# EXACT PRACTICE MANAGEMENT GUIDE

## Republic of Ireland

Software of Excellence
Medcare South
Bailey Drive
Gillingham Business Park
Gillingham
Kent ME8 0PZ

+44 (0)845 345 5767

Internet E-Mail: support@soeuk.com
Website: https://softwareofexcellence.co.uk/talk-to-an-expert/
Subscribers' Portal: https://portal.softwareofexcellence.com

# Table of Contents

# PROVIDERS PAYOR DETAILS

## Adding Panel Numbers

1. Go to File > Providers
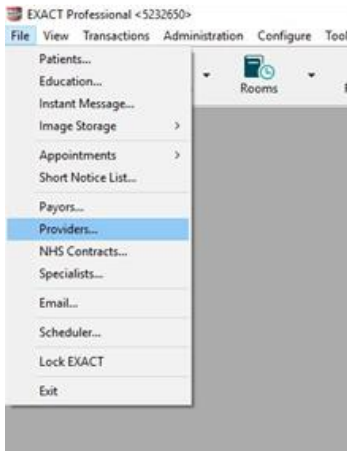


2. Chose the provider you need to add the NHS details for in the code box
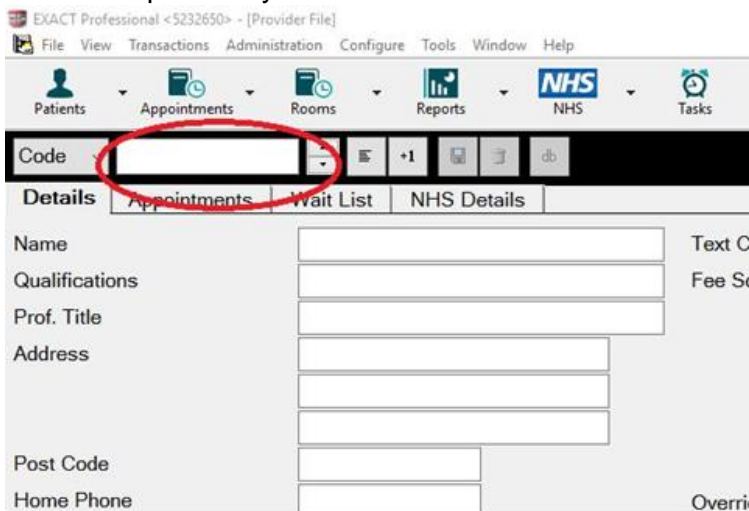


3. On the right hand side of the screen you will see the four options shown below please fill out all that apply.



4. Once you have enter all of the relevant information click on the  icon on the toolbar.

# PAYOR PAYMENTS

## Payor Fee Schedule

GMS and PRSI fees can be amending within Exact;

1.  Click on **File > Payors**
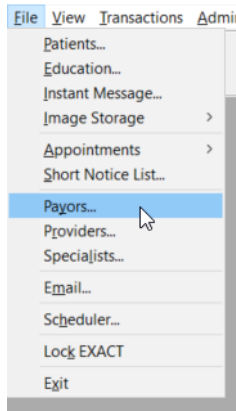
    

2.  Then find which Payor you wish to amend the fees for;

    

3.  Click on the fee schedule box;

    

4.  This will bring you into the list payor fees and will bring up all your service codes. Find which code you wish to amend the fee for, by either scrolling through the list, or by searching in the bottom left corner.

5. Click in the code you want to amend and with GMS where there is only the payor fee to amend if will bring up this box;



6. You can then amend the fee in the payor amount box. With PRSI fees, you can change the Payor amount and also the Patient contribution. When you follow the above steps but in the PRSI payor you will get this box when you click into the service you want to edit;



There is an additional box of **fee,** this is the total amount that you receive for the service being done, so the **patient contribution** and the **payor amount** added together will equal the **total fee**

So using the service above the patient will pay **€40** and you will receive **€31.10** payor contribution, totaling **€71.10** for the total service fee.

# GMS Claim Form

1. Open a GMS COT
2. Charted all the relevant treatment
3. Click on the [icon] icon at the bottom of the COT window.
4. You will then see the 'Treatment Complete screen which will show the GMS Form number. This number should automatically generate from your system numbers



5. Select OK
6. You will then be prompted to print the form



7. The GMS form below will automatically fill with the details from your treatment plan.

# D1 Claim Form (PRSI)
## Printing the form

1. Open a PRSI COT

2. Click on the [icon] icon at the bottom of the COT window.
3. On the screen below select Yes

Print PRSI Form

(?)  Would you like to print this PRSI Form now?

      Yes            No

4. Choose the relevant option if you do not have a duplex printer I would advise to use the first option. Then click on [Print]

PRSI Status

**D1/D2 Form Printing Options**

⦿ Print front, prompt before printing back
○ Print back immediately after front
○ Print front only
○ Print back only

      Print

5. Once the first page is printed you will be prompted to print the second page select Yes

Print PRSI Form

(?)  Insert the 2nd side of the PRSI form. (No to Cancel 2nd Side)

      Yes            No

9

## Page 1

This is to be filled out by the patient. If available the information for the form such as name and address will be pulled through from the patient file.

### DEPARTMENT OF SOCIAL & FAMILY AFFAIRS

### CLAIM FORM FOR DENTAL BENEFIT D1

Please answer all Questions fully and place a tick ☑ in the appropriate boxes

#### PART 1  Details about Yourself

**PLEASE USE BLOCK LETTERS**

Please state your:

PERSONAL PUBLIC SERVICE NUMBER
(PPS No.) same as RSI/TAX NUMBER

| Figures | | | | | Letters | |
|---|---|---|---|---|---|---|

Old Insurance Number
(if you were employed before 1979) _____

Full Name   Mr Notes Notes

Address _____

| | DAY | MONTH | YEAR |
|---|---|---|---|
| Date of Birth | 1 | 1 | 1980 |

Birth Surname _____

Mother's Birth Surname _____

Telephone Number _____

Are you?    Single ☐    Married ☐    Other ☐

Are you in paid employment?    YES ☐    NO ☐

If 'YES' state present
Employer's Name _____

If 'NO' state date you last worked _____

Are you getting any payments from this Department, a Health Board or from any other source?

YES ☐    NO ☐

Type of Payment _____

Claim Number _____

If you are participating in a Scheme, i.e. FÁS, CES, etc. Please state:

Type of Scheme _____

If you attended college in the last two years state dates:

| | MONTH | YEAR | | MONTH | YEAR |
|---|---|---|---|---|---|
| FROM | | | TO | | |

Do you hold a medical card?    YES ☐    NO ☐

#### PART 2  Working in another EEA Country

Did you ever work in the United Kingdom or in any other EEA Country?    YES    NO

If 'YES' state the Country _____

Period of employment in that Country

| | MONTH | YEAR | | MONTH | YEAR |
|---|---|---|---|---|---|
| FROM | | | TO | | |
| FROM | | | TO | | |

#### PART 3  Name your Dentist

If my application is approved, I wish to get my treatment from

Dentist's Name   Dr Mazin Mohamed, BA BDentSC

Address   Unit 16 Block C, Smithfield Market

Smithfield Dublin 7

**PANEL NO.**   8785814V

I understand that s/he must be on the Dental Panel.

I declare that all the details given are true and complete. I understand that I must not change my Dentist during this course of treatment without the consent of the Department.

SIGNED _____   DATE   24/03/20

#### DECLARATION

To be signed by you when treatment is finished

I declare that the treatment outlined overleaf has been carried out to my satisfaction.

SIGNED _____   DATE _____

To be signed by your Dentist

Complete and return within one month of finishing treatment.

I have completed the treatment in this case.

I claim payment of € _____

SIGNED _____   DATE _____

PANEL NO. _____

DATA PROTECTION AND FREEDOM OF INFORMATION. The Department of Social and Family Affairs will treat all the information and personal data which you give as confidential. It will only be disclosed to other bodies in accordance with Social Welfare law and it will be subject to the Department's responsibilities under the Data Protection Act and Freedom of Information Act.

## Part 2

This is to be filled out by you

Insert in the chart the number corresponding to any natural teeth missing from the mouth on examination.

| A | | B |
|---|---|---|
| D | | C |

**REPORT**
Clinical necessity, where required for specific treatments should be entered here.

| | | | DAY | MONTH | YEAR | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 0 | 2 | 0 | | | | History, Examination, Diagnosis, Report & X-Rays | | | € | 33.00 | | | |
| 0 | 3 | 0 | Scale & Polish (including mild gum treatment) | | | | | | € | 0.00 | | | |
| 0 | 5 | 1 | Protracted Gum Treatment | | | | | | € | 0.00 | | | |

| | | | A | | | B | Single Compound/ Amalgam Fillings | € | 0.00 | |
|---|---|---|---|---|---|---|---|---|---|---|
| 0 | 7 | 1 | D | | | C | | | | |
| 0 | 7 | 4 | A | | | B | Composite Anterior Fillings | € | 0.00 | Alternative Treatment |
| | | | D | | | C | | | | |
| 0 | 7 | 5 | A | | | B | Pin Retained Fillings | € | 0.00 | |
| | | | D | | | C | | | | |
| 0 | 7 | 8 | A | | | B | Angle/ Incisal Tip Fillings | € | 0.00 | |
| | | | D | | | C | | | | |
| 0 | 9 | 1 | A | | | B | Extractions | € | 0.00 | |
| | | | D | | | C | | | | |
| 0 | 8 | 0 | A | | | B | Endodontic Treatment | € | 0.00 | TOTAL FEE CLAIMED (This fee does not include the claimant's portion of the cost, if any.) |
| | | | D | | | C | | | | |
| 2 | 1 | 0 | A | | | B | Apicectomy | € | 0.00 | |
| | | | D | | | C | | | | |
| 1 | 2 | 2 | A | | | B | Partial Denture | € | 0.00 | € 75.00 |
| | | | D | | | C | | | | |
| 1 | 2 | 3 | Full Upper Denture | 0.00 | 1 | 3 | | Denture Relines Upper or Lower | € | 0.00 | |
| 1 | 2 | 4 | Full Lower Denture | 0.00 | 1 | 3 | 3 | Denture Relines Upper and Lower | € | 0.00 | |
| 1 | 2 | 5 | Full Upper & Lower Denture | 0.00 | 1 | 4 | 0 | Denture Repairs | € | 0.00 | Claimant's portion of set fee items |
| 9 | 9 | 0 | Miscellaneous Items: Please state treatment code(s) and tooth reference (s) 15.00  42.00 Clean (PRSI) | | | | | | € | 42.00 | € 15.00 |

I accept this Dental Letter in accordance with the provisions of the Dental Agreement. I have examined the person named overleaf and have entered details above of all necessary treatment and its cost.

Signed: _____ Panel No.: 8785814V  Date: 24/03/20

EXACT V13 PATIENT EXPERIENCE

# Processing Payor Payments

1. Click onto **File > Payors**
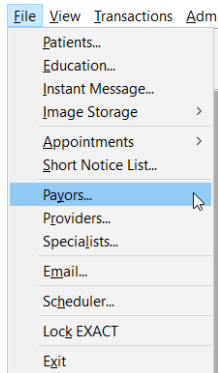


2. Select the Payor you want to process the payments for;



3. Then press on the € sign, this then brings up with the **view payor transaction** screen;



4. Click on Payment on the bottom options

5. On the box that appears, select the provider and date range for the payments you want to view, and select **View Claims**
6. This will list the payor payments you are expecting, if they are correct and match, tick the box to the left of the claim so a tick box appears. **Click process payment**;



7. This will then bring up pop-up asking you to select payment method – usually BACS GMS and click **Process**.
8. If the payment is wrong or different to what you have received – double click on the claim and make the adjustment;



9. Then process by ticking it like a normal payment and **process payment**

Please note: when choosing a date range (steps 4/5) this date is taken from the date the COT is opened and **not** the date the treatment is planned or completed. As such if a COT is opened in January then left without charting and then treatment is added to it in July this COT will show under the January date range.

# How to Resubmit
You can view a video guide using the link below:

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

# MED2

## Setting Med2 Type on Services

The Med2 Type should already be set on services within Exact if you have added a new service and have not added the Med2 type, it will not appear on the Med2 form when printing this for a patient. To set this up complete the following steps:

1. Go to Configure > Services
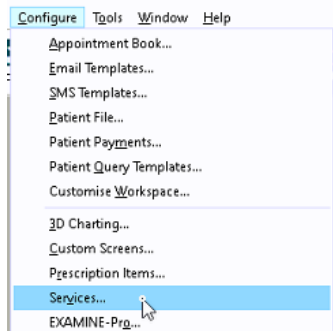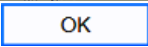


2. Locate the service you wish to set the type for – you can do this by scrolling through the service list or entering the services code into the bottom left hand corner
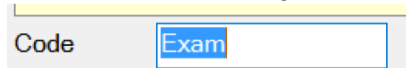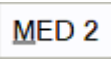


3. Double click on the service
4. Choose the correct Med2 type from the drop down list
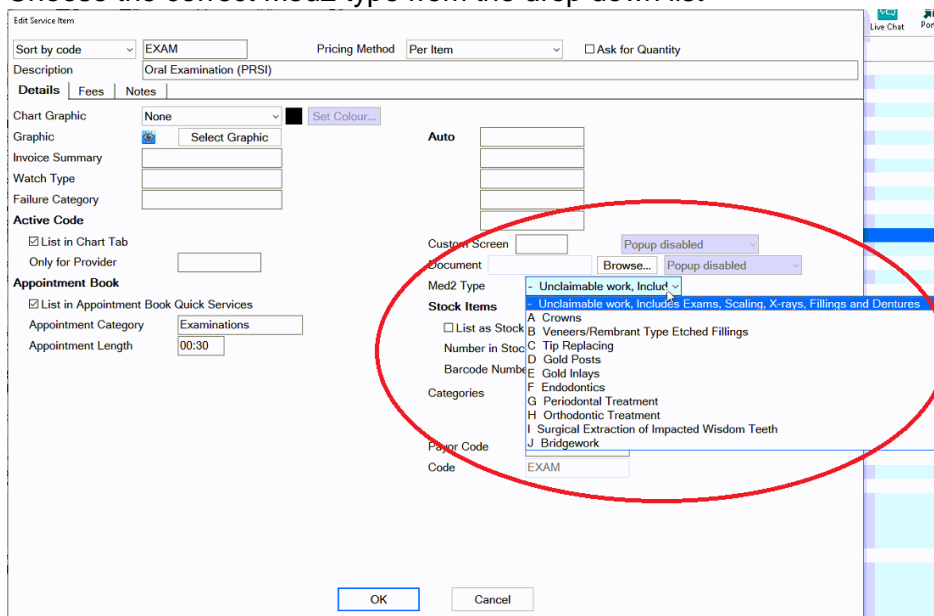


5. Select **OK**
6. Repeat for any additional services you need to set the Med2 Type for.

## Printing the Med2 form

1. Click on the [€] from the patients tool bar

2. Click on [MED 2] on the bottom right hand side of the screen



3. Set the date range on the screen below



4. You can now Print the form or select Preview to view it first

# USER SETTINGS

## Adjusting Security

A users security defines what they have the ability to do one the system, these are divided into groups that users are a part of. If you adjust a security setting it will amend it for **all users in that group. You will need to be a super user or admin user to amend security groups**

1. First to find out what security group someone is in, go into **configure > user settings**
2. Find the user you want to look at and you can then see the security settings underneath the users name and password;
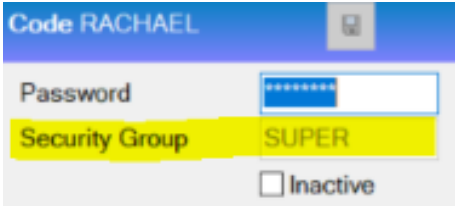


3. Then go into **Configure > Security**
4. Using the **Code** section find the group you want to amend. Everyone listed underneath is in this security group and everything ticked it what they have the ability to do;
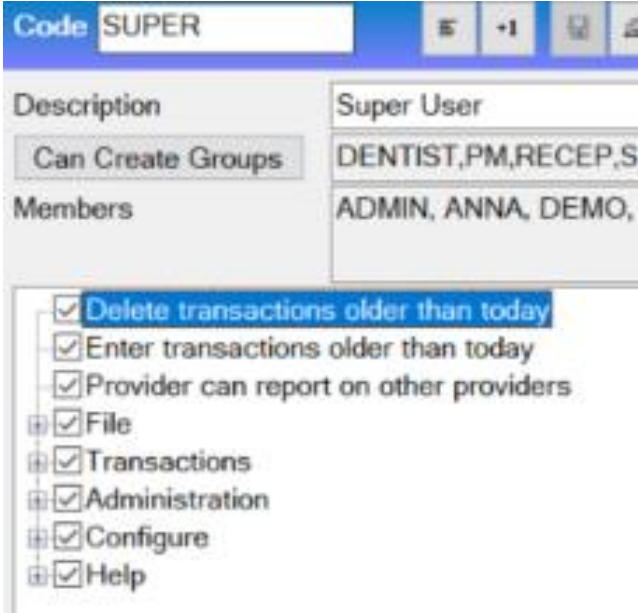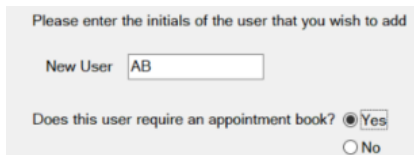


5. You can then click in these subsections and amend the security settings for that group.

# Adding New Users

1. To add a new user or Provider into Exact you must first click on **configure > Add User / Provider;**
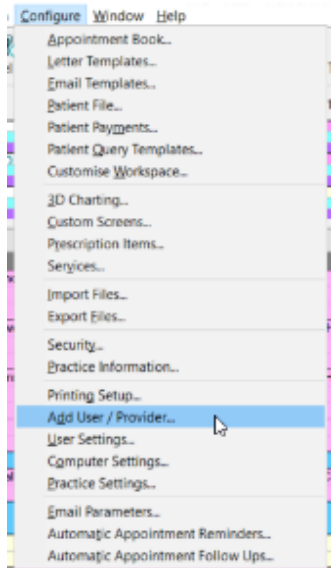


2. Then on the first window on the Add User Wizard, put in the way you want the user to appear on the appointment book and user name when logging in.
3. When selecting if they require an appointment book, if they are a provider but aren't starting yet, still click yes – this is what makes them a provider and not an admin user.



4. Click **Next >** and the next screen will want you to select the security group that the provider requires and add in a temporary password for them to just get logged in (make sure you tick **"User must change password at next login"**

5. Press **Next>** and the next page will be for any additional details you wish to add such a the providers name and qualifications. This is the section where you fill in the provider type;



What kind of work does this provider do?

Provider Type        Dentist   ⌄

6. Press **Next >** and this page you can add in the providers address / telephone numbers and an email address if they would like to receive an email every time an appointment is made with them.
7. Press **Next >** and this section is where you can pick the providers appointment book colour and text colour.
8. Press **Next >** where you will be asked to tick which recall type the provider will set, either dentist or hygienist
9. Press **Next >** and you will be prompted to add in the providers working rota, make sure you start this as the correct date that the provider is starting with you.



| Rota Length (Weeks) | | 1 ⌄ | | | |
| Start Date | | 18/02/2020 | ⌄ | Tue | |
| Extend to | | 18/02/2024 | ⌄ | Sun | |

**Week 1**

| Starting: | Works On: | Day Start | Day End | ☑ Lunch | Length |
|---|---|---|---|---|---|
| | ☑ Mon | 08:00am | 05:00pm | 01:00pm | 01:00 |
| 18/02/2020 | ☑ Tue | 08:00am | 05:00pm | 01:00pm | 01:00 |
| 19/02/2020 | ☑ Wed | 08:00am | 05:00pm | 01:00pm | 01:00 |
| 20/02/2020 | ☑ Thu | 08:00am | 05:00pm | 01:00pm | 01:00 |
| 21/02/2020 | ☑ Fri | 08:00am | 05:00pm | 01:00pm | 01:00 |
| 22/02/2020 | ☐ Sat | | | | |
| 23/02/2020 | ☐ Sun | | | | |

10. The next two pages will asked you which appointment book (if you have more than one) that you want the provider to show in and how they want their stickman (patient at the door) settings to show.
11. Press **Next >** and this is where you can add in the provider NHS details and press **Finish,** this will then add the new provider to the diary and open their rota from the dates you selected.

# REPORTING

## Adding Reports to Favourites

When you are in Exact Reports you have the ability to add reports that you use frequently into your favourites tab, this will be for the user that is currently logged in and each user will have to add their own favourites in.

1. Go into reports and highlight the report you want to add into your favourites, and press the star icon in the bottom right hand corner;



2. You can then choose or add the group as monthly / weekly or daily, depending on the frequency that you run it. With a description if you would like.



3. You will then be able to fill out the relevant fields that you use when running the report, like performer and date ranges.



4. This will then save into the favorites tab to be run easily with the prefilled dates / performers in place

# Appointment Analysis Report

This report is used to print a summary of appointments, and should be run on a regular basis, usually weekly. As the information is taken from the appointment book, it is important to ensure the status of each appointment is accurate, by ensuring patients are being checked as having arrived, being moved into the chair, appointment complete, etc. This is accomplished by using the 'Arrivals Door' feature.



1. Leave the **Provider(s)** field blank to summarise the Appointments for the whole practice.

   An individual provider can be selected from a list by using either the ▲▼ button or the ≡ button.

2. Clicking the **Multiple** button will allow a combination of providers to be selected.

3. The 'From' and 'To' Date fields are used to define the date range for the report.

4. Other fields / options:

| Option | Field |
|---|---|
| **Breakdown by Providers** | This will separate the report into sections broken out by provider, with subtotals for each day. |
| **Use Rosters** | This will show any rostered time that is being used within the appointment book. |
| **Daily, Weekly or Monthly Summary** | This report can be summarised by day, week or month. Select the option required by clicking on the appropriate option. |

The report includes the following:

1. Number of failed or cancelled appointments
2. Number of new patients
3. Number of patients seen
4. Estimated value of treatments. In order for the value to appear, treatment must be book from planned treatment, or the booked service must have a value associated with it (set under Configure > Services).
5. Average wait time (from the 'Arrivals door').

# Open Transaction Reconciliation

The Open Transaction Reconciliation identifies money that could be paid to a provider but it is currently unallocated. The report will show all payments and receipts that have been entered into Exact that are unallocated from the beginning of use.

The debit column shows any invoice that a payment has not been allocated to. The credit column shows any payment that has not been allocated to an invoice, the amount of the payment and the amount left of that payment that can be allocated (if this is less that the total amount of the payment it means it has been partially allocated to another invoice.)

**It is best to run this report before running the allocated payments report to ensure everything is allocated**. When the payments are allocated together you will need to re-run the allocated payments report to view the updated totals.

# Manually Adjusting Allocations

1. Go to the patients £ and find the selected invoices/payments that are allocated incorrectly.
2. Highlight one of the invoices and select the 'i' button on the bottom right corner of the transactions screen.
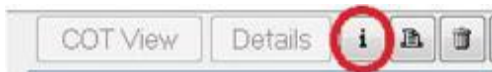


3. This will then show a screen showing what allocations are on this invoice, in this screen you highlight the allocations and click the dustbin icon in the bottom right of this screen, this will remove the allocation from that invoice.
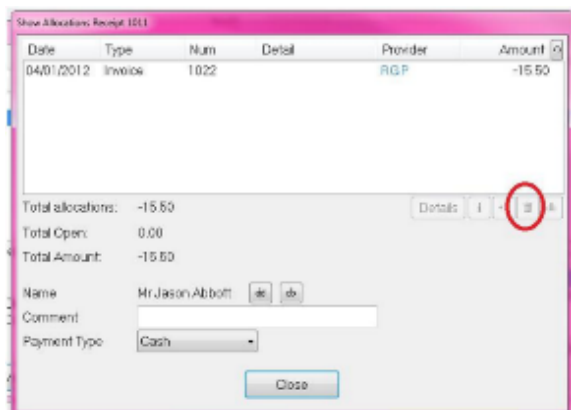


4. Go through all of the invoices/payments that have incorrect allocations and do the same process as above for them. Then once all of the allocations are removed click on the allocate button on the transactions screen.
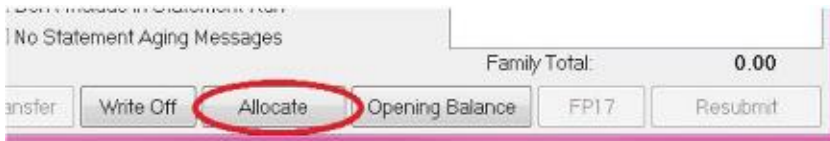
5.  This will then give you a screen showing the invoices on the top that require an allocation and on the bottom the payments that have been made to allocate to the invoice.
6.  Go through each invoice and select the payment to allocate to it and click the allocate button.
7.  Continue manually allocating the invoices until they are all allocated
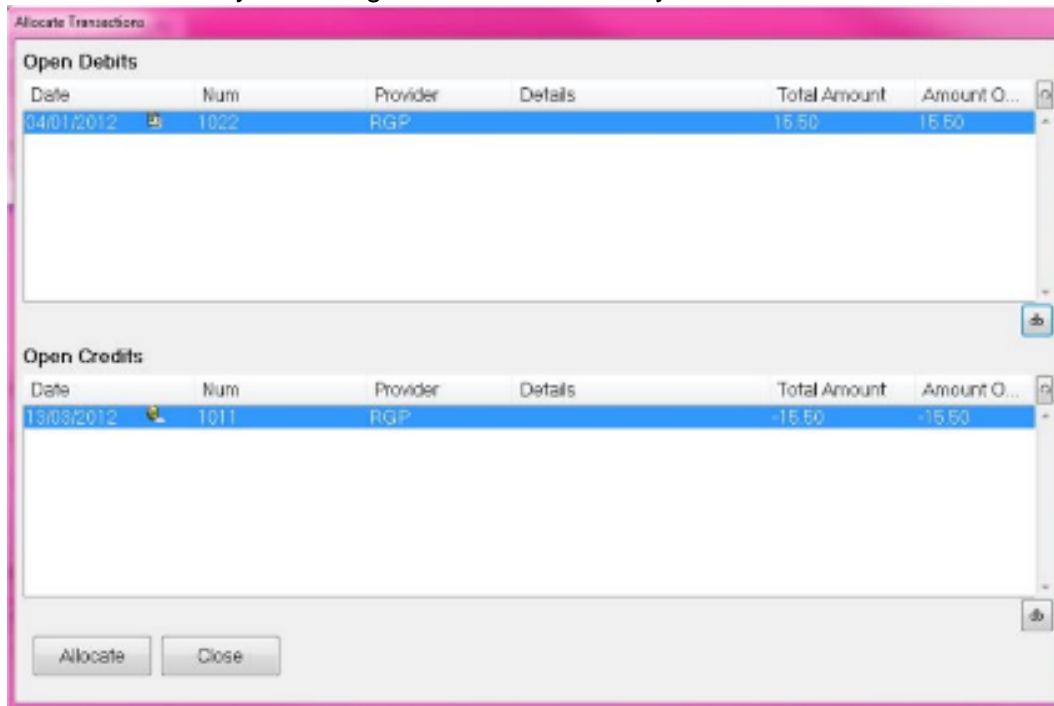


## Allocated Payments Report

This report shows receipts (payments) allocated to invoices. Use it to show all payments that have been allocated during the specified period, summarised by Provider and Payor, in order to pay Providers for work that they have done that has been invoiced to and paid by the patient. The report summarises by Treatment Payor Type, which gives practices the choice to pay Providers at different percentage rates for treatment completed under different Payor Types. The option is also available to pay on advanced payments which are deposits. The report has a **detailed** section that shows more information per payment than is shown on the summary screen, which enables a practice to access more detail.

## Simple Summary

The report will include a summary of the total allocated for each provider selected, by payor.

The summary is broken down by Provider into allocations and advances.

All payor types are listed for each Provider. For each of these payor types it shows any adjustments, payor invoices, patient invoices, and a total, for both the allocated and advance payment sections of the summary.

## Summarise by Patient's Dentist

The report will include a summary of payments for work done for other Providers' patients. This may be useful if a dentist has covered for sickness or to see how many Providers are referring to a hygienist.
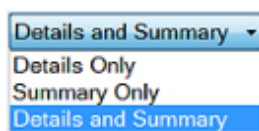
Both the detail and summary sections are the same as for the Simple Summary option above, except there is a Pats Prov. column that in each of the detail lines shows who the patients Provider was.

## Summarise by Who Got Paid

This shows the allocations to Providers to whom the payments were made.

The summary section is the same as the Simple Summary option above, except that it has an extra column for Trns Provider and the report is broken down by the Provider to whom the payment for treatment was allocated, and shows under this the Providers who were actually paid for the treatment. It may include Providers who were not included in the selection criteria, if those Providers made or received allocations from one of the specified Providers.
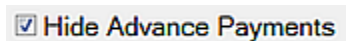
For the report layout, specify either Details, Summary, or Details and Summary in the printout:

Details and Summary ▾
Details Only
Summary Only
Details and Summary

In this report you will need to decide if you are paying with advanced payments included (deposits are paid to the dentist) or not. If you are only paying the dentists for work completed click on 'Hide Advanced Payments'

Option to hide advance payments:

☑ Hide Advance Payments

Option to include NHS and other Payor Payments:

☑ Include NHS and Other Payor Payments

### Why is there a negative figure in the Advance Payment Column?

A patient has made a payment under Dentist A's name. Part of this payment has been allocated to an invoice that Dentist A has carried out today. The other part has been paid in Advance for treatment the patient is going to have done in the future.

In this scenario when you run the allocated payment report there will be a positive figure under the Advanced Payment Column.

The patient returns a month later for the rest of their treatment. This treatment has been carried out by Dentist B. The payment that was paid in the previous month under Dentist A has now been partly allocated to Dentist B too.

When you run the Allocated Payment Report now for Dentist A you will see that there is a negative figure under the Advanced Payment Column because this amount has been allocated to Dentist B not A.

### Which total should I pay on?

You have 2 options on which total to pay your associates on and this is individual to each practice.

1. Total Column - The total column is the total number of allocations including any adjustments
2. Patient Invoice - This column ONLY shows Invoices that have been paid - for example work done. This does not include any adjustments

The resulting report shows:

1. Total Current Receipts
2. Total Receipts Allocated to Invoices (adjustments, payor invoices and patient invoices)
3. Total Unallocated Receipts (advance payments)
4. Total Extra Items sold.

## Managing Advanced Payments

If you are collecting advanced payments you will need to have 'prompt for payor on allocated' set up so that the reception can select whether this is an NHS payment or any other payor. You can do this using the steps below:
Configuration option to prompt users to specify a Payor when payments are unallocated:

Configure > Patient Payments ☑ Prompt for payor on unallocated

# List Outstanding 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.

## Purpose:

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. 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 TC'd 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.

# Stock Sales Report

This report is used to print a list of the stock sales for a practice over a period of time. The resulting report shows the following:

- Open stock
- Number sold per item
- Stock on hand
- Unit Cost
- Total value sold.

## Configuration

1. In the 'Configure' menu, click on 'Services'.
2. Double-click each service that is to be set up as a stock item, to open the 'Edit Service Item' window.
3. Make sure there is a tick in the 'List as Stock Item' checkbox: ☑List as Stock Item
1. You can also enter the appropriate quantity in the "Number in stock" field, and in the "Full Stock Number" field.
4. Save the stock item record.

## To Run the 'Stock Sales' Report

1. From the 'Administration' menu, click 'Reports' and select 'Stock Sales':
2. The 'From' and 'To' Dates can be changed to print the 'Daily Activity' report for a previous date or date range. If a date range is selected a report is printed for each day.
3. The level of detail required is selected by ticking the check boxes.

| Tick | To show |
|------|---------|
| Show Stock Summary | Opening and current stock. |
| Show All Stock Items | A list of the stock items sold. |
| Summary Provider Sales | Breakdown of stock sales by provider. |

# Daily Activity

The 'Daily Activity' report is a record of treatment (planned, completed, invoiced) and payments received for the practice on a given day. The Daily Activity report can be used as a paper back-up. This report should be run daily for each provider and can also be run for the whole practice.

The 'Daily Activity' report shows for each patient seen 'today':
1. Their appointment time and length
2. The time they arrived
3. Their account balance at the end of the day
4. Treatment planned, completed and invoiced
5. Complete treatment details
6. Money received and any discount given
7. The patient's next appointment date and time.

## Running the Report

The level of detail required is selected by ticking the check boxes:

| Tick | To show |
|---|---|
| Show Patients for Payor Payments | When payor payments are made it shows the patients that were paid for. |
| Show Invoice Comments | Prints any notes entered in the invoice notes area of a service within the 'Chart' tab. |
| Summary Only | Prints totals only. |
| | Exports this report to a file called daysheetDDMMCCYY.txt. The file is saved to the C:\ drive as a comma-delimited text file. |

## Report Output

The example below shows a 'Daily Activity' report with the 'Show Patients for Payor Payments' and 'Show Invoice Comments' options selected:

1.    The report displays the data in columns as follows:

| | |
|---|---|
| **Time** | The time of the patient's appointment in the appointment book. |
| **Arrived** | The time that the patient was marked as arriving in the appointment book. |
| **Length** | The length of the patient's appointment. |
| **Name** | The patient's name. This section also shows detail of; Invoices, Receipts, Allocations and Treatment. |
| **Balance** | Shows if the patient has an outstanding balance, and if so shows the amount outstanding. |
| **Planned** | Details any work that was planned on the date, i.e. if a filling is added onto a treatment plan to be done at a future appointment. The fee shown is 100% of any Payor-covered fee. |
| **Complete** | Details any treatment that was completed on the date, this also shows the 100% Payor-covered fee. |
| **Invoiced** | This is divided further to show the amount invoiced to the Payor and patient. |
| **Received** | Shows payments that have been received. |
| **Discounts** | Details any discounts that may have been applied on the date. |
| **Invoice Adjust** | Details any adjustments that may have been made to an invoice on the date. |
| **Receipt Adjust** | Details any adjustments that may have been made to a receipt on the date. |

2.    Information for treatment for people without appointments (unplanned work) is included at the end of the report.

*Please use this report alongside your cashing up to keep track of the payor amounts that you are claiming on a day by day basis.*

# MANAGING LAB WORK IN EXACT
## Configuring Lab Work Done/Due Reports
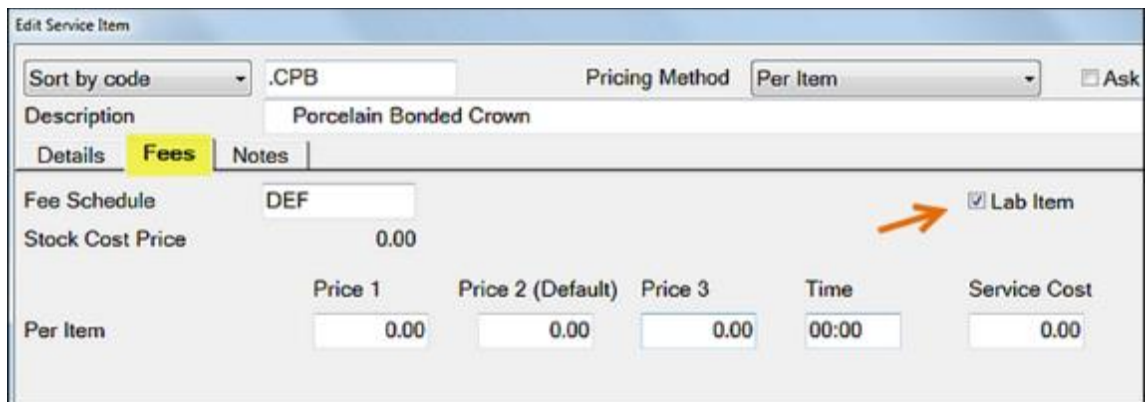
### Setting up your lab companies

1. Go to File > Specialists

2. Click **+1** located at the top of the screen - this will bring up an 'add specialist' box
3. Complete the details as specified (how much information is entered is your choice)

4. Tick the 'Lab' box ☑ Lab - located on the bottom right hand side of the window
5. Click OK
Repeat this for each Lab you need to add

### Setting up Services as lab items

1. Select Configure > Services:
2. Double-click the service to open the Edit Service Item window.
3. Select the Fees tab and tick the box for Lab item:



4. Click OK to close this window.
5. Set up the laboratories that are used as follows:
   a. Select File > Specialists.
   b. Click the +1 button to open the Add Specialist window:
   c. Enter a Code, and a description for the code in the First name field, then enter as much information as required.
   d. Recommended: an address, phone number and e-mail address.
   e. Be sure to check the Lab checkbox.
   f. Click OK.
   g. Repeat the above procedure until you have entered all laboratories' details.

h. If entering the service cost once the treatment has been charged or TC'd, click the History ⬛H button within the Chart tab to view the tooth history:
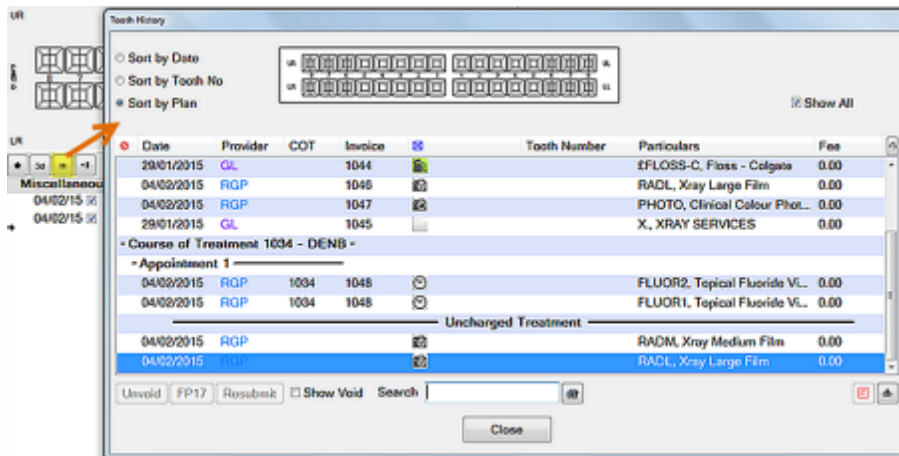


6. Double-click on the service item to enter a service cost for. You will see that the service cost is the only field available for editing. Enter the cost and click 'Close'.



7. With both the service configured and the lab details set up, the next time the service is charted, you will be prompted for a lab and due date.

MLAB Laboratory and date

Enter the name of the laboratory the work is going to and the date at which the work is expected back.

Laboratory Code: DENTECH

Expected Date: 28/02/2020

Service Cost: 0.00

OK

8. Select the lab you wish to use by choosing a laboratory from the list  or by using the  button.
9. Select the date the lab work is due back and click 'OK'.
10. When the lab item arrives, double-click on the appropriate service item and enter the cost of the lab item.

# Lab Work Due Report

This report is used to print a list of patients who have pending lab work currently listed against their patient record.

For the 'Lab Work Due' report to run effectively, initially a certain amount of configuration is required to set up the laboratories that are used by the practice and set a prompt against the services that require lab work.

## To Run the Lab Work Due Report

1. Select Administration > Reports and select Lab Work Due:
2. Use the From and To date fields to define the date range for the report.

Print Preview example:



## NHS England
### Lab Work Due

| | |
|---|---|
| Printed On | 17-07-2018  11:12 |
| Printed By | SOEUK |
| From | 17-07-2010 |
| To | 17-07-2018 |

| Date | Lab Code | Name | Phone | Patient Name | Service Code | Lab Fee |
|---|---|---|---|---|---|---|
| 14-04-14 | TEST3 | | | Sevelda  Rottooth | BNDN/PREC | 0.00 |

--End Of Report--

Report fields include: Date, Lab Code, Name, Phone, Patient Name, Service Code, Lab Fee.

# Lab Work Done Report

This report is used to print a list of patients who have lab work currently listed against their patient record (i.e., laboratory work has been done for them recently)

For the report to run effectively, initially a certain amount of configuration is required to set up the laboratories that are used by the practice and set a prompt against the services that require lab work. Once this has been done, then both lab work done and lab work due can be reported.

## To 'Run the Lab Work Done' Report

1. From the 'Administration' menu, click 'Reports' and select 'Lab Work Done':
2. 
3. You can report lab work done for all providers by leaving the **Provider(s)** field blank, otherwise enter or select a provider's name. To report on more than one provider, click the Multiple button then select the providers required.
4. Alternatively, you can select providers who belong to a particular Provider Category; leave the **Provider(s)** field blank, then enter/select a Provider Category.
5. To choose patients with a particular Payor, enter/select the appropriate Payor code.
6. The 'Summary Only' checkbox is used to limit the report to summary only: details are omitted.
7. The 'From' and 'To' date fields are used to define the date range for the report.

---

### NHS England
#### Lab Work Done

| | |
|---|---|
| Printed On | 17-07-2018   10:57 |
| Printed By | SOEUK |
| Provider(s) | All Providers (CONTRACT, DENTIST, DN, DO, DS, FRAN, GH, HS, HYG, IT, KA, KS, NJ, PD, PN, RJ, SA, THERAPIST, VDS, VS, ZH, £STOCK) |
| Payor | |
| Summary Only | |
| From | 17-07-2010 |
| To | 17-07-2018 |

| Date | Provider | Payor | Lab Code | Patient | Service | Cost |
|---|---|---|---|---|---|---|
| 08-11-11 | CONV | Private | | Mr Orcslayer | Bonded Full or Jacket Crown Non-prec | 0.00 |
| 08-11-11 | CONV | Private | | Mr Orcslayer | Bonded Full or Jacket Crown Non-prec | 0.00 |
| 08-11-11 | CONV | Private | | Mrs Rotmouth | Bonded Full or Jacket Crown Non-prec | 0.00 |
| 18-11-11 | SA | NHS | | Miss Sundpate | Bonded Full or Jacket Crown Non-prec | 0.00 |
| 12-12-11 | SA | NHS | | Mrs Owlhoot | Bonded Full or Jacket Crown Non-prec | 0.00 |
| 16-12-11 | SA | NHS | | Mrs Beasthunter | Bonded Full or Jacket Crown Non-prec | 0.00 |
| 12-01-12 | RJ | NHS | | Mrs Brinorhin | Bonded Full or Jacket Crown Non-prec | 0.00 |
| 12-01-12 | RJ | NHS | | Mrs Anwar | Bonded Full or Jacket Crown Non-prec | 0.00 |

**Summary**

| By Provider | Name | # Items | Cost |
|---|---|---|---|
| | CONV | 3 | 0.00 |
| | SA | 3 | 0.00 |
| | RJ | 2 | 0.00 |

| By Service | Name | # Items | Cost |
|---|---|---|---|
| | Bonded Full or Jacket Crown Non-prec | 8 | 0.00 |

| By Payor | Name | # Items | Cost |
|---|---|---|---|
| | Private | 3 | 0.00 |
| | NHS | 5 | 0.00 |
| | **Total** | **8** | **0.00** |

--End Of Report--

EXACT V13
PATIENT EXPERIENCE

# MANAGING WHITE SPACE

## Care Manager

Please use the link below to access a video guide for using Exact's Care Manager

https://www.youtube.com/watch?v=uvpU10fjsdY

## Recalls

### Monitoring the graphic display

This is a Live, real time display, so if you change a recall date, the list updates immediately. You can double-click any month for a detailed Month View.

The main screen displays figures and a colour graphical display per month:
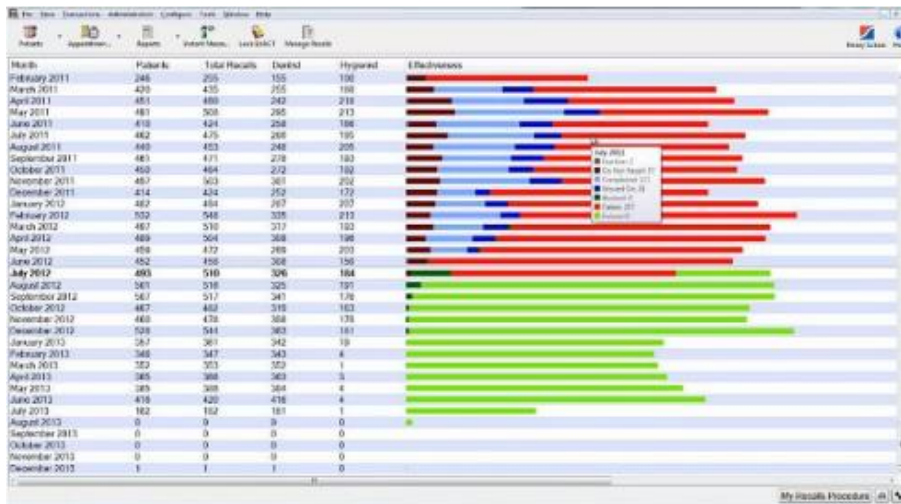


By default the current month is identified in bold:



Detail:



| Month | Patients | Total Recalls | Dentist | Hygienist | Effectiveness |
|---|---|---|---|---|---|
| August 2011 | 440 | 453 | 248 | 205 | |
| September 2011 | 461 | 471 | 278 | 193 | |
| October 2011 | 450 | 464 | 272 | 192 | |
| November 2011 | 497 | 503 | 301 | 202 | |
| December 2011 | 414 | 424 | 252 | 172 | |
| January 2012 | 482 | 494 | 287 | 207 | |
| February 2012 | 532 | 548 | 335 | 213 | |
| March 2012 | 497 | 510 | 317 | 193 | |

34

For each month you can see numbers for Patients, the Total Recalls, and the Total figure split between Dentist and Hygienist.

Note that Therapist recalls could constitute part of either the Dentist or the Hygienist figures, depending how you have configured the Recall Manager.

The Effectiveness graphic display has significant usage of colour, and you can mouse over any line to see a detailed tooltip breakdown of recall types. See Interpreting the Effectiveness display

## Interpreting the colour display

Recall Manager provides automated, live, real time status information. The data in the graphical display is Live, so as you change recall dates in EXACT, it updates instantly, providing a visual snapshot of your recall effectiveness at any moment:

**Because recalls are a critical element to the success of most dental practices, this display can be used as an instant snapshot of business health. Over time you can use it as a dynamic barometer to gauge the effectiveness of your recall policies.**

For example, the predominance of red in this screen would be worrying:



Roll over any graph area for tooltip Effectiveness statistics display:



| Colour | | Representing | Good or bad Indicator? |
|---|---|---|---|
| ■ | Dark green | **Booked:** Patients with recalls whose appointments have been booked. | **Committed business** - this is the best recall status. The more dark green in the display, the better. |
| ■ | Light green | **Future:** Patients with recalls in the future who do not have appointments. | **Still good.** Patients remain as likely revenue for the future. |
| ■ | Light blue | **Completed:** Patients who completed treatment. | Indicates **work done**. |

| | | | |
|---|---|---|---|
| Dark blue | **Moved On:** Patients with appointments that have been postponed. | **Okay.** "The appointment did not happen, but we haven't lost them yet; they are still in the system." |
| Grey | **Inactive:** patients who are permanently lost to the Practice. | **Lost** - there will be no further business from these patients. |
| Dark red | **Do not recall:** whether due to a patient decision or a Provider decision. | **Not lost just yet.** We will not recall them, but these patients may still choose to come back for further treatment. |
| Red | **Failures:** Patients who failed to be recalled, with no further planned recalls or appointment bookings. | **"The life blood of the Practice draining away".** These patients were allowed to walk away. **NOTE:** The Recall Display should not show much red. If the Practice hasn't seen patients for a few years, or if they are otherwise lost to the Practice, they should either be de-activated (grey status), or the Practice should have a marketing drive to bring them back; they should not be left at "red" status. |

If your appointment book is showing a lot of white space it would be helpful to look at patients that have failed their recall.

# Old UDA/UOA Report

Shows UDAs/UOAs claimed and completed over time, grouped by the date of TC.

From the reports list select the performers required for the report, can use Multiple to select specific providers. (Leaving blank will print the report for all providers in the practice)

- The report is run per contract you have entered in Exact
- You can select to show detail which will give the patient name and the COT number.
- The report can be run to group daily, weekly or monthly.

```
Performer ZH
Date From                    Days              Target      Claimed    Confirmed
01-04-14                      30                141.51        0.00         0.00
01-05-14                      31                113.21        0.00         0.00
01-06-14                      30                113.21        0.00         0.00
01-07-14                      31                141.51        0.00         0.00
01-08-14                      31                113.21        0.00         0.00
01-09-14                      30                141.51        0.00         0.00
01-10-14                      31                113.21        0.00         0.00
01-11-14                      30                113.21        0.00         0.00
01-12-14                      31                141.51        0.00         0.00
01-01-15                      31                113.21        0.00         0.00
01-02-15                      28                113.21        0.00         0.00
01-03-15                      31                141.51        0.00         0.00
Total for Performer ZH       365               1500.00       0.00         0.00

Total for contract   5664700001 (UDA) effective 01-04-2014 - 31-03-2015    14099.00    14.00    0.00

                                --End Of Report--
```

The report will show the date from which will be the first of the month if run monthly or every seven days from the first day the contract started. It will give the details of how many days are in that period.

The target column will show the providers target as of that period/date. Then the claimed column shows how many UDA's have been TC'd through Exact and the confirmed column shows how many UDA's were confirmed by the board.

# Short Notice List

The Short Notice List allows you to collate a list of patients who would like to be notified of sooner appointments or of any opening slots if they have had to cancel. One a space appears you will be able to hover over the gap in the appointment book and click on the puzzle piece icon to alert patients on any appointment spaces that become available.

## Enabling the Short Notice List

If the short notice list is not visible on the appointment book you may need to turn this on. In order to do this you will need to be logged in as an administrator or SUPER user.

1. Go to configure > practice settings
2. Add a tick in the 'Enable Short Notice List' box located at the bottom left hand side.

## Adding the Short Notice List tab

After you have ensured the Short Notice List is enabled you may need to add it to your appointment book.

1. Click on the spanner  at the bottom of the provider column window
2. Put a tick in 'Select tabs for your activity bar
3. Select 'Next >' twice
4. Select 'Short Notice List' in the 'Available Tabs' box then click on the  to move it across into the 'Selected Tabs'
5. Click on 'Finish'

PLEASE NOTE: If you are an administrator you can add this for all users following the steps below:

1. Click on Configure > User Settings
2. Click on the  button and
3. Select the user from the list you would like to add the Short Notice List to and select OK.
4. Click on  next to 'Multi ApptBook Tabs'
5. Click Next
6. Select 'Short Notice List' in the 'Available Tabs' box then click on the  to move it across into the 'Selected Tabs'
7. Click on 'Finish'

## Configuring the Short Notice List
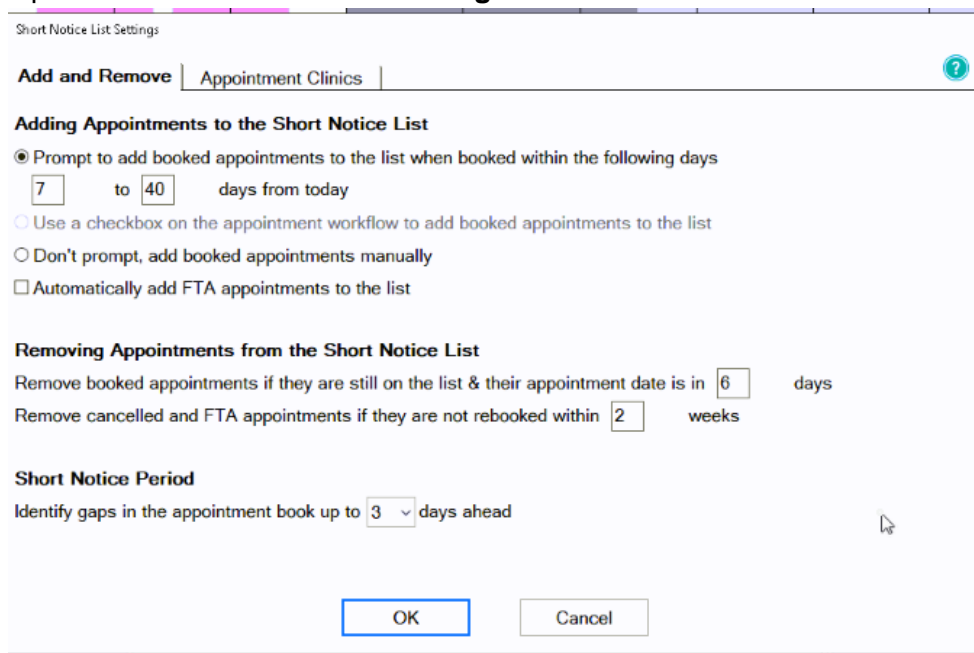
1. Go to the appointment book and go to the short notice tab, there should be a black spanner ![spanner icon] in the bottom right hand corner. You may need to be an administrator / SUPER user.

   PLEASE NOTE: You can also access the Short Notice configuration by going to Configure > Practice settings and clicking on the spanner next to 'Enable Short Notice List'.

2. Opens on **'Short Notice List Settings'** window.



   If you would like to be prompted to add appointments to the Short Notice List if booked within the specified date range (this is usually set to appointments between 7 to 40 days but can be amended for the practice's needs) OR use a checkbox OR don't prompt and add manually. You can add an appointment to the short notice list when cancelling or by right clicking on the appointment and selecting 'Add to Short Notice List'
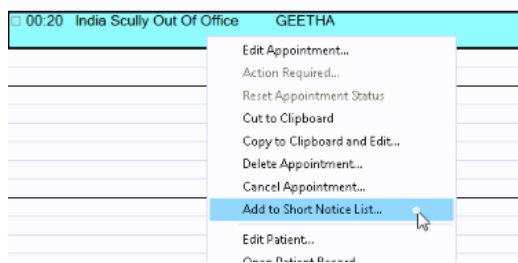


3. You can Tick/Untick box to add FTA appointments automatically.

4. You can also decide when to remove appointments from the Short Notice List by setting a time intervals in the two removal conditions shown above.

5. You will need to specify the short notice period itself. So the length of time from today it may find an appointment for- **Maximum 5 days**

6. '**Contact'** tab is located to the top middle of the setting screen.



a) From this section you can decide how patients are contacted. You can select 'No SMS' if you would like to call your patients to advise of short notice gaps, 'Manual SMS' if you'd like to decide which patients you will send an SMS to or 'Automate SMS sending' and the system will send text messages to all who fit the criteria of the available space. .
b) Then select the size of groups to contact which will limit the amount of patients on the short notice list that you contact about the space.
c) Select the template to send to patients – the default will ask the patient to reply by text message. If you do not have SMS replies you will need to amend this message.
d) Enter the time you would like to stagger messages by in minutes – this will allow a gap between sending the text messages to allow the patient to reply should they want it before the next person is contacted.
e) To prevent patients from feeling hassled can limit the maximum amount of gap messages a patient receives within 3 days.
f) Select timeframe to stop sending SMS if gap within '*x*' hours.

7. **'Appointment clinics'** located at the top left of the setting screen.



a) Select which clinics you would like to prevent gaps being filled

# HELPFUL INFORMATION

## Who should I contact for help?
**General EXACT Queries**

Contact the SOEUK Support Desk on 00441634 266 800

**Department of Employment Affairs and Social Protection**

Phone numbers: 01 704 3000

Emails: info@welfare.ie

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

## Eligibility checker
Please use the link below to check a patients eligibility by treatment code.

https://www.sspcrs.ie/portal/dentchecker/pub/check

## 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