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**altapoint**  
THE PINNACLE PRACTICE MANAGEMENT SOFTWARE



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## Table of Contents

Welcome!.....	3
Overview.....	3
Starting the Program.....	3
Flow of the Program -- Important Tip --.....	4
Entering a new Patient.....	5
Step-by-step Instructions – Patient File.....	6
Entering Billing Codes.....	11
Setting up Additional Fee Schedules.....	13
Entering Transactions on a Bill.....	14
Printing an Insurance Form.....	18
Printing a Batch of Insurance claims.....	21
Creating Reminders (Patient Recall).....	21

## Welcome!

Thank you for your interest in AltaPoint Medical Practice Management and EMR. We believe AltaPoint to be one of the finest Medical software packages available. This introductory tutorial will help you become familiar with the basic workings of the system. We wish you success with your practice and with our software.

## Overview

The AltaPoint Medical Practice Management software program centers around the main activities of entering patient information, patient & insurance billing, patient reminders and appointment scheduling. This tutorial is designed to give a general overview of some of the basic workings of AltaPoint. Additional detail about other system functions can be found in the product's manual.

In the following sections we will talk about the main functions listed above, giving examples where practical.

Download and install the program to begin the following demo.

## Starting the Program

Start the program by double-clicking the AltaPoint icon on your desktop. You will be asked to enter an "Employee Code." Press the lookup (magnifying glass) icon or press the F5 key on your keyboard. This will let you select from a list of possible employees already in the system. The employee login is not a password, although the system does have a password protection feature, which can be accessed from the HIPAA menu. The employee code makes it easier for you to work within the system.

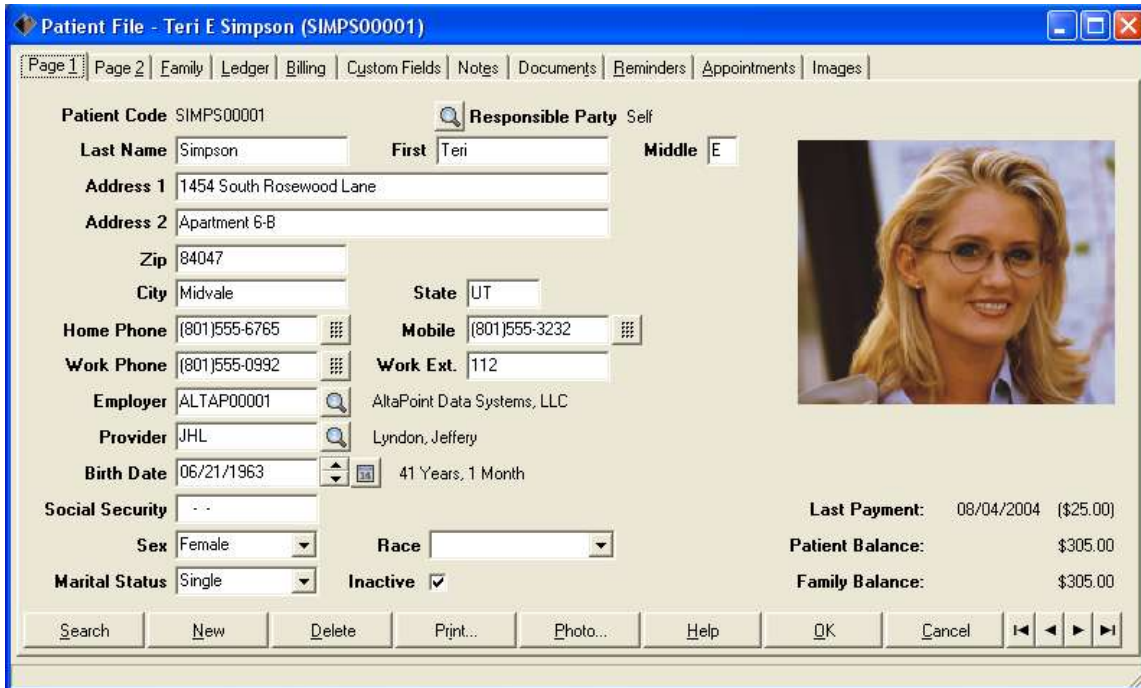
## Navigating Throughout the System

- **Alt Keys** – Many menus, buttons and tabs have a caption with an underscored letter. For example: File. This means you can select the "File" option by holding down the "Alt" key on your keyboard while pressing the "F" key. Most menu options have a similar key that can be used as an alternative to using your mouse.
- **Enter, Tab Key & Shift-Tab** – Most windows programs use the "Tab" key to move between fields. Your AltaPoint software allows you to use either the "Tab" key or the "Enter" key to move between the fields on a given record. (The Shift + Tab key will move you back a field.) By default, the program uses the "Tab" key. If you want to use the "Enter" key, you must enable the option by going to the File menu and selecting the "Practice Information" option. Then, from the Options tab, place a check mark in the "Use Enter key for next field" checkbox.
- **Function Keys** – Throughout the system you can use the "F5" key on your keyboard any time you have the option to "look-up" a code. Otherwise you can click on the look-up icon next to the field.
- **Mouse** – You can click the left mouse button on any field or button in the system to help you navigate through the program's screens.

## Flow of the Program -- Important Tip --

The Patient file is the central information screen of the program. From the patient file you can enter patient information, enter new patient bills, apply payments to a bill, review and create new patient appointments and recall notices, print patient ledgers and insurance claims as well as many other important functions. **Generally speaking, you will want to begin in the patient file when managing a patient's account.**

Below is an illustration of the patient file. Notice the tabs along the top of the screen. These tabs help you manage all of the import information for each patient.



**Patient File - Teri E Simpson (SIMPS00001)**

Page 1 | Page 2 | Family | Ledger | Billing | Custom Fields | Notes | Documents | Reminders | Appointments | Images

**Patient Code** SIMPS00001      **Responsible Party** Self

**Last Name** Simpson      **First** Teri      **Middle** E

**Address 1** 1454 South Rosewood Lane

**Address 2** Apartment 6-B

**Zip** 84047

**City** Midvale      **State** UT

**Home Phone** (801)555-6765      **Mobile** (801)555-3232

**Work Phone** (801)555-0992      **Work Ext.** 112

**Employer** ALTAP00001      AltaPoint Data Systems, LLC

**Provider** JHL      Lyndon, Jeffery

**Birth Date** 06/21/1963      41 Years, 1 Month

**Social Security** - - -

**Sex** Female      **Race** [ ]

**Marital Status** Single      **Inactive**

**Last Payment:** 08/04/2004 (\$25.00)

**Patient Balance:** \$305.00

**Family Balance:** \$305.00

Search    New    Delete    Print...    Photo...    Help    OK    Cancel    [Navigation Icons]

You can access the patient file by either selecting the Patient icon, or by selecting Patients from the List menu.

## Entering a new Patient

As mentioned above, it is usually best to start from the patient file when servicing a patient, however, when entering a new patient there may be other information that should also be entered. An outline of the steps you should follow is listed below:

- Step1** Begin entering basic information in the Patient file for the patient (Page 1 & Page 2.)
- Step2** Select the person responsible for payment or who carries the insurance for the patient in the Responsible Party field. If the responsible party has not yet been entered, enter it in the Guarantor List (as a non-patient guarantor), or if the responsible person is a patient at the practice, enter them in the Patient file.
- Step3** Enter relevant billing & insurance information for the patient in the Billing tab.
- Step4** Enter charges and payments for the patient from the Ledger tab.
- Step5** Enter future appointments, reminders or notes for the patient on the appropriate tabs.

These steps are described in more detail below:

### Step1 Begin entering basic information in the Patient file (Page 1 & Page 2.)

The patient file can be accessed by selecting the Patient icon on the button bar or through the “List” menu. The screen below illustrates the first screen of the patient file.

**Patient File - Teri E Simpson (SIMPS00001)**

Page 1 | Page 2 | Family | Ledger | Billing | Custom Fields | Notes | Documents | Reminders | Appointments | Images

Patient Code: SIMPS00001      Responsible Party: Self

Last Name: Simpson      First: Teri      Middle: E

Address 1: 1454 South Rosewood Lane

Address 2: Apartment 6-B

Zip: 84047

City: Midvale      State: UT

Home Phone: (801)555-6765      Mobile: (801)555-3232

Work Phone: (801)555-0992      Work Ext.: 112

Employer: ALTAP00001      AltaPoint Data Systems, LLC

Provider: JHL      Lyndon, Jeffery

Birth Date: 06/21/1963      41 Years, 1 Month

Social Security: - -

Sex: Female      Race: [ ]

Marital Status: Single      Inactive:

Last Payment: 08/04/2004 (\$25.00)

Patient Balance: \$305.00

Family Balance: \$305.00

Buttons: Search, New, Delete, Print..., Photo..., Help, OK, Cancel, Navigation arrows

Above, you can see page 1 of the Patient file. To enter a new patient, select the “New” button from the bottom of the screen. Each patient must be assigned a patient code. The patient code is the unique code that distinguishes each patient from all others in the system. The patient code field will accept letters and/or numbers. You can enter up to 10 characters in creating your own codes. As an alternative, the system can automatically assign consecutive numbers if you desire. This option can be selected by entering a check mark in the appropriate box in the “Practice Information” screen under the “File” menu (*This option is already selected in the Demo version, but can be changed*).

Enter the appropriate information for the patient on screens 1 and 2.

## Step-by-step Instructions – Patient File

- Select the patient file by pressing the Patient File icon or by selecting “Patients” from the “Lists” menu.
- Press the “New” button or press Alt-N on your keyboard to add a new patient.
- Enter up to 10 characters for the new Patient Code or leave this field blank to let the system automatically assign an alphanumeric code based on the patient’s name. You must select the “Auto Number Patients” box in the Practice Information file to have the system generate automatic codes.
- Press the “Tab” key on the keyboard to move to the next field.
- Enter the Patient’s name.
- Continue entering relevant information in each field moving between the field by pressing the tab key on your keyboard.

**NOTE: In order to save a new patient’s file you must enter the patient’s sex and Birthdate.**

**NOTE: Anytime you are required to look up a code in the system you can either click on the lookup icon or press F5 on you keyboard to get a list of the relevant codes to select from.**

- Select the “Patient Page 2” tab to continue entering in the appropriate information for the patient.

**Step2 Select the person responsible for payment or who carries the insurance for the patient in the Responsible Party field. If the responsible party has not yet been entered, enter it in the Guarantor List (as a non-patient guarantor), or if the responsible person is a patient at the practice, enter them in the Patient file.**

Press the lookup icon or press F5 on you keyboard to select the guarantor. The guarantor can be Self, Another Patient or a Guarantor. If the guarantor is Another Patient or a Guarantor, you must enter the code of that person in the code box or create a new record from the lookup screen. The select guarantor screen appears as illustrated below:

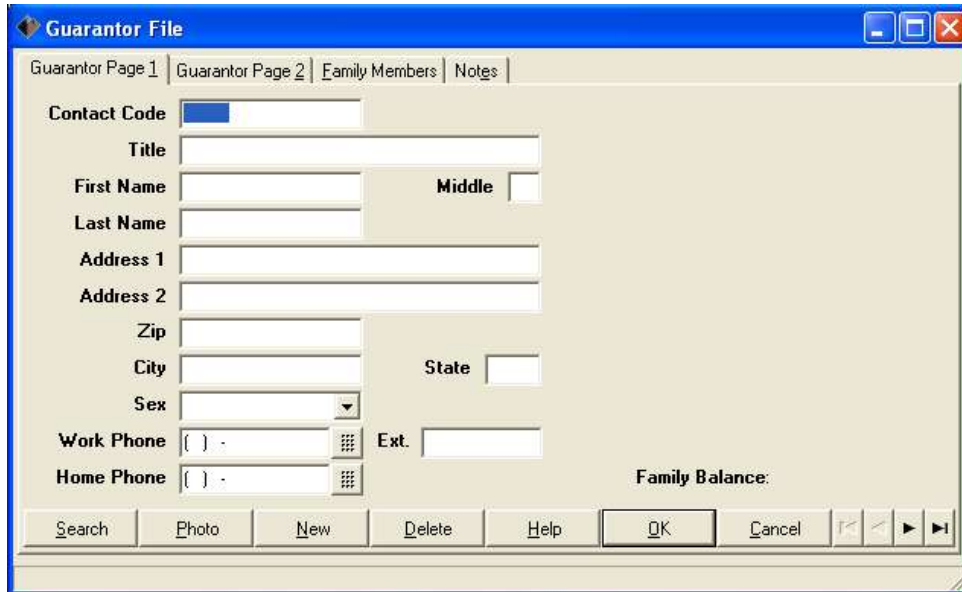


You can use the lookup icon to select the appropriate patient. If the patient doesn't already exist, you can select the New button to enter the new patient who is the responsible party.

You can also use the lookup icon to select the appropriate guarantor. If the guarantor doesn't already exist, you can select the New button to enter the new guarantor who is the responsible party. Note, if you have already entered the patient's address information on the new patient file before entering the above screen, that address information will be automatically entered on the new guarantor's file (this information can be overwritten if not accurate.)

**NOTE: The program stores non-patient responsible parties (guarantors) in the Guarantor List so that the Patient File will only contain people who actually are patients of the practice.**

The Guarantor List can be accessed by selecting Guarantors from the Lists menu. The Guarantor List is where you enter non-patient responsible parties. The Guarantor List appears as illustrated below:



The screenshot shows a window titled "Guarantor File" with a blue title bar and standard Windows window controls. The window has four tabs: "Guarantor Page 1" (selected), "Guarantor Page 2", "Family Members", and "Notes". The main area contains a form with the following fields:

- Contact Code: A text input field with a blue highlight.
- Title: A text input field.
- First Name: A text input field.
- Middle: A text input field.
- Last Name: A text input field.
- Address 1: A text input field.
- Address 2: A text input field.
- Zip: A text input field.
- City: A text input field.
- State: A text input field.
- Sex: A dropdown menu.
- Work Phone: A text input field with a format mask ( ) - and a numeric keypad icon.
- Ext.: A text input field.
- Home Phone: A text input field with a format mask ( ) - and a numeric keypad icon.
- Family Balance: A label.

At the bottom of the window is a toolbar with buttons for Search, Photo, New, Delete, Help, OK, Cancel, and navigation arrows.

- Enter up to 10 characters for the new contact code of the guarantor. This code can include numbers or letters.
- Enter the first and last name of the guarantor in the appropriate fields. Then include the address and telephone information. You can also include information on the "Guarantor Page 2" tab, such as Employer and Birth Date.
- Press OK to save the record.

### **Step3 Enter relevant billing & insurance information for the patient in the Billing tab.**

From the Patient File, select the Billing tab. The screen will appear as follows:

- From this screen, input the information about the billing for the patient. Check the “Bill Patient” box if you want the patient to be billed, leave it unchecked if you don’t want the patient to receive a statement automatically before insurance has paid.
- Enter the Fee Schedule that this patient or insurance should be billed at. This is generally the primary insurance company’s fee schedule. (Fee schedules will be discussed more in the next section.)
- Indicate which signatures on file you have for the patient.
- Enter the appropriate information for the patient’s Primary, Secondary and Tertiary insurance if applicable.

**NOTE: These billing settings will be used on any new bill that is created, however you can change these settings on the new bill if needed. (Bill/Invoice settings can be different than the current settings of the patient file.)**

- Check the “Always Bill” checkbox if you want the insurance company billed (an insurance form printed.)

**Enter charges and payments for the patient from the Ledger tab.**

The patient file is a great place to start from to view the current state of the patient’s account and to enter or edit charges and payments. To do this, select the Ledger tab from the Patient File. The screen will display as follows:

**Patient File - Teri E Simpson (SIMPS00001)**

Page 1 | Page 2 | Family | Ledger | **Billing** | Custom Fields | Notes | Documents | Reminders | Appointments | Images

Date	Patient Code	Name	Billing No.	Provider	Billing Code	Description	Amount
07/22/2004	SIMPS00001	Teri Simpson	1004	JHL	W0	Write-Off	(\$10.00)
07/26/2004	SIMPS00001	Teri Simpson	1005	JHL	99070	Drugs/Supplies	\$10.00
07/26/2004	SIMPS00001	Teri Simpson	1005	JHL	93000	EKG	\$545.00
07/26/2004	SIMPS00001	Teri Simpson	1007	JHL	86403	Strep Screen (Papid)	\$75.00
07/26/2004	SIMPS00001	Teri Simpson	1005	JHL	80051	Electrolyte Panel	\$50.00
07/27/2004	SIMPS00001	Teri Simpson	1009	GRS	93015	Exercise Treadmill	\$195.00
07/27/2004	SIMPS00001	Teri Simpson	1005	JHL	ICHECK	Insurance Check	(\$500.00)
07/27/2004	SIMPS00001	Teri Simpson	1005	JHL	ICHECK	Insurance Check	(\$10.00)
07/27/2004	SIMPS00001	Teri Simpson	1009	GRS	ICHECK	Insurance Check	(\$125.00)
08/04/2004	SIMPS00001	Teri Simpson	1005	JHL	CHECK	Patient Payment - Check	(\$25.00)

**Show:**  Billing Summary  
 Payments Only  
 Unpaid Bills  
 All Family Members  
 Estimates

**View Transactions:** From: / / To: / /

**\* Notes:**

**Last Payment:** 08/04/2004 (\$25.00)      **Patient Balance:** \$305.00      **Family Balance:** \$305.00

Zoom... New Bill... New Plan... Edit Item... Print Help OK Cancel

To enter new charges or payments you can either enter them on an existing bill or you can start a new bill. Generally, you will want to start a new bill for a new series of services performed. To start a new bill select the “New Bill” button at the bottom of the screen. This will take you to the Transaction Entry screen. (The Transaction Entry screen is also available at any time by selecting the Billing icon or by selecting Transaction Entry from the Activities menu.)

If entering a charge for a procedure or payment, enter the Date, Provider, Billing Code & Diagnosis Code for the work being done. The Amount should come up automatically based on the information put in the billing code file. You can do a lookup of the Provider code and the Billing Code by pressing the lookup icon when in the particular field.

If you are entering historical information or a balance forward amount, you can change the line item date to reflect the correct date when the charges were performed.

**NOTE: You must enter a valid Date, Provider code and Billing Code for the system to allow you to save the record.**

**NOTE: The current line is automatically saved once you go through the end of the line to the line below. You can do this by “Tabbing” through the end of the line or by pressing the down-arrow key on your keyboard to go to the line below.**

Enter future appointments, reminders or notes for the patient on the appropriate tabs.

- Select the “Appointments” tab to view a list of the appointments set up for the patient.
- Select the “Reminders” tab to view a list of the reminders set up for the patient.
- Select the “Notes” tab to enter any notes for the patient.
- Press the “OK” button at any time to save & exit the patient record.

## Entering Billing Codes

The “Billing Code” screen can be found under the “Lists” menu. Billing Codes should be set up for all of the procedures that you perform in your practice. **In addition to procedures, billing codes should also be set up for payments, inventory items and any other code that would be entered on a patient’s bill.** It is not necessary to enter every code in the beginning because the system will allow you to enter additional codes “on the fly” when entering patient bills.

When you select the “Billing Code” option from the “Lists” menu, you will see the following screen:

The screenshot shows a window titled "Billing Codes" with several tabs at the top: Billing Code, Billing Options, Fee Schedule, Inventory, Product Details, Billing Text, Reminders, Compound Codes, and Orders. The "Billing Code" tab is active. The form contains the following fields and values:

- Code: 11100
- Description: Biopsy, Skin
- Code Type: Procedure
- Graphics Category: 5. Lab
- General Ledger: (empty)
- Standard Fee: \$100.00
- CPT Code: 11100
- Type of Service: 02
- Default Location: 0F
- Appointment Length: 00:00
- Appointment Color: (empty)
- Inactive

At the bottom, there are buttons for Search, New, Delete, Help, OK, Cancel, and navigation arrows.

From this screen you set up the billing codes that will be used throughout the system. Notice the different tabs across the top of the screen. **These options are available for each code, although not every tab will be relevant for each code.** For example, if you were inputting a “office visit” code you would not need to enter any information in the “Inventory” tab, as an office visit is not a product.

Enter the description for the new code in the Description field. Then identify what type of code the new code will be by using the drop-down arrow at the end of the Code Type box. Select between Procedure, Patient Charge, Patient Payment, Insurance Payment, Credit Adjustment, and Write-Off.

The table below identifies what each code type should be used for.

CODE TYPE	USE
Procedure	For all office procedures – Will Print On A Claim Form. <i>99% of your codes will likely be this type.</i>
Patient Charge	For finance charges and other patient charges – WILL NOT PRINT ON A CLAIM FORM.
Patient Payment	For patient payment codes.
Insurance Payment	For insurance payment codes.
Credit Adjustment	For credit adjustment codes. MUST BE ENTERED WITH A MINUS (-) SIGN.

Write-Off	For write-off codes. For use when writing off a portion of a patients balance.
-----------	--

The Graphics Category field is optional but can be used to categorize groups of billing codes for graphing practice analysis data. View the Presentation Graphics section later in this manual for more information.

The General Ledger field is also optional but can be filled out to correspond with a QuickBooks account. *AltaPoint includes a utility that allows you to post the transaction activity in AltaPoint to QuickBooks, the popular bookkeeping software from Intuit, Inc. This feature provides a great benefit to QuickBooks users by eliminating the need to enter transaction activity in both programs. **It is not necessary to purchase QuickBooks to use AltaPoint.** The QuickBooks option is entirely optional.*

The Standard Fee is the ordinary fee your office would charge for this billing code. Notice, in the example above that this code has been set up as a \$100.00 charge. You should also enter the relevant CPT code for the procedure. Each time this “Biopsy, Skin” code is used, \$100.00 will automatically be charged to the patient or his/her insurance if the fee schedule on the patient file is left blank or set to the Standard Fee Schedule.

## Setting up Additional Fee Schedules

Select the “Fee Schedule” tab to enter additional fee schedules for the billing code. The screen looks as follows:

The screenshot shows the "Billing Codes" window with the "Fee Schedule" tab selected. The window title is "Billing Codes" and it has standard Windows window controls. The interface is divided into several tabs: "Billing Code", "Billing Options", "Fee Schedule", "Inventory", "Product Details", "Billing Text", "Reminders", "Compound Codes", and "Orders". The "Fee Schedule" tab is active and displays two fee schedule entries for CPT code 11100.

**0 - Standard Fee Schedule**

CPT Code	11100	Amount Allowed		Consider Deductible Before Co-Pays	<input checked="" type="checkbox"/>
Modifiers 1-4		Co-Pay Amount		Write-Off Code	WD
Type of Service	02	Co-Pay Percent		Write-Off Amount	\$10.00
Fee	\$100.00	Base Co-Pay Percent on Allowed	<input type="checkbox"/>	Write-Off Percent	

**UWB - United Western Benefit**

CPT Code	11100	Amount Allowed		Consider Deductible Before Co-Pays	<input checked="" type="checkbox"/>
Modifiers 1-4		Co-Pay Amount		Write-Off Code	WD
Type of Service	02	Co-Pay Percent	20.000%	Write-Off Amount	\$10.00
Fee	\$100.00	Base Co-Pay Percent on Allowed	<input type="checkbox"/>	Write-Off Percent	

At the bottom of the window, there are buttons for "New Fee Schedule", "Delete Fee Schedule", "Help", "OK", and "Cancel", along with navigation arrows. The status bar at the bottom left shows "11100, Biopsy, Skin".

You can create an unlimited number of fee schedules. You may have a fee schedule for each insurance company that you work with or you may choose to set up a fee schedule for several basic plan coverages. You can select which fee schedule a specific patient should use by entering the appropriate schedule in the patient’s file under the Billing tab.

You can experiment with the other tabs of the “Billing Codes” file to become familiar with how they work for each code.

## Entering Transactions on a Bill

Once you have entered some of your patient demographic information and some basic billing codes, you can begin entering in new bill for a given patient. Bills are entered through the “Transaction Entry” screen.

The “Transaction Entry” Screen can be accessed from many places within the program. A few of the most common ways to reach the billing screen are from the icon, from the “Transaction Entry” option under the “Activities” menu or from the Ledger tab in the Patient file. The Transaction Entry form is where a practice spends much of its time when in the AltaPoint program. This is because all charges, payments and procedures are entered from this screen.

The billing function in AltaPoint Medical software is designed as an invoice style accounting system. This means that you will usually create a different bill for each patient visit. Each bill will create an independent HCFA insurance claim form. A patient can have an unlimited number of bills. Each bill is totaled separately and is combined to compute the patient’s total balance. Statements will be printed that reflect the balance of multiple visits for a given patient.

To create a new bill select either the Transaction Entry icon or select “Transaction Entry” from the “Activities” menu. The following screen will be displayed:

Start Date	End Date	Provider	Billing Code	M1	M2	M3	M4	POS	Diagnosis	Amount	Units	Extended

<b>Patient Resp.</b>	\$0.00
<b>Insurance Resp.</b>	\$0.00
<b>Bill Balance</b>	\$0.00
<b>Patient Balance</b>	\$0.00
<b>Family Balance</b>	\$0.00

Select the “magnifying glass” or press the F5 key on your keyboard to look up the patient code for the patient you are creating the bill for. The Bill Number will be assigned once you get to the service date field (The bill number increments by 1 for each new bill). To move between the fields select the “Tab” key on your keyboard or click a box with your mouse.

Today’s date will automatically appear in the “Date:” box. This date can be changed if needed. Anytime the system asks for a date, you can advance the date by one day by pressing the “+” key. The “-“ key can be used to go to the previous day. If a date field is blank, you can press the “+” or the “-“ key to enter the current date.

Press the tab key again to move to the provider box. Enter the provider code for the provider responsible

for the billing (or the supervising physician.)

Press the tab key one more time or click your mouse in the white grid in the center of the screen. Now you can enter the date for the transaction, the provider who performed the service and the billing code that was administered. If a fee schedule has been input for the patient, an amount will automatically appear in the "Amount" field. The amount can be manually changed if you choose. Note also that there is a "Units" box that indicates the quantity of the billing code entered. **NOTE:** Remember that anytime you need to look up a code of any sort you can press F5 on your keyboard or select the lookup icon in the current field. To move between lines in the Bill form you can press the up or down arrows on your keyboard or press the "Tab" key at the end of a line.

## Entering Payments

You can enter patient or insurance payments the same way as you enter transactions as discussed in the previous section. You will want to enter payments on existing bills. One easy way to identify the patient's bills is to select the Ledger tab from the patient's file. The screen looks as follows:

**Patient File - Teri E Simpson (SIMPS00001)**

Page 1 | Page 2 | Family | Ledger | Billing | Custom Fields | Notes | Documents | Reminders | Appointments | Images

Date	Patient Code	Name	Billing No.	Provider	Billing Code	Description	Amount
11/07/2003	SIMPS00001	Teri Simpson	1001	MA	99211	E/M Level 1 - Established Patient	\$75.00
11/07/2003	SIMPS00001	Teri Simpson	1001	MA	99070	Drugs/Supplies	\$120.00
11/07/2003	SIMPS00001	Teri Simpson	1001	MA	90724	Influenza Vaccine	\$75.00
11/07/2003	SIMPS00001	Teri Simpson	1001	JHL	93015	Excercise Treadmill	\$25.00
11/09/2003	SIMPS00001	Teri Simpson	1001	JHL	CHECK	Patient Payment - Check	(\$25.00)
11/30/2003	SIMPS00001	Teri Simpson	1002	MA	93015	Excercise Treadmill	\$25.00
11/30/2003	SIMPS00001	Teri Simpson	1002	MA	99070	Drugs/Supplies	\$22.50
12/27/2003 *	SIMPS00001	Teri Simpson	1001	MA	ICHECK	Insurance Check	(\$50.00)

**Show:**  Billing Summary  
 Payments Only  
 Unpaid Bills  
 All Family Members  
 Estimates

**View Transactions:** From: / / To: / /

**\* Notes:** Check #10102

**Last Payment:** 12/27/2003 (\$50.00)      **Patient Balance:** \$267.50      **Family Balance:** \$322.50

Zoom... New Bill... New Plan... Edit Item... Print Help OK Cancel

Select the Edit Item button at the bottom of the screen. This will take you directly to the Transaction Entry screen in the specific Bill identified by the selected line above. An example is shown below:

**Transaction Entry - Simpson, Teri E (SIMPS00001)**

**Patient:** Teri Simpson  
**Bill No.:** 1002  
**Date:** 11/30/2003  
**Provider:** MA

**Bill To:**  
 Patient: Yes  
 United Western Benefit: Yes  
 United Mutual: No

**Diagnosis:**  
 1. 346.9 - Headache, Migraine  
 2.  
 3.  
 4.

Start Date	End Date	Provider	Billing Code	M1	M2	M3	M4	POS	Diagnosis	Amount	Units	Extended
11/30/2003		MA	93015						1	\$25.00	1	\$25.00
11/30/2003		MA	99070						1	\$22.50	1	\$22.50

**Description:** Exercise Treadmill

**\*Notes:**

Show Item Balances

**Tax:**

<b>Patient Resp.</b>	\$0.00
<b>Insurance Resp.</b>	\$47.50
<b>Bill Balance</b>	\$47.50
<b>Patient Balance</b>	\$267.50
<b>Family Balance</b>	\$322.50

Buttons: New, Notes, Billing..., Line Detail..., Print..., Delete..., Pay Item, Recall..., Help, Close

At this point you can either enter a non-specific payment to the entire bill or you can pay a specific line item.

To enter a non line item specific payment to the bill, press the down arrow on your keyboard until you get to a new line in the bill, then enter a new transaction line using a payment Billing Code rather than a procedure Billing Code. (You must first create the payment billing code in the system. To learn about creating new billing codes, see the section about billing codes earlier in this tutorial.)

To pay a specific line item in the bill (generally for insurance payments), select the Pay Item button at the bottom of the screen. The following screen will display:

Apply Item Payment

Apply Payment

Payment Amount

Payment Code

Payment Date 08/01/2004

Patient Aging Date 08/01/2004

Provider MA

Notes

Date of Service: 11/30/2003, Billing Code: 93015

From this screen you can enter the amount of the payment and the correct patient or insurance payment code. After you have pressed the OK button the record is saved.

You may also wish to enter payments in a batch mode rather than individually. To learn how to use the Batch Payment feature of your software, see the section entitled “Batch Payments” later in this manual.

## Printing an Insurance Form

You can print Insurance forms in one of two ways. You can print an insurance claim individually from the Transaction Entry screen or you can print forms in a batch of several claims.

**Transaction Entry - Simpson, Teri E (SIMPS00001)**

**Patient:** Teri Simpson  
**Bill No.:** 1002  
**Date:** 11/30/2003  
**Provider:** MA

**Bill To:**  
 Patient Yes  
 United Western Benefit Yes  
 United Mutual No

**Diagnosis:**  
 1. 346.9 - Headache, Migraine  
 2.  
 3.  
 4.

Start Date	End Date	Provider	Billing Code	M1	M2	M3	M4	POS	Diagnosis	Amount	Units	Extended
11/30/2003		MA	93015						1	\$25.00	1	\$25.00
11/30/2003		MA	99070						1	\$22.50	1	\$22.50

**Description:** Exercise Treadmill

**\*Notes:**

Show Item Balances

**Tax:**

<b>Patient Resp.</b>	\$0.00
<b>Insurance Resp.</b>	\$47.50
<b>Bill Balance</b>	\$47.50
<b>Patient Balance</b>	\$267.50
<b>Family Balance</b>	\$322.50

Buttons: New, Notes, Billing..., Line Detail..., Print..., Delete..., Pay Item, Recall..., Help, Close

To print a claim from the Transaction Entry screen, bring up the bill that you want to print and select the Print button at the bottom of the screen.

Then, select "Print Insurance" from the list and you will see the following screen:

Indicate the type of form to print, (we suggest you use the MEDCLAIM format), then select whether the claim will be Medical Paper or Medical Electronic. You can indicate whether to include insurance or patient payments on the claim form and if you would like the claim to print on plain paper or a preprinted form. The Ranges to Print tab has already indicated to print only the claim for the specific bill identified above (bill #1002.) You can Preview the claim form or you can Print the claim directly by pressing the appropriate button. If you need to change any billing information for this claim or for the patient, you can make those changes through the Patient File or from the billing button at the bottom of the Transaction Entry screen.

**IMPORTANT NOTE: A claim will only print if it is “pending.” To check if a claim is pending, press the **Billing** button from the Transaction Entry screen. The following screen will display:**

**Billing Options - Simpson, Teri E (SIMPS00001)**

**Billing** | Primary Insurance | Secondary Insurance | Tertiary Insurance | Insurance Claim | Accident/Disability | Notes

**Bill Patient**

**Billing Date**  
11/30/2003

**Provider**  
MA

**Co-pay/Deductible**  
[ ]

**Tax Rate**  
0

**Primary Insurance - United Western Benefit**

Bill Insurance      Last Billed [ ] [ ] [ ] [ ]  
 Resubmit Claim      Status [ ]  
 Insurance Paid

**Secondary Insurance - United Mutual**

Bill Insurance      Last Billed [ ] [ ] [ ] [ ]  
 Resubmit Claim      Status [ ]  
 Insurance Paid

**Tertiary Insurance**

Bill Insurance      Last Billed [ ] [ ] [ ] [ ]  
 Resubmit Claim      Status [ ]  
 Insurance Paid

Billing History... | Update Patient | Copy from Billing... | Audit Trail... | UB92... | OK | Cancel | Help

**A bill is only pending if :**

- ❖ **The Bill Insurance checkbox is checked and the Date Last Billed box is blank.**

**OR**

- ❖ **The Bill Insurance checkbox is checked, the Date Last Billed box has a date and the Resubmit Claim checkbox is checked.**

**Also make sure you have a valid insurance company listed for the claim you are trying to print.**

## Printing a Batch of Insurance claims

To print a batch of Insurance claims select Print Insurance Forms from the Activities screen. You will see the same option screen as shown earlier. Select the “Ranges to Print” tab to indicate the ranges of claims to print. If you leave all the ranges blank, the system will assume you want all pending claims to print that meet the criteria set in the ranges.

## Creating Reminders (Patient Recall)

There are two ways to generate reminders. You can have the system create an automatic reminder for you based on the use of a specific billing code or you can create individual reminders manually. Generating reminders in your system is a two-step process. First, you must create the reminder in the program, then you print the reminder(s). Generally, you will want to print a batch of reminders for a specific range of dates.

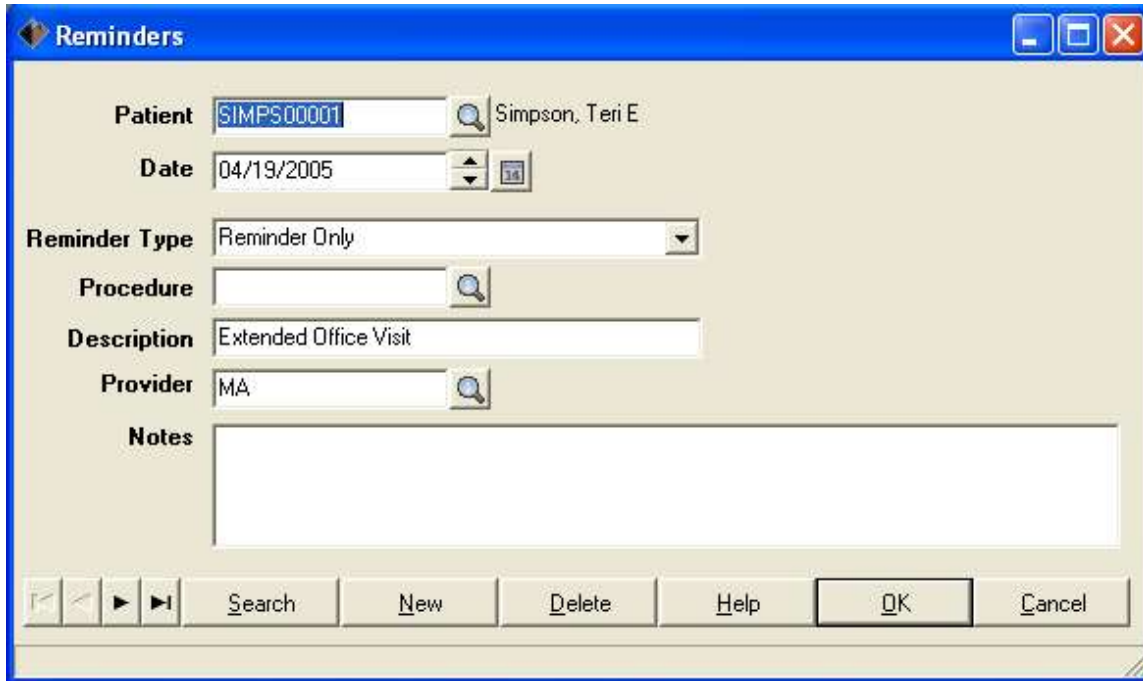
To have the system generate an automatic reminder when a specific billing code is used, select the particular billing code from the “Billing Code” option under “Lists.” Once selected, press the “Reminders” tab to view the following information:

The screenshot shows a software window titled "Billing Codes" with a blue title bar and standard Windows window controls. The window has several tabs: "Billing Code", "Billing Options", "Fee Schedule", "Inventory", "Product Details", "Billing Text", "Reminders", "Compound Codes", and "Orders". The "Reminders" tab is selected. The main area contains a form with the following elements:

- A checkbox labeled "Generate Reminder" which is currently unchecked.
- A "Reminder Type" dropdown menu.
- A "Followup Procedure" text input field with a search icon to its right.
- A "Recall After" section containing a text input field and four radio buttons labeled "Days", "Weeks", "Months", and "Years".
- At the bottom of the form are buttons for "Help", "OK", and "Cancel", followed by four navigation arrows (back, forward, etc.).
- The status bar at the bottom left of the window displays "11100, Biopsy, Skin".

You must click on the box next to “Generate Reminder” to activate the reminder. Then, indicate the type of reminder being set up. This will be “Reminder Only” as the other options relate to system alerts. After indicating the reminder type, you have the ability to enter a followup procedure. If a followup procedure is entered, the patient will receive a reminder for the followup procedure, not the code that the reminder was spawned from. Next, enter the number of recurring frequency in the “Recall After” field and indicate whether the unit is in days, weeks, months or years. For example, if you wanted to see a patient 6 weeks after having performed this procedure you would input a 6 in the “Recall After” field, then click on the “Weeks” button and select OK.

Next time the code is used, a reminder will be generated in the reminder file for the Procedure or (if entered) the Followup Procedure. The following screen illustrates the reminders on file:



The reminder file can be accessed by clicking on the reminder icon, by selecting “Reminders” from the “Activities” menu or by selecting the Reminders tab from the Patient file. From these screens, a manual reminder can be created when the “New” button is selected.

Once a reminder has been created it can be printed by selecting “Print custom reports” from the “Reports” menu. The screen that appears will ask you for a report code. Press F5 on your keyboard or click on the look up icon to select a “reminders” report. The system comes with two reminder templates that you can use or modify. The “POSTCARD” report code is designed to print a 4”x 6” postcard. The “LETTER2” report code will produce an 8.5 x 11” reminder letter. You can also produce a Reminder list to view all pending reminders by printing the “RECALL” custom report.

Select the “LETTER2” report code from the list and select “OK.” The following screen will be displayed:

You can enter “Filters” to select which records will print. In the above example, only the reminders that fall in the month of April, 2004 will be printed. You could print reminder postcards similarly by using the “POSTCARD” report instead. You can print reminders anytime for virtually any range of dates.

You can also send reminders via e-mail. To learn how to do this, please see the section entitled “Sending Reminders via E-mail” later in this manual.

***NOTE: There are many, many more features available in AltaPoint that are discussed in detail in this AltaPoint reference manual. We hope that this brief introductory tutorial has given you a feel for the power and ease of AltaPoint Medical.***