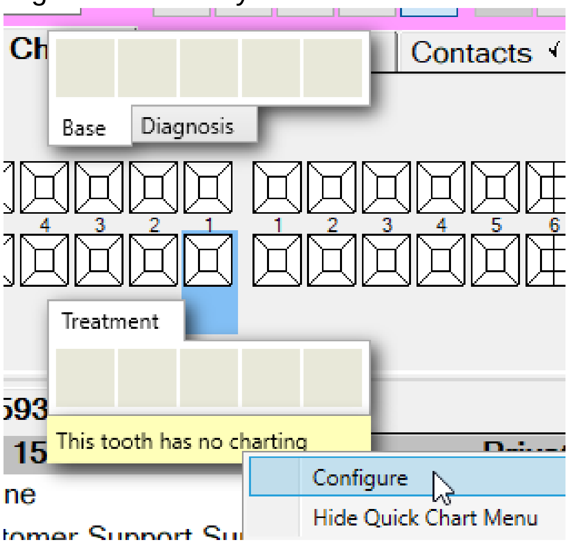
Configuring Quick Charting

Quick Charting is the hover box which displays a list of selected services when you move your cursor over the tooth chart.

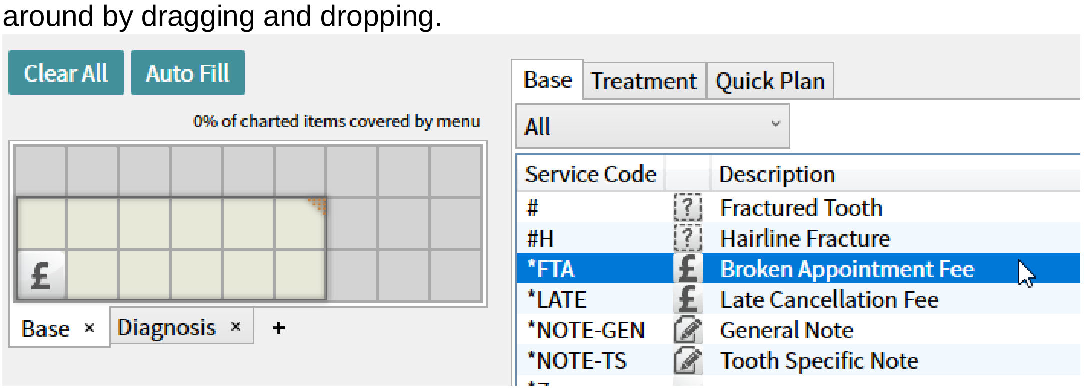
1. Go onto the chart tab of a test patient
2. Hover over the tooth chart and you should see the screen below

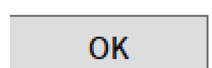


3. Right click on the yellow bar and select Configure



4. To add base items double click on them from the list on the right. You can move them around by dragging and dropping.



5. You can add up to 27 services to each tab to increase the amount of services you can add click on the triangle in the top corner of the selection window and drag as required.
6. Click onto the treatment tab and repeat step 4.
7. Once you are happy with your Quick Charting set up click on 

Adding Quick Plans

You can view a video guide using the link below:

https://www.youtube.com/watch?v=I1xWJ8pA-gY

Creating Consent Forms for Clinipad

You can view a video guide using the link below:

https://www.youtube.com/watch?v=aHyS6MtIIGY

Adding Quick Notes

You can view a video guide using the link below:

https://www.youtube.com/watch?v=c55dncYoJoY

Adding/Removing Tabs in the Activity Area

You can view a video guide using the link below:

https://www.youtube.com/watch?v=bCd0inrNeGM

Creating Custom Screens

You can view a video guide using the link below:

https://www.youtube.com/watch?v=to6fbkM5kXE

CHARTING TREATMENT

Moving Patients to the chair

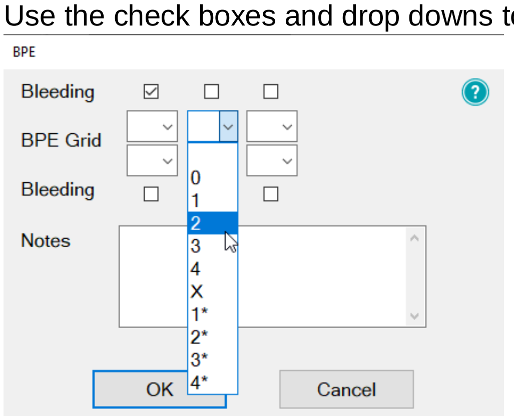
You can view a video guide using the link below:

https://www.youtube.com/watch?v=xhvm6ssc1d0

Recording BPE

Adding the BPE

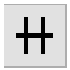
1. Once you have opened the patient record click on the 'Perio' tab
2. Click on the +1 under the lower window on the left hand side of the screen
3. Use the check boxes and drop downs to record the patients BPE

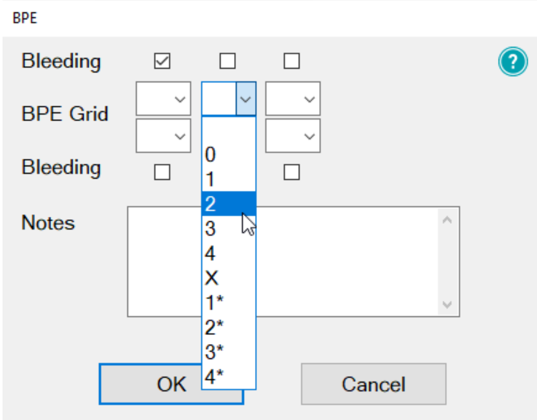


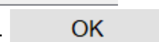
4. Once you have completed select OK

BPE Shortcut

In order to add the BPE score for a patient follow the steps below:

1. Click on the  button on the patient tool bar
2. Use the check boxes and drop downs to record the patients BPE

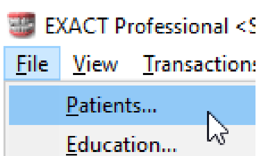


3. Once you have completed select 

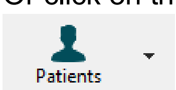
Treatment Planning

Opening a Course of Treatment

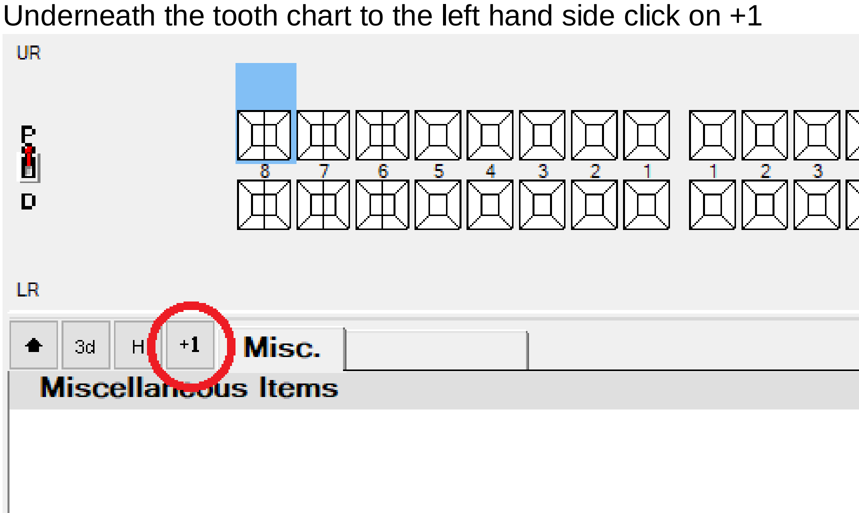
1. Go to File > Patients



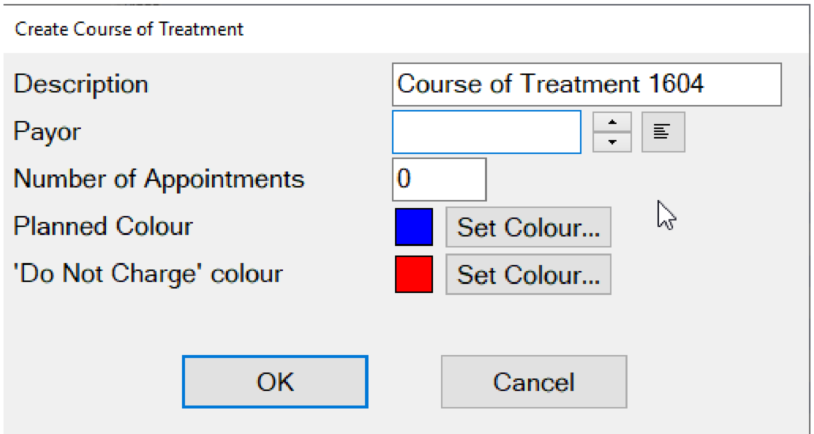
Or click on the patient's button on your workspace



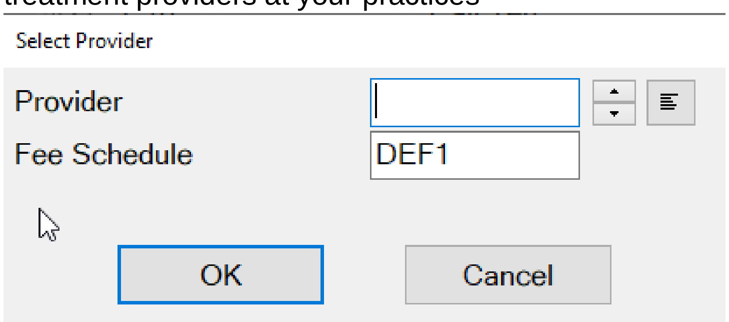
2. Click onto the 'Chart' tab
3. Underneath the tooth chart to the left hand side click on +1



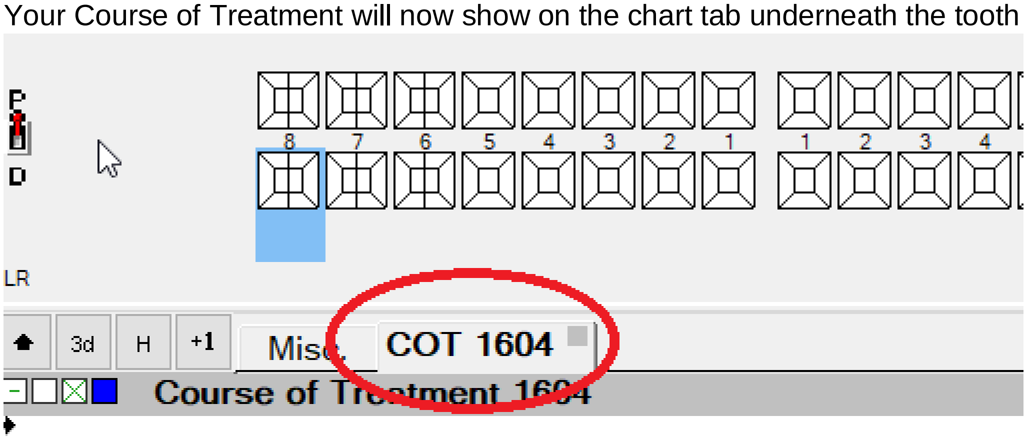
4. On the ‘Create Course of Treatment’ screen select which payor the course of treatment is for. If it is a Private course of treatment please the field blank. For any other payor you will need to click on the button to the right hand side and choose from your available list.



5. Once you have selected your payor click on OK
6. If you are not logged in as a provider you will need to enter the dentist, hygienist etc. initials into the ‘Provider’ field – you can use the list button view all the available treatment providers at your practices



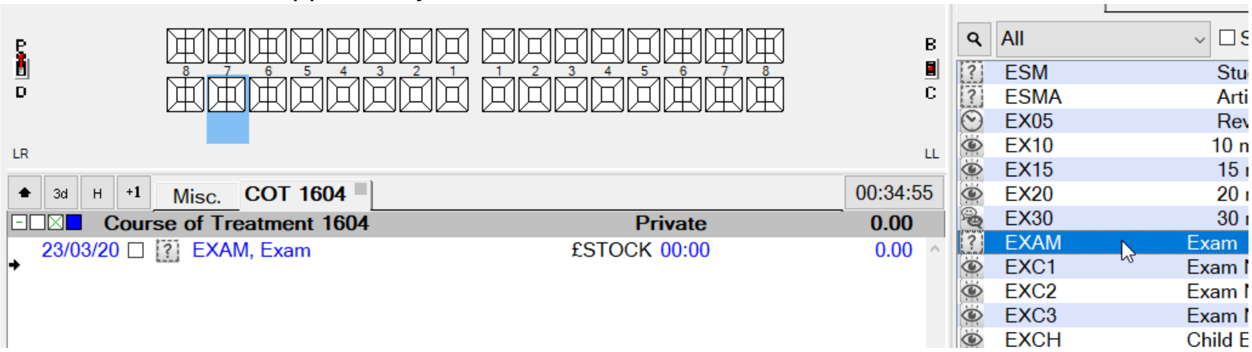
7. Click OK
8. Your Course of Treatment will now show on the chart tab underneath the tooth chart



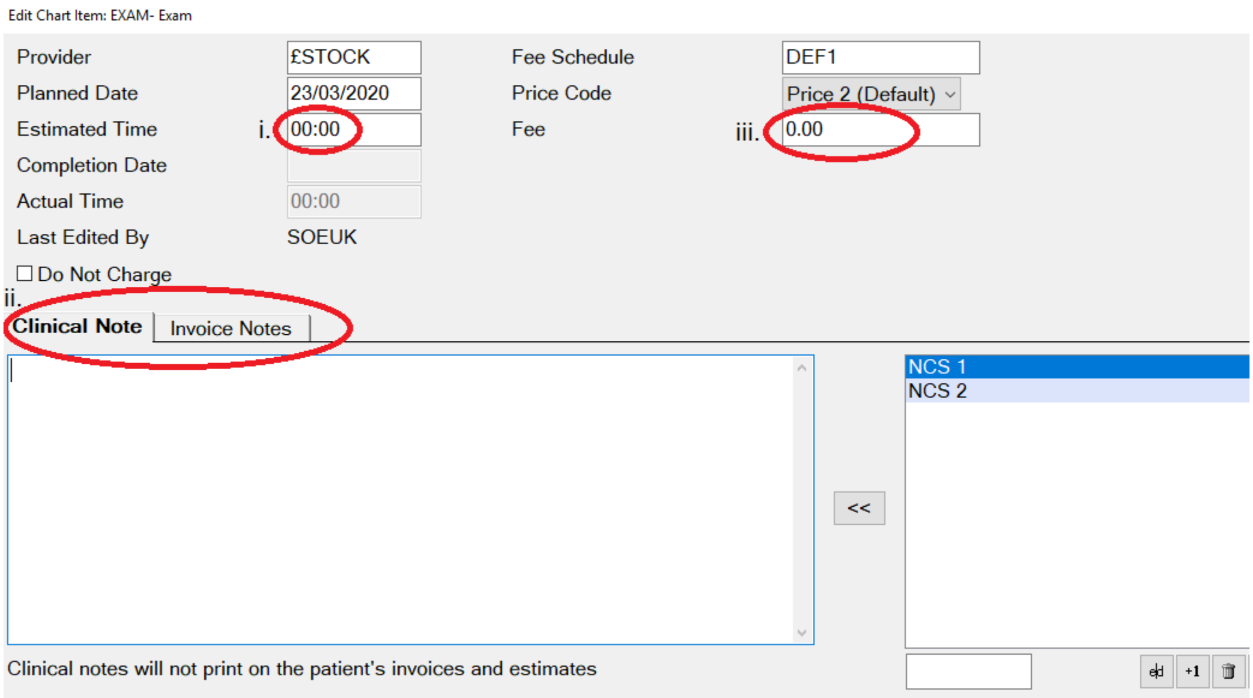
Charting Treatment

Once you have opened a Course of Treatment you can begin to chart your treatment

1. Select an item from your quick charting or double click an item from your service list. The service item will now appear on your course of treatment

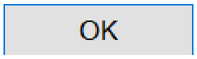


2. Double click on the service in the COT window



You can then do the following:

i. Add an estimate time that the service will take to complete
ii. Add any clinical notes/invoice notes
Please note anything added to the Invoice Notes tab will appear on all patient stationary e.g. estimates and invoices.
iii. Add or amend the fee for the item

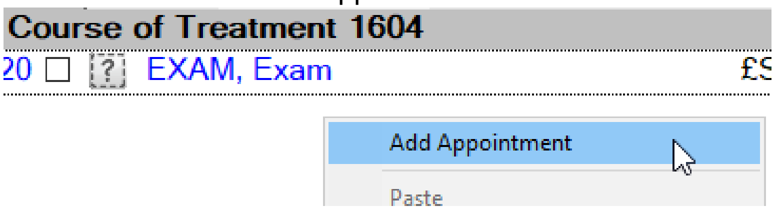
3. Once you are happy with the changed select 

4. Repeat for all services that you need to add to the COT

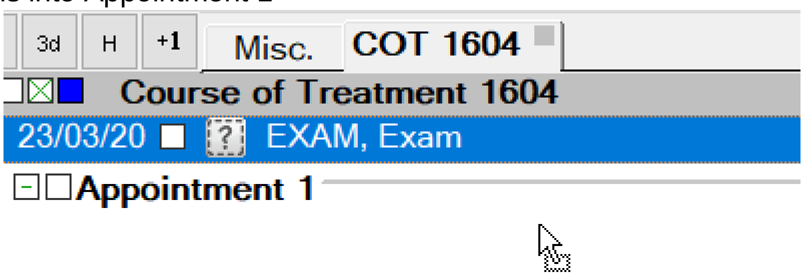
Adding Appointments

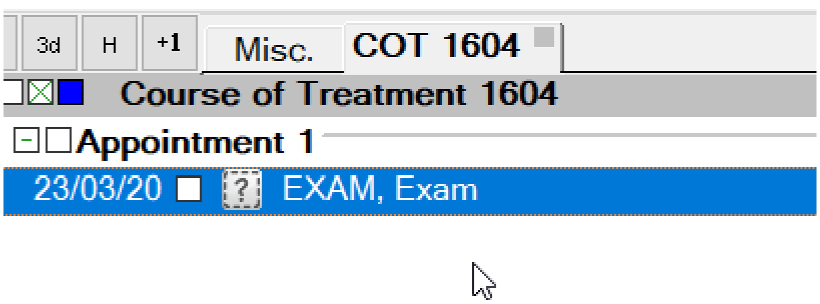
If you are planning a COT where multiple appointments will be required you can add appointments to your COT screen to break up the service items and make them easier to read.

1. Once you have added a service item to your COT right click on white space on the COT window and select 'Add Appointment'



2. The appointment will appear underneath the item you have already charted. To move this service item into an appointment left click and hold down on and you will be able to drag this into Appointment 1

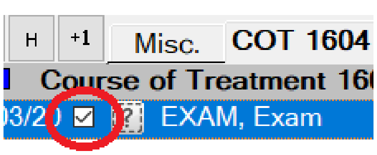




3. Repeat step 1 for each appointment you need to add charting your services as you go.

Marking Treatment as Complete

Once you have completed a service on a patient you will need to mark it as complete in Exact. You can do this by click on the check box to the right of the service.



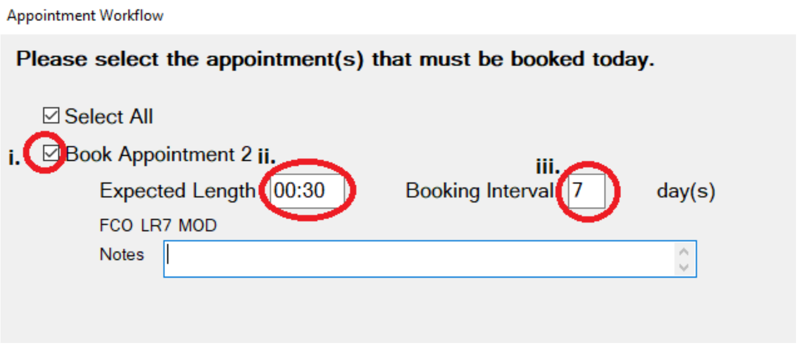
Please note: treatment should be ticked as soon as it is completed as Exact picks up the completion date from the day the service item is ticked.

Charging Treatment

Once you have marked treatment as complete you will need to select Charge . This will lock the completion date and fee for this item and send the required payment to the reception departure work flow.

Scheduling Future Appointments

Once you have charged your treatment if there are any future appointments you would like the reception team to book you will need fill out the screen below which will display once you have charged the first appointment through.



i. Add a tick in this box if you would like the receptionist to book this appointment.
ii. Add the length you would like the appointment to be
iii. Add how many days in the future you would like the appointment to be.

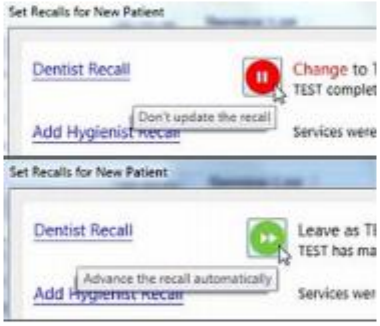
Once you are happy with the information entered select Close at the bottom of the screen.

Recalls

Depending on your recall set up you will be prompted to set a recall date for your patient when charging treatment. The recall date should automatically set to the default recall interval chosen by the practice.

Advancing and pausing recalls

From the recall prompt you can do the following:

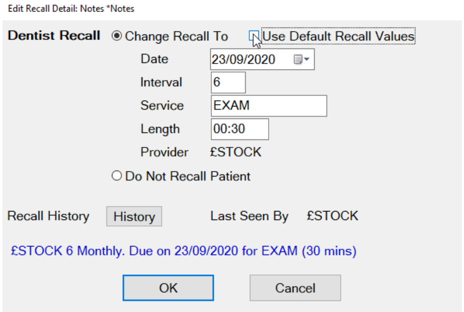


Will allow you to not advance the recall date.

Will allow you to advance the recall date to the suggested default.

Changing the recall interval

1. If you would to amend the recall interval from the default click on 'Dentist Recall' or 'Hygienist Recall' and you will see the screen below:

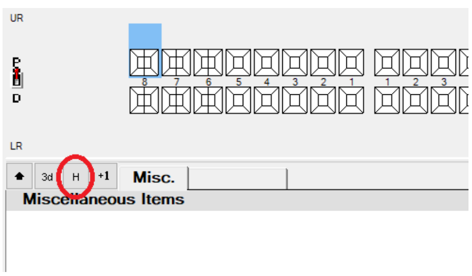


2. Untick 'Use Default Recall Values' and you will then be able to edit the recall interval, service and length as required.
3. From this screen you can also set the patient to 'Do Not Recall Patient' and this will stop them receiving any recall communications.

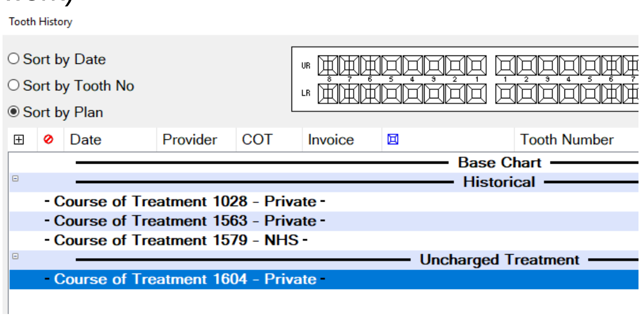
Viewing Treatment History

To view a patients full treatment history first go to the patients chart tab and follow the steps below:

1. Underneath the tooth chart to the left hand side click on H



2. This will open the patients treatment history broken down into three sections Base Chart items, Historical (items which have been charged) and Uncharged Treatment (planned work)

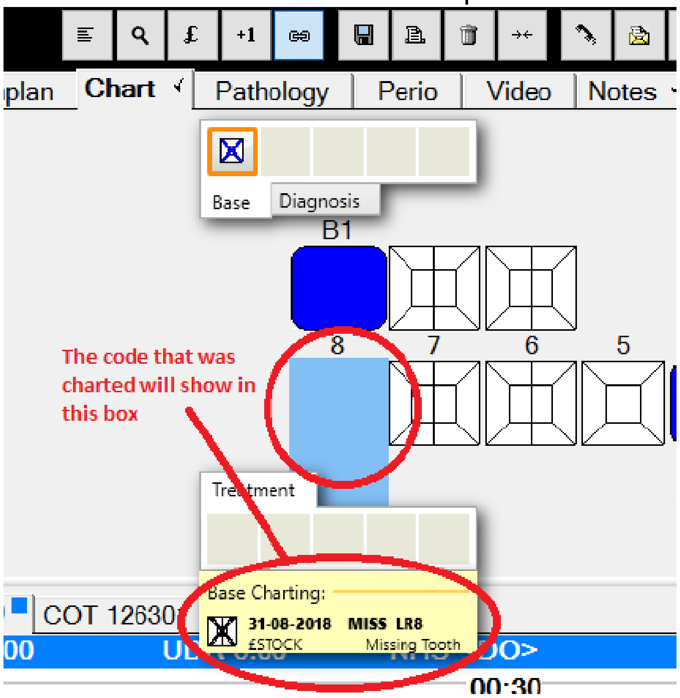


3. You can sort this screen in three ways:
   i. **Sort by Date** – this will show you the treatment in date order with the newest work showing at the bottom.
   ii. **Sort by Tooth No** – this will show all service items grouped together by tooth
   iii. **Sort by Plan** – this will show all service items grouped together by which Course of Treatment they were completed on.

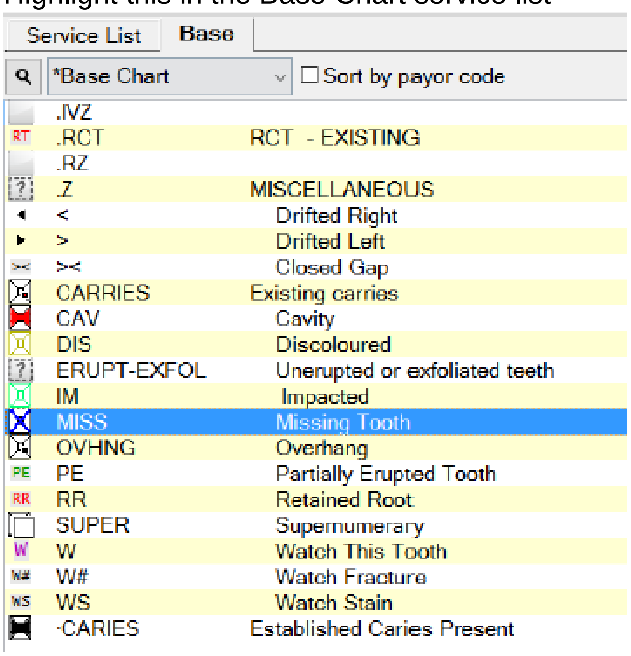
Removing Incorrect Base Charting (Voiding)

Voiding treatment from the tooth chart

1. Go to the patients chart that you wish to edit
2. Hover over the tooth to find out the precise code that was used originally



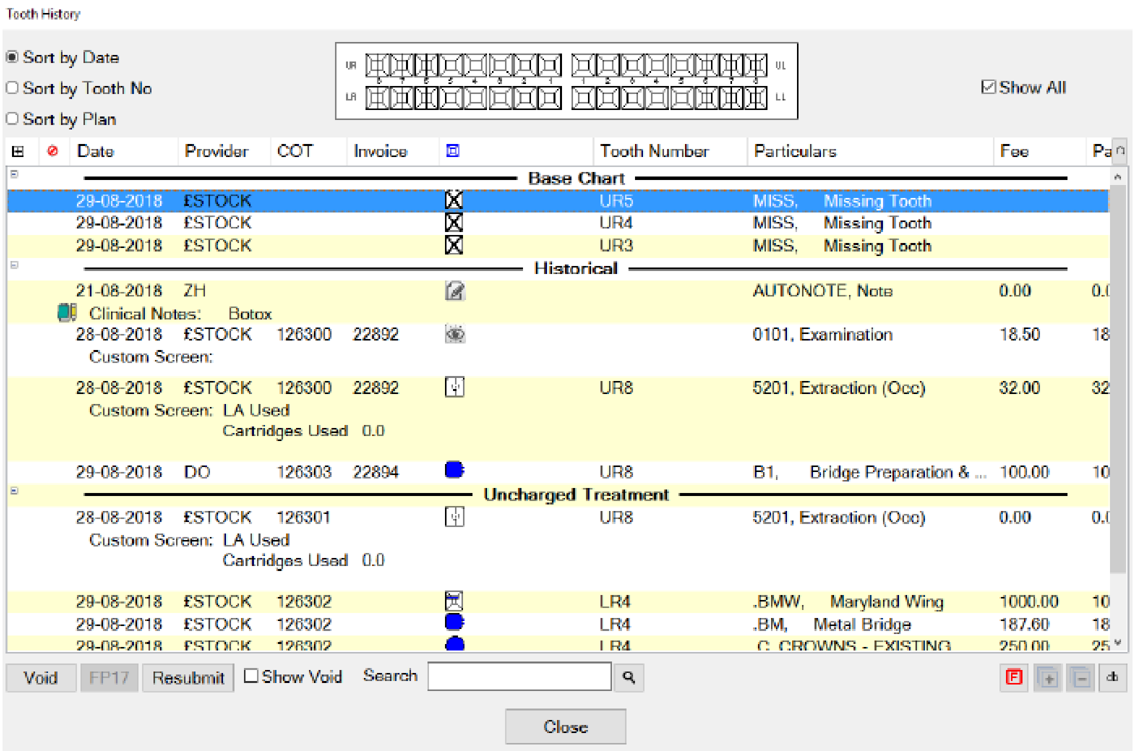
3. Highlight this in the Base Chart service list



4. Click onto the tooth in question and this will remove the incorrect base charting on the patients tooth chart.

Voiding treatment from the patients history

1. Use the steps in ‘Viewing Treatment History’ to access the history window
2. Scroll up to find the base charting section and highlight the item you want to remove



3. Then click on Void in the bottom right hand corner and this will remove the charting.

THE PERIO TAB

Classic Perio

Configuring classic perio

From the patients file select the ‘Perio’ tab you will see the options below

Wide screen options ◉ Separate tabs ○ Combined Upper/Lower tabs

1. **Separate tabs** will allow you to record perio on the upper and lower arches on separate tabs

   Upper | Lower | Plaque/Bleeding

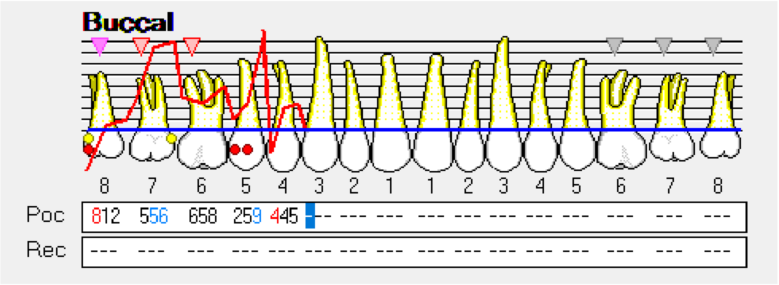
2. **Combined Upper/Lower tabs** will allow you to record perio on the upper and lower arches on the same tab.

   Upper/Lower | Plaque/Bleeding

Recording Perio using the classic perio screen

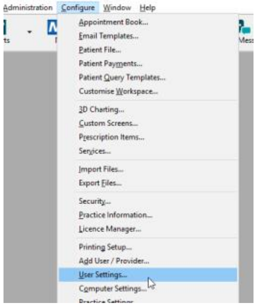
1. Go to the Perio tab
2. Click on the  at the bottom of the top window to the left hand side

3. You can now begin charting from the R8 – L8 on each of the arches
    i. You can type numbers in to chart the pockets and recession. If the number is above 9 you will need to click on '+' on your keyboard followed by the number e.g. 15 is '+' followed by 5 – these will show in blue.In order to chart an overgrowth press the '–' key on your keyboard followed by a number these will show in red..
    ii. To add Furcation you will need to click on the triangles. One click will give you grade 1, two clicks grade 2 and three clicks grade 3.
    iii. To chart Suppuration click 's' on your keyboard and to add bleeding click the 'b' key.

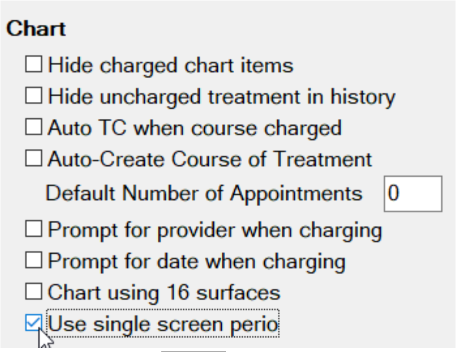


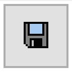
Turning on Single Screen Perio

1. Go to Configuration > User Settings



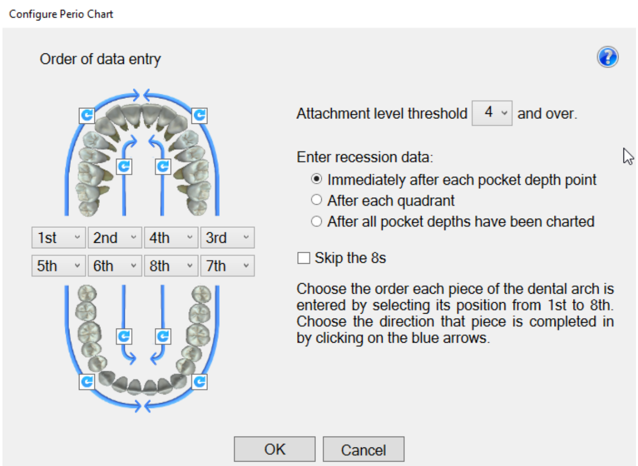
2. From the user setting screen click on the box next to 'Use single screen perio'



3. Click on the  icon on the tool bar.

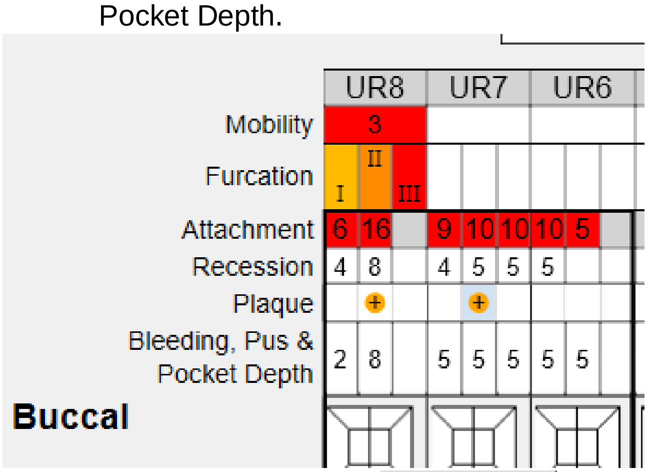
Configuring single screen Perio

1. Go to the 'Perio' screen on a patient file
2. Click on the  in the bottom right hand corner
3. On the screen below you can set the way that you chart including the order in which date is entered, attachment level threshold and recession data.



Using Single Screen Perio

1. From the Perio tab click on the +1 beneath the top window on the left
2. Add a title for your perio charting
3. From the chart you can add the following
   i. **Mobility** – Click on the field; one click is 1,two clicks is 2 and three clicks is 3
   ii. **Furcation** – Click on the field; one click is 1,two clicks is 2 and three clicks is 3
   iii. **Plaque** – Click in the field
   iv. **Recession and Bleeding, Pus & Pocket Depth** – add numerical values
   v. Attachment – will automatically total from the recession and Bleeding, Pus & Pocket Depth.



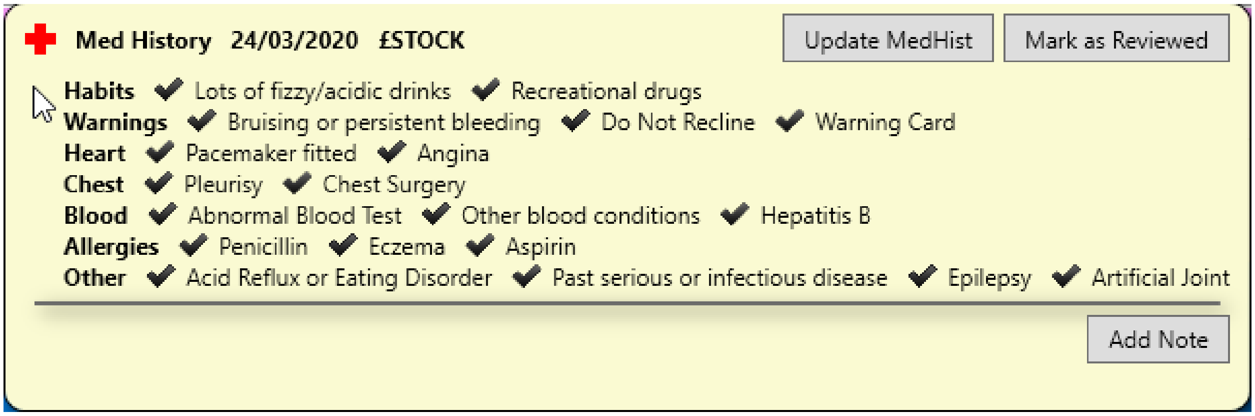
4. Once you are finished select OK and your charting will be saved.

THE MEDICAL TAB

Updating the medical history

Updating the Medical History with Clinipad

If you are using clinipad your patient would have filled out their medical history form on arrival. When you move the patient to the chair you should see the pop up box below

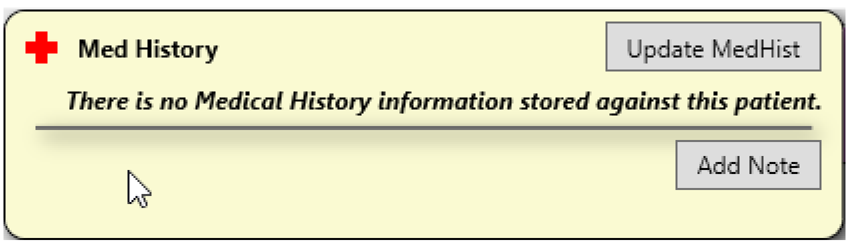


From this window you can do two things:

1. **Update MedHist** – this will need to be pressed if the patient remembers anything that they did not add when filling in the clinipad.
2. **Mark as Reviewed** – If there are no changes required and you have confirmed this with the patient click Mark as reviewed. This will save a line entry on the medical history tab with the date that you reviewed it.

Updating the medical history from a paper form

If you are working with paper based medical history forms when the patient arrives you will see the box below:

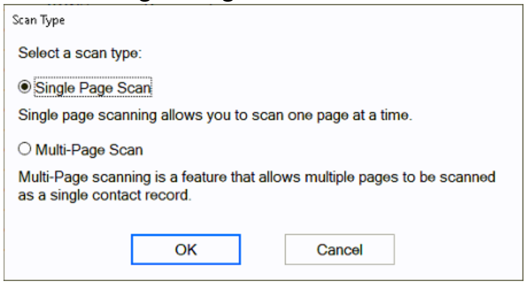


From this screen click on 'Update MedHist'. From the medical history window select all that apply and put a tick in ☐ Reviewed by at the bottom of the form then select Save.

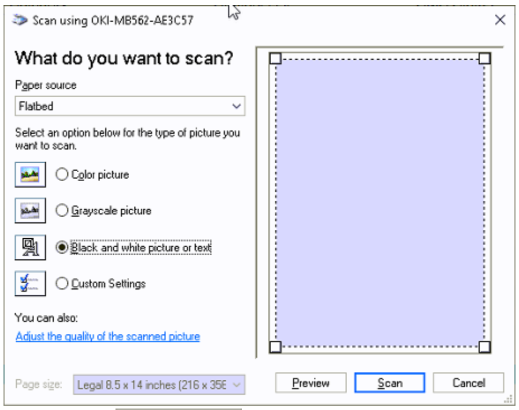
Please then scan the paper form into the patient file using the steps below:

1. Click on the contacts tab
2. Click on Scan in the bottom right hand corner

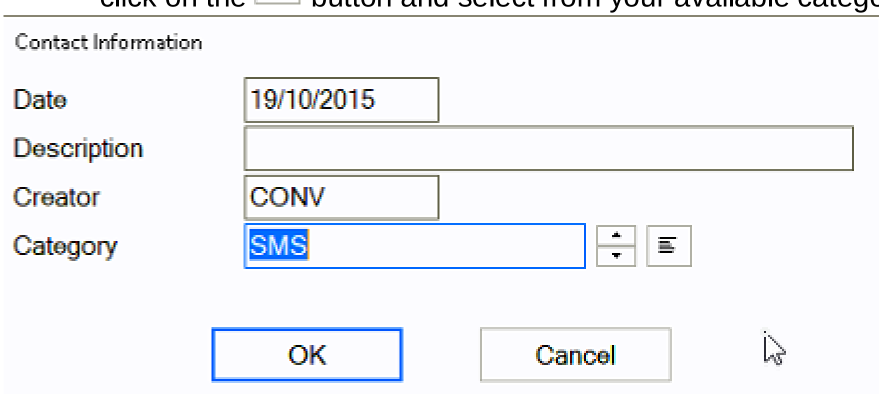
3. From the screen below select the scan type – if your medical history is only one page select ‘Single Page Scan’ and if it is more than 1 select ‘Multi-Page Scan’



4. From the screen below select the paper source from the drop down (this is whether you will be using your flatbed or feeder) and choose the picture type – I would advise to use Black and White as this will be a smaller file.



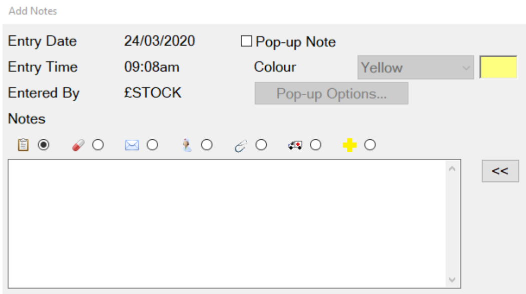
5. Click on Scan
6. You will see the screen below:
   I. The **date** will automatically generate to the date you are scanning the item in. If you need to backdate this you can.
   II. You will need to enter a description so that people can easily identify the document is.
   III. The **creator** will automatically be set as the person who is logged in when the scanning is taking place.
   IV. The category will automatically set as the first in your list. To change the category click on the button and select from your available categories.



Medical Notes

Adding a Medical Note

1. go to the 'Medical'
2. Click on Add Note in the top right hand corner
3. Enter you notes in the text field below, you can also chose the con that is relevant for your note.

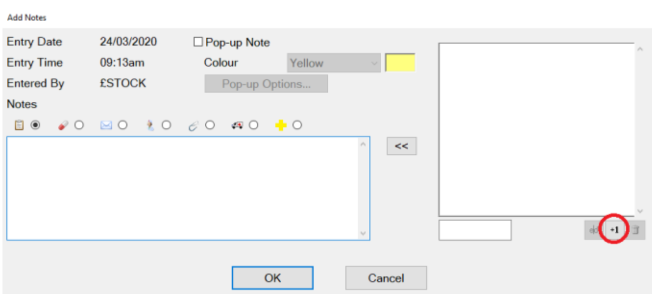


4. Once you have finished your note select OK
5. This will then save a line entry on the medical history.

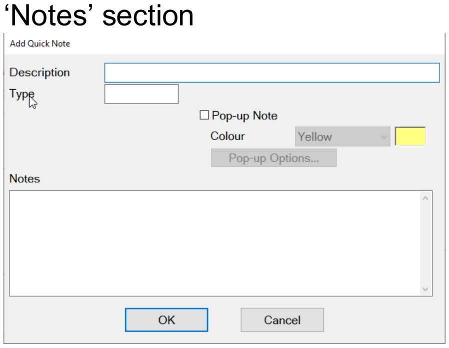
Setting up Medical Quick Notes

If you have medical notes than you will frequently need to use it would be handy for you to set these up as Medical Quick notes

1. Go onto a test patients file
2. Click on the 'Medical' tab
3. Click on Add Note in the top right hand corner
4. On the screen below select the +1



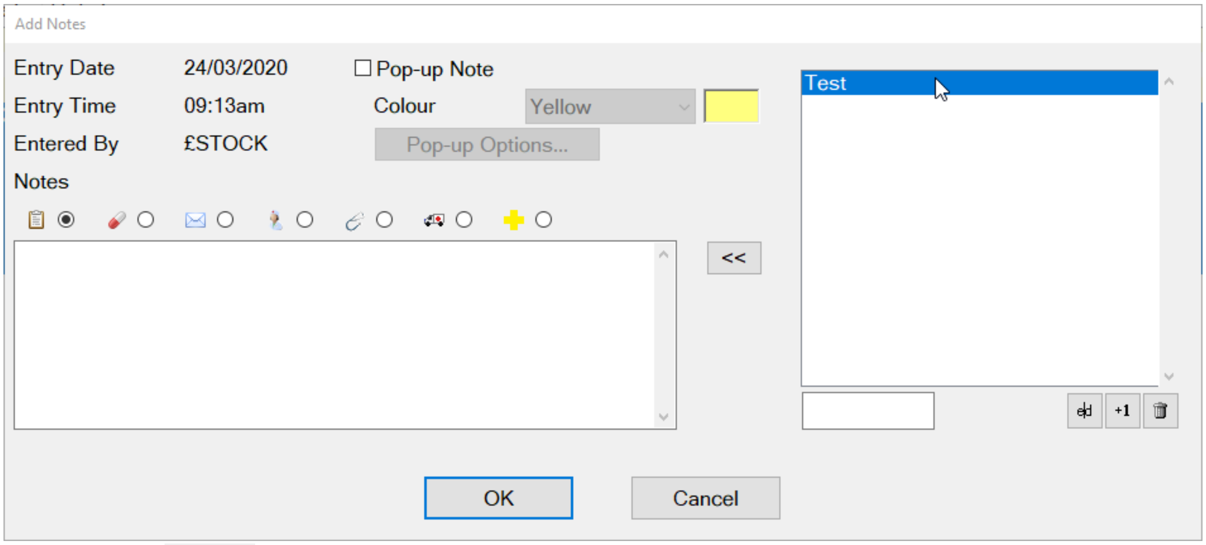
5. On the new window that opens below add a description then add the main body into the 'Notes' section



6. Once you are finished creating your template select OK

Using Medical Quick Notes

1. Go to the patients' 'Medical' tab and select Add Note
2. Click on it in the list of the left

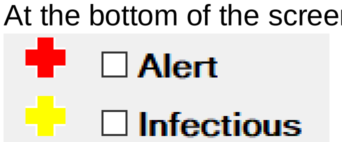


3. Click on the << to add it for the patient.
4. Edit as required then select OK.

Medical Alerts

Adding Medical alerts

1. Go to the patients 'Medical' tab
2. At the bottom of the screen you will see the icons below



3. Click into the relevant box to add an alert to a patient

Viewing Medical Alerts

On the patients tool bar you will see the medical history '+'. The icon will show in different colors depending on the alert set:

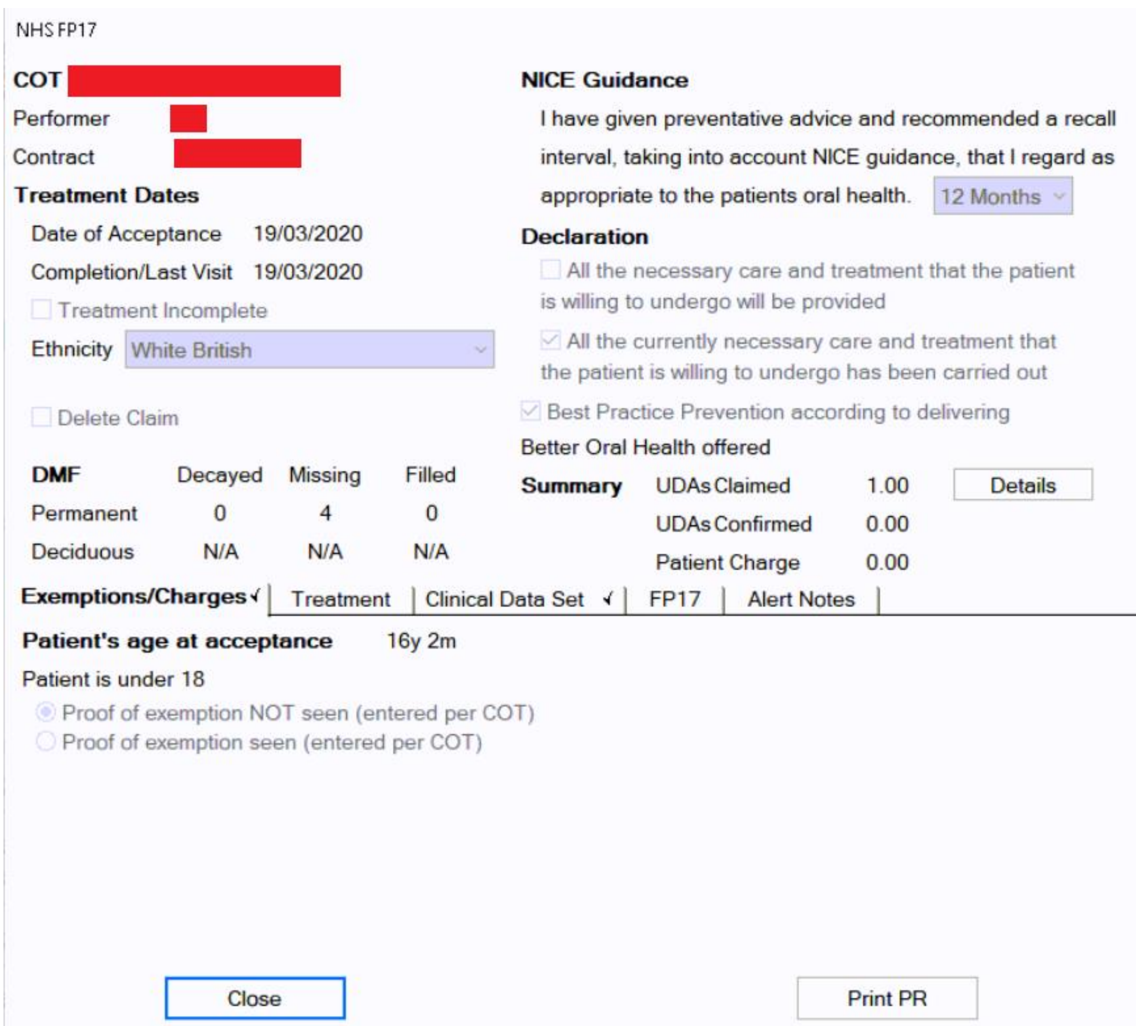
	No Medical Alert Set
	The Alert box is checked **or** both the Infectious and Alert box are ticked
	The infectious box is checked

NHS

FP17

When you TC an NHS COT you will need to fill out the FP17 form which contains the following

I. **Performer and Contract** – this is the dentist that is claiming the UDA's and the contract number they are claiming under.
II. **Treatment Incomplete** – to be used if a patient has not returned for their planned treatment.
III. **Delete Claim –** to be used if you have sent a claim in error and are now choosing to delete it.
IV. **DMF Scoring –** picked up automatically from the patients tooth chart
V. **Treatment Dates** – 'Date of Acceptance' will pick up from the date of the first appointment and the 'Completion/Last Visit' will show as the date of the last treatment completed for the patient.
VI. **Declaration** – please tick as appropriate for the COT completed.
VII. **Summary** – this section will show the UDA's you have claimed and will update to show the confirmed UDAs when the schedules come in.


NHS FP17

COT [redacted]
Performer [redacted]
Contract [redacted]

Treatment Dates
Date of Acceptance 19/03/2020
Completion/Last Visit 19/03/2020
Treatment Incomplete
Ethnicity White British

Delete Claim

DMF	Decayed	Missing	Filled
Permanent	0	4	0
Deciduous	N/A	N/A	N/A

NICE Guidance
I have given preventative advice and recommended a recall interval, taking into account NICE guidance, that I regard as appropriate to the patients oral health. 12 Months

Declaration
All the necessary care and treatment that the patient is willing to undergo will be provided
All the currently necessary care and treatment that the patient is willing to undergo has been carried out
Best Practice Prevention according to delivering Better Oral Health offered

Summary UDAs Claimed 1.00 Details
UDAs Confirmed 0.00
Patient Charge 0.00

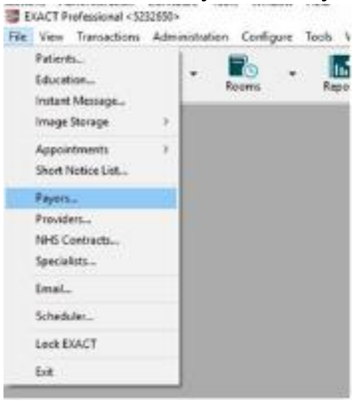
Exemptions/Charges | Treatment | Clinical Data Set | FP17 | Alert Notes

Patient's age at acceptance 16y 2m
Patient is under 18
Proof of exemption NOT seen (entered per COT)
Proof of exemption seen (entered per COT)

Close
Print PR

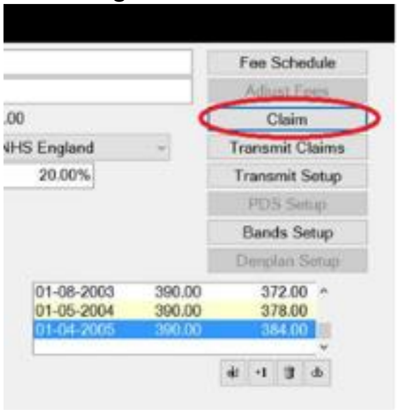
How to transmit

1. Go to File – Payors or if you have one, the ‘NHS’ button along the top.

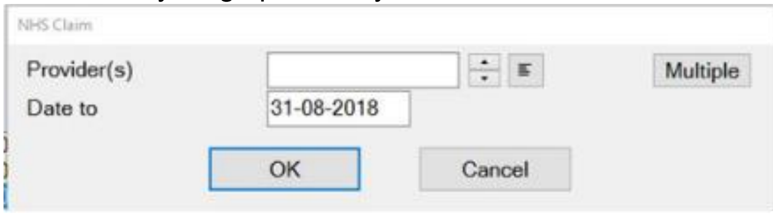


2. To the right of ‘Sort by name/Sort by code’, find NHS.

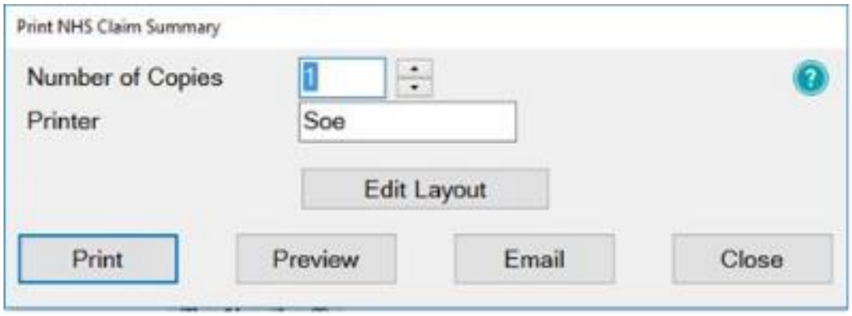
3. To the right of this screen, click on the button that says ‘Claim’.



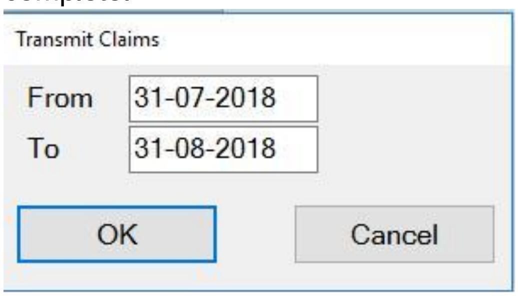
4. On the next screen, select the providers you wish to bundle claims for, leave blank for all providers, or select multiple to the right. The date field is set to todays date, so it will bundle everything up to today. Click ‘OK’.



5. The system will bundle the claims, and once finished, will prompt you to print the list of claims, press print if you would like to print, or cancel to skip this.

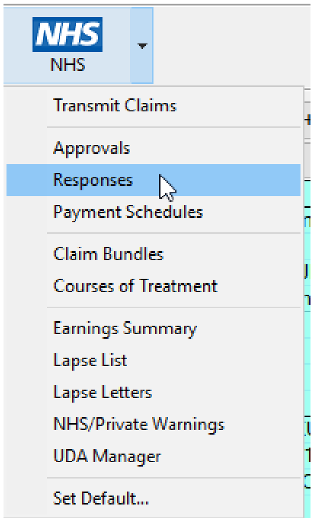


6. If you get a message saying ‘No Claims Found’, nothing is ready to send, and if you get a message saying ‘There are too many claims for the bundle…’, once finished, you will need to press the ‘Claim’ button and bundle again, to bundle these extra claims ready to transmit.
7. You will then get the ‘Transmit Claim’ screen click , the transmission is complete.

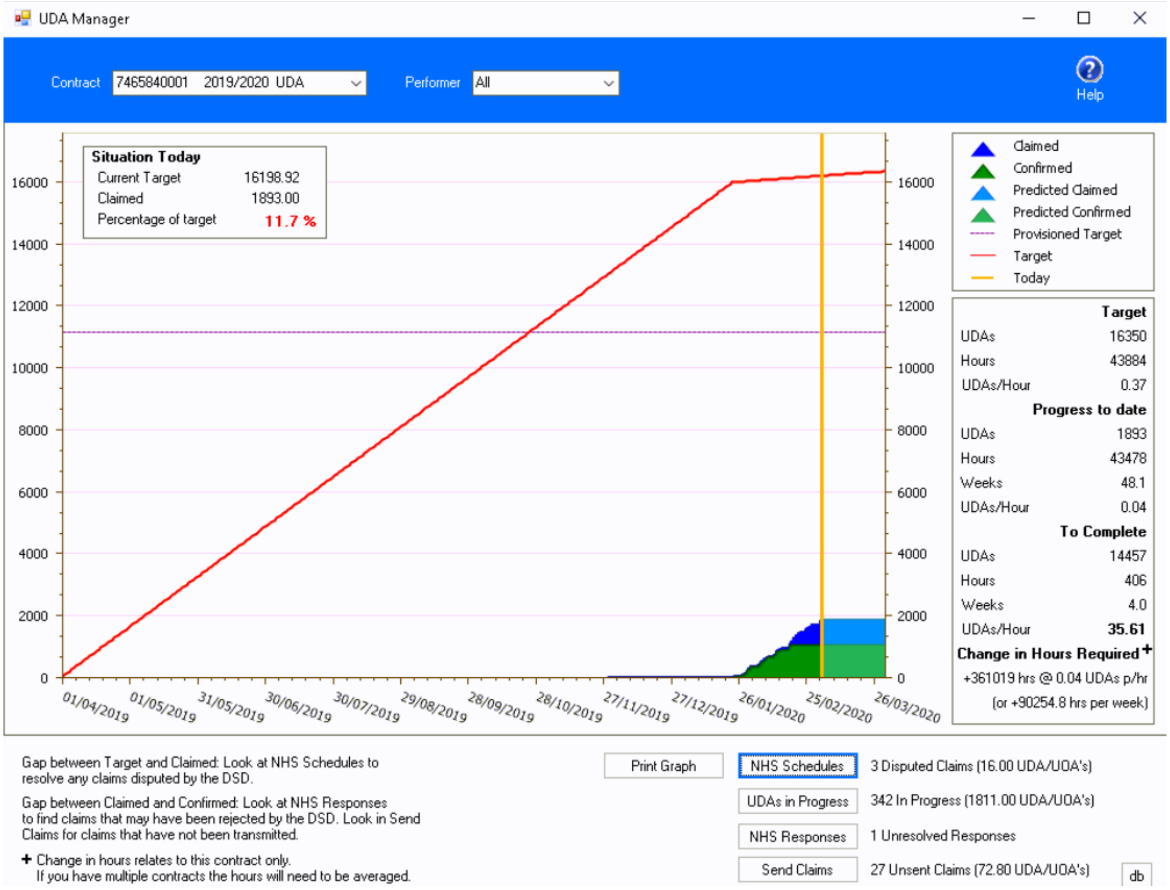


Viewing NHS Responses

You can view NHS responses by clicking on ‘Unresolved Responses’ from the claims central screen shown in the ‘How to Transmit’ section. Alternatively, you can access NHS responses from the NHS button on the workspace by clicking on the drop down arrow and selected responses as shown below.



UDA Manager



The UDA manager allows you to display a graph of UDA performance against targets.

To load the UDA Manager go to Administration > NHS > UDA Manager. .

When this is clicked the UDA Manager screen will open and will default to all the practice totals if there is more than one provider on the NHS contract. To switch to individual target overview, you can use the drop down box beside ‘Performer’. You can also switch between different contract periods using the drop down beside ‘Contact’

The graph shows the current situation as at today with the **yellow vertical line**, the **claimed UDAs** showing in blue, **Confirmed UDAs** showing in green all compared against the **red target line**.

This **target line** is based on overall target compared to a dentist’s available diary space. To ensure this is as accurate as possible please make sure the overall contract target is correct, the correct dentist sub-targets are correct and also the appointment book rotas are correct for the dentists who are working on the contract.

If there are any claims that haven’t yet been transmitted you can click the 

button and any unsent claims will be sent to the Dental Board.

Dealing with Responses

Response		EXACT
125	Unacceptable combination of treatments on a claim	
	Reg 11 with Band 1, 2 or Urgent More than one of the following entered on the same FP17O claim: - Assess and review - Assess and refuse - Assess appliance fitted - Treatment abandoned - patient failed to return - Treatment abandoned – patient requested - Treatment discontinued - Treatment continued - Repair to appliance - Reg 11	1. Resubmit the COT 2. Copy the banded treatment and the reg 11 onto two new COTS 3. TC the original COT as a deletion 4. Wait 48 hours 5. Transmit the two new COTS.
	NICE guidance recall interval present / Treatment on Referral indicator present	1. For UOA resubmit the COT 2. TC the new COT and remove the indicators from the FP17
128	Invalid quantity associated with treatment code	
	Zero recall interval or value greater than 24 months recorded against NICE guidance	**Call dental board 0300 330 1348**
	Invalid value submitted for Ethnic Origin	1. Resubmit the COT with the wrong code 2. TC the new COT, ensuring the ethnicity is entered on the FP17 Transmit the claim(s) to the Board. We would recommend calling the Dental Board about an hour after transmission, on 0300 330 1348, to check the claims have been received and the ethnicity code is correct. You will need to provide the Dental Board with the claim bundle number and the practice postcode
312	No significant treatment on a claim	
		1. Resubmit the COT 2. Add the banded treatment (you may get this response if you mark urgent treatment as a continuation – in that case you will need to remove the check in continuation of treatment on the exemption screen) 3. TC the COT
401	Claim overlaps / duplicates an existing claim for the same patient, the same contract or performer	
	FP17 submitted that contains overlapping dates with an FP17 that has already been processed	Go to the patients transactions (£ button) and check the date of the last FP17. If the dates of the new COT and the last do not overlap, then Also check in the Chart History that there is not already a Course of Treatment that has been created on the same day with the same treatment.
		If the courses do overlap, contact the board as you may not be paid for both courses.

If new sites get this response it is usually because they have sent the claim off in both systems.
Get the site to check the old system and if there is one there.
Resubmit the COT and TC again as a deletion. Site will be paid for the one in the old software.

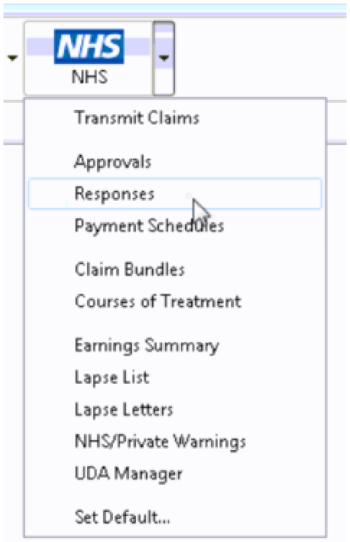
	FP17 submitted that contains duplicate patient and duplicate details to a FP17 that has already been processed.	1. Resubmit the COT 2. Correct the planned and completed dates on the services 3. TC the COT
869	Further treatment within 2 months Invalid.	
	If there are more than two months between courses of treatment, remove the further treatment indicator. If the dates are incorrect, amend them.	1. Resubmit COT 2. Copy the treatment to a new COT ensuring the dates are correct 3. Click exemptions box on the new COT and remove the check in further treatment. 4. TC the COT
	The previous course of treatment is a lower band than the further treatment	If the original COT is a band 1 the new COT cannot be marked as a continuation if the new COT has a higher band. 1. Resubmit the COT 2. Remove the continuation of treatment check on the exemptions window 3. TC the COT
	The original course of treatment was urgent	If original should be urgent: 1. Resubmit the new COT 2. Remove the check in continuation of treatment from the exemptions window. 3. TC the COT If the original COT should not be urgent: 1. Resubmit the original COT **(if this COT is outside of the 2 month window call the board as it may remove UDA's from you)** 2. Resubmit the COT the response was received on. 3. TC the original COT making sure it is not an urgent code and shows the correct UDA's 4. Wait 48 hours 5. Charge through the newer COT with the continuation of treatment ticked.
870	Free repair/replacement within 12 months invalid	
	The date of acceptance is more than 12 months after the date of completion of the previous course of treatment	1. Resubmit the COT 2. Remove the free replacement check on the service (this will now have a patient charge) 3. TC the new COT
	Treatment band 2, 3 or urgent are not selected on the FP17	*Dentures, bridges or orthodontic appliances are not available for free repair or replacement if lost or broken.* (Free repair is only available for fillings, root fillings, inlays, porcelain veneers or crowns.

		This will not normally apply if: 1. within the 12-month period another dentist has carried out any treatment on the same tooth that has been restored, or 2. the patient was advised at the time of the restoration that it was temporary or a different restoration was more appropriate, but the patient insisted on a different form of restoration, or 3. the repair or restoration is a result of trauma)
	The FP17 with free repair/replacement contains a higher band than the original FP17	A free repair can only be selected for the same service on the same tooth e.g a bridge cannot be marked as a free repair for a filling. The claim will need to be resubmitted and the free repair/replacement removed from the exemptions. **Follow steps above.**
@012	Invalid or missing contract number and / or performer number	
	The10 digit contract number is incorrect	Check the location is correct and the contract number is correct in the drop down on the FP17 If the contract number is correct in Exact you will need to contact the board. If the contract number is wrong because you have multiple contacts at the practice 1. Resubmit the COT 2. TC the COT making sure the correct contract is on the FP17.
	The six digit performer number is incorrect	1. Go to File-> Providers Bring up the provider in question and click on NHS details tab 2. Check that the performer number is correct. **3. If it is correct or you are not sure of the number, call the board and ask why this was sent.** 4. If the number is wrong, change the performer number then: a) Resubmit the COT b) TC the COT.
@212	Claim already present based on claim reference number	
		Call the board on 0300 330 1348 to check the claim ref. If the treatment has been charted on a resubmitted COT that has been resubmitted copy all the treatment onto a new COT and TC. (If the original should not have been claimed for send as a deletion and put treatment onto a new COT wait 48 hours and TC again)
@285	Treatment dates are outside the period of the contract or the performer's tenure	
		If the dates are already correct contact the board on 0300 3301348 1. Resubmit the COT

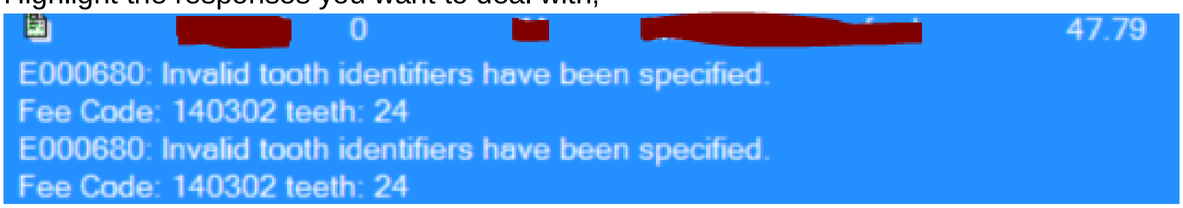
		2. Amend the dates to ensure they are correct or change the contract that has been put on the FP17 3. TC the COT
@307	Invalid Location ID	
		Check the location number in Exact (configure > practice information) is incorrect make the change (this number needs to be 6 digits – f your location number is shorter add the required amount of 0's in front e.g. 1234 becomes 001234. Confirm with the DPB/PCT the claim numbers needed to 1. Resubmit the COTs 2. TC the COT again.
@320	No band on a further treatment claim	
		1. Resubmit the COT 2. Double click on the service and ensure there is a band – if there is not you will need to give the service a band or chose a service with a payor code. 3. TC the treatment again. *If this should not be further treatment e.g if it is urgent you will need to remove the further treatment option on the exemptions screen*
@329	KPI treatment codes on a claim for non-PDS Plus contract	
		Call the board on 0300 330 1348 to confirm the correct contract them 1. Resubmit the COT 2. Copy the treatment to a new COT number 3. TC the original COT as a deletion 4. Wait 48 hours 5. Transmit the new COT
@330	SQ Ind claim where original cannot be found	
		1. Resubmit the COT 2. Copy treatment to a new COT ensuring the dates are correct 3. TC the original COT ensuring there is a tick in the delete claim box 4. Wait 48 hours then TC the new COT ensuring the invoice date is correct (set user settings to prompt for date when charging)
@331	SQ Ind claim where original has already been deleted or is in error	
		1. Resubmit the COT 2. Copy treatment to a new COT ensuring the dates are correct 3. TC the original COT ensuring there is a tick in the delete claim box 4. Wait 48 hours then TC the new COT ensuring the invoice date is correct (set user settings to prompt for date when charging)

Resubmitting Treatment

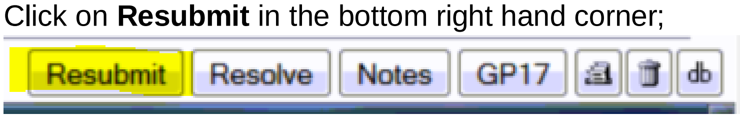
1. To amend / resolve any responses you receive;
2. Click into responses under the NHS drop down.



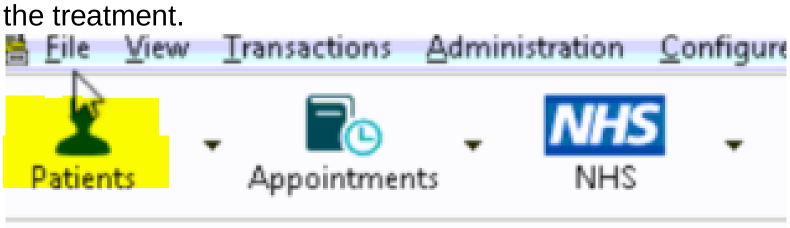
3. Highlight the responses you want to deal with;



4. Click on **Resubmit** in the bottom right hand corner;



5. Once you have resubmitted, click on to the **Patient** icon at the top of your screen and it will load the patient that you have resubmitted the treatment for and allow you to amend the treatment.



6. Before you TC the treatment back through, please check that you have **"prompt for date when charging"** checked under your **user settings;**

You can view a video guide using the link below:

https://www.youtube.com/watch?v=Ndk7-lulPJQ&t=25s

PATIENT INFORMATION REQUESTS

Printing Patient Details

You can view a video guide using the link below:

https://www.youtube.com/watch?v=-BmMKIoQiUs

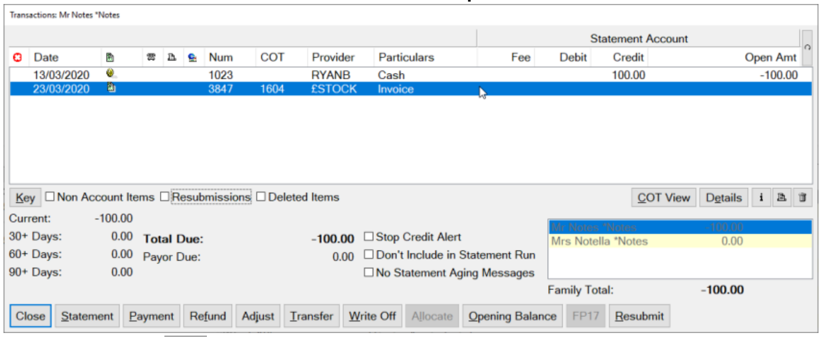
Estimates

You can view a video guide using the link below:

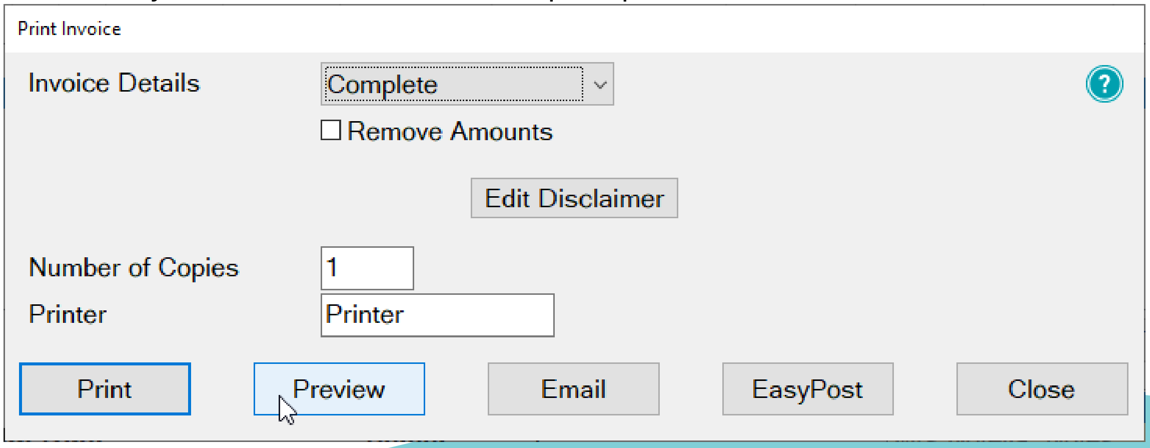
https://www.youtube.com/watch?v=supN2BLEf3A

Printing Invoices

1. To print an invoice click on the button on the patients tool bar
2. Click on the invoice line for that the patient needs



3. Click on the icon under the transaction window on the right hand side
4. On the screen below select how to would like to give the patient their invoice
   I. Print – this will print at the practice and you can hand it to the patient
   II. Preview – will allow you to view the invoice before printing
   III. Email – will attach the invoice to an email as a PDF
   IV. EasyPost – will send a letter out top the patient.



5. Your estimate will contain the patients name and address and any items which have been charged through under that invoice line.

Mr Notes *Notes
Any House
Any Street
Any Town
Any Country
XXXX XXX

INVOICE

The treatment carried out by Provider For Sundry Sales up to and including 23/03/2020 is detailed below.

DETAILS OF TREATMENT		CHARGES
23/03/20	Exam	

Total £0.00

MANAGING OPEN COTs

Care Manager

You can view a video guide using the link below:

https://www.youtube.com/watch?v=uvpU10fjsdY&t=2s

List Outsanding Treatment report

When to use this report:

It is recommended that this report is run at regular intervals, at least once a month or once a week, for each Provider.

This is used to print a report listing the patients who have:

- Unclaimed complete treatment plans (all items charged but not TC'd)
- Incomplete treatment plans (plans which are partially charged)
- Incomplete treatment plans with uncharged items (plans which have items which are ticked but not charged).
- For these three options, you can include
- All treatment plans (will show all three options above)
- Only plans with completed treatment

> ***NOTE:*** A Course of Treatment/Treatment Plan may have chart items whose planned or completed dates span a range of dates. In the case where some of the chart items have planned or completed dates ***outside*** the date range selected for the report, use the ☑ **Include all other treatment in the same COT/Treatment Plan** checkbox to specify whether those chart items will be included or not.

To run the 'Outstanding Treatment' Report

1. Select Administration > Reports > List Outstanding Treatment:
2. The Sort Patients By option allows the report to sort on a number of criteria:
3. Use the Select Patients field to select or define a query for the patients in the From and To date range.

In the case where some of the chart items have planned or completed dates *outside* this date range, use the ☑ **Include all treatment on matching COTs/Treatment Plan** checkbox to specify whether those chart items will be included in the Report or not.

For example: If you run the report for a date range over the last month with this option de-selected, it will display any COTs *with their information* from the last month only, and any COTs prior to the last month will display as headings only. However, if you select this option it will show those matching COTs prior to this last month *with their treatment item information*, and COTs within the last month also *with their treatment item information*.

TIP: A useful query to use would be for patients with no future appointments booked. That way any patient who appears on the list will either need to be invoiced for completed work or scheduled for another appointment.

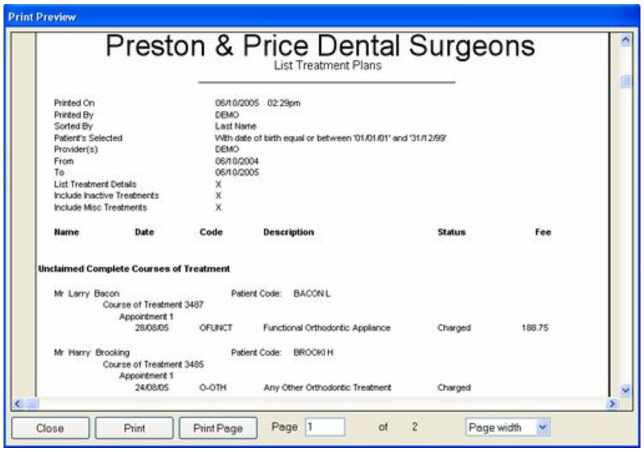
4. Optionally select a **Provider** from the list by clicking in the field and using the button. The report will then print for the selected provider only.
Use the **Multiple** button ito select more than one provider.
5. Alternatively, you can select a **Provider Category** rather than one or more providers.
6. Use the Treatment **From** and **To** dates to specify the date range for the planned or completed treatment.
7. Other options are:

Tick	To
List Treatment Details	Include the Treatment Plan details in the report.
Include Inactive Treatments	Include any treatment that has been marked as inactive.
Include Misc Treatments	Include any miscellaneous treatment carried out.

Report Output

The example below shows an **Outstanding Treatment** report for all patients, with all checkboxes selected. Included in this report are:

- Patients who have had Treatment completed in the last 2 months that was not charged; e.g. the treatment has been saved in the **Chart** tab but the **Charge** button has not been pressed.
- Treatment that remains planned on the patients chart tab.
- Treatment details.



Ideally, the report will be run with each option selected.

For the **Treatments not completed** option, once the list has been printed, where the patient does not have any further appointments they can be contacted and if necessary the Course of Treatment closed and sent to the Payor as incomplete treatment.

For the **Treatments completed but not charged** and the **Treatments completed but not claimed (TCed)** options, there will be duplicates in the report, as TCing treatment also acts as a method of charging. If the treatment has not been TCed then it may not have been charged also.

When selecting these options it may save time when cross-referencing patients to run one of the reports, deal with the patients who appear on the list, and then run the other option separately.

PATIENT COMMUNICATIONS

Presentation Manager

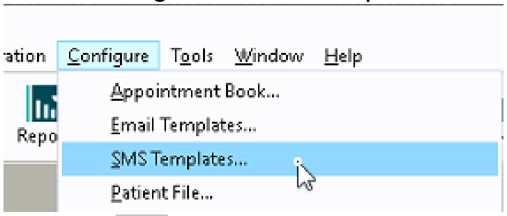
You can view a video guide using the link below:

https://www.youtube.com/watch?v=9hzBacO1VZo&t=7s

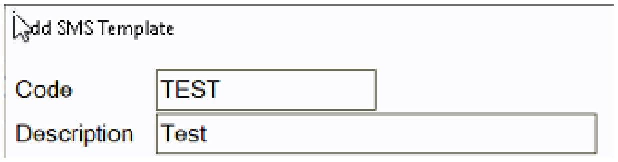
SMS

How to add SMS template

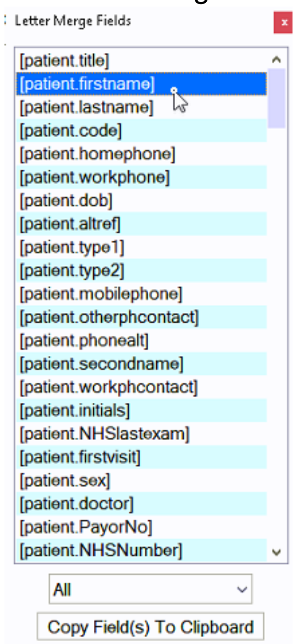
1. Go to Configure > SMS templates



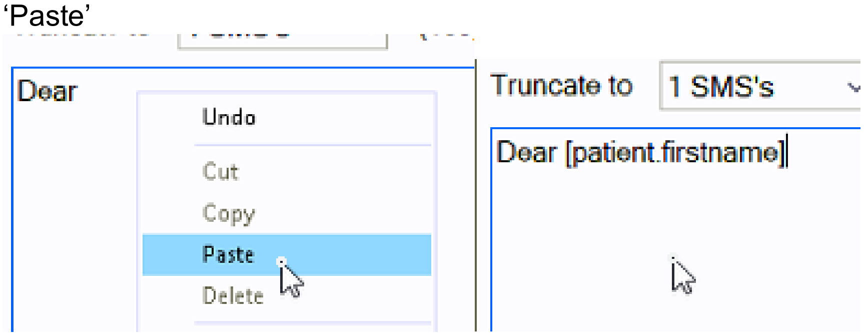
2. Click on  from the toolbar
3. Enter a code and a description. Please note: the code needs to be unique



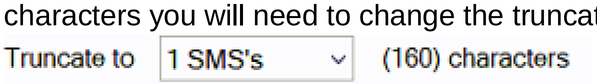
4. Type your message into the available field.
5. To automatically pull information from the patient file click on View Merge Fields at the bottom left of the window and it will open the ‘Letter Merge Fields’ window
6. Select the merge field you need then click on ‘Copy Field(s) to Clipboard’



7. To paste the merge field into the body of your SMS right click in the space and select ‘Paste’



8. A single SMS is 160 characters long – if the template you create is longer than 160 characters you will need to change the truncate option to as many texts as you need.



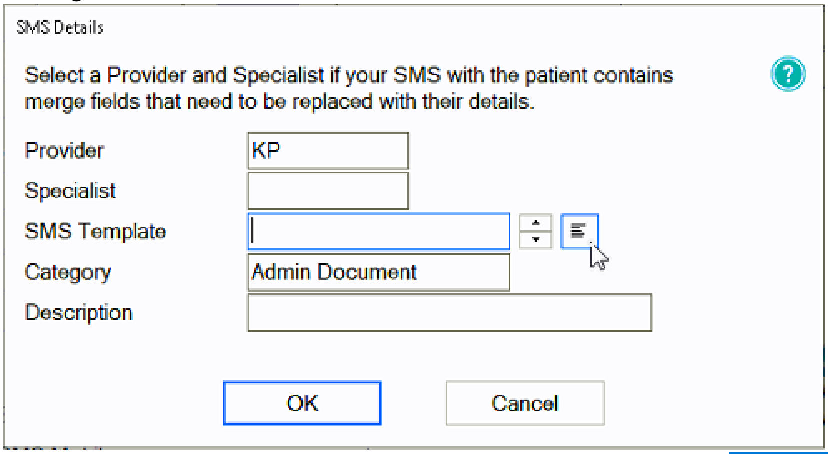
9. Once you have finished your template click OK

How to contact patients by SMS

1. Go to the patients file that you wish to send an SMS to
2. Click on the SMS button on the patients tool bar

If you would like to free type your SMS please go to step 5

3. On the screen below click into the SMS Template field and then click on the list button to the right hand side



4. Select the email template from the list and then click on OK
5. Click OK
6. You will be shown a preview of your SMS – if you have not used a template you will need to type your SMS here
7. Once you are finished click OK and the SMS will go to your patient. Any SMS sent will be stored in the 'Contacts' tab.

Email

How to add email templates

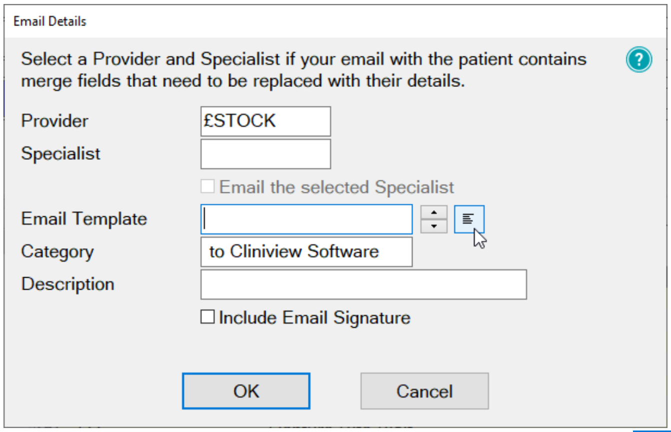
You can view a video guide using the link below:

https://www.youtube.com/watch?v=KgAX2dUrHU8

How to contact patients by email

1. Go to the patients file that you wish to email
2. Click on the  icon on the patients toolbar
   a. *If you would like to free type your email please go to step 5*
3. On the 'Email Details' screen click into the 'Email Template field and then click on the list button to the right hand side

EXACT V13 PATIENT EXPERIENCE

a. 

4. Select the email template from the list and then click on OK
5. Click OK
6. You will be shown a preview of your email – if you have not used a template you will need to type your email here
7. Once you are finished click Send and the email will go to your patient. Any emails sent will be stored in the 'Contacts' tab.

HELPFUL INFORMATION

Who should I contact for help?

General EXACT Queries

Contact the SOEUK Support Desk on 01364 266 800

NHS Queries (PIN Numbers, List Numbers, Transmissions, Regulations)

Contact NHS Switchboard on 0113 825 0000

NHS Local Area Teams

Primary care providers and other NHS organisations can find regional contact details by accessing the link below:

https://www.england.nhs.uk/about/regional-area-teams/

Software of Excellence YouTube Channel

Please use the link below to access the software of excellence YouTube channel for helpful how to videos.

https://www.youtube.com/user/soebestpractice/videos

Accessing the portal

Please use the link below to view a video guide to accessing the Software of Excellence Customer portal

https://www.youtube.com/watch?v=J4h5gNas5Uc