Patient Information:

- ☑ Patients grouped by responsible party.
- ☑ First Name
- ☑ Last Name
- ☑ Middle Initial
- ☑ Preferred Name
- ☑ Address 1
- ☑ Address 2
- ☑ City
- ☑ State
- ☑ Zip
- ☑ Home Phone Number
- ☑ Work Phone Number
- ☑ Mobile Phone Number - if noted as cell
- ☑ Email Address
- ☑ Gender
- ☑ Marital Status
- ☑ Birth Date
- ☑ Patient SSN - patient records only when actual SSN
- ☑ Doctor of Record
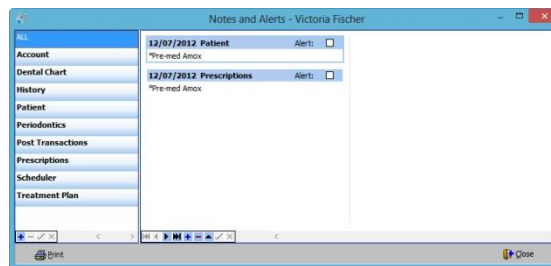- ☑ Record Status – Active and Auxiliary

Patient Notes:

- ☑ Payment Plan
- ☑ Memo
- ☑ Name3
- ☑ Referral Source

Notes and Alerts:
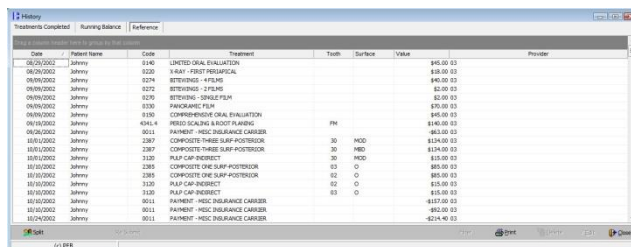
- ☑ Flags convert to Patient Record Alert and Prescriptions Alert
- ☑ UContact messages convert to Patient Record Alerts as Notes
- ☑ Yellow Sticky Notes convert to Patient Record Alerts as Notes.

History Reference Tab:

- ☑ Treatment History – Viewable as History Reference – Does not include deleted transactions [includes Charges, Payments, Debits and Credits]
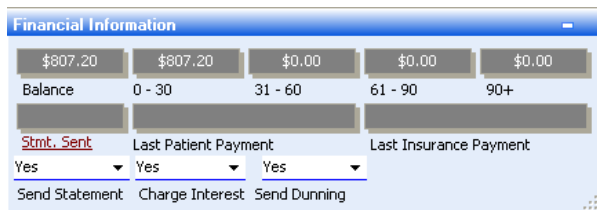- ☑ Date
- ☑ Patient Name
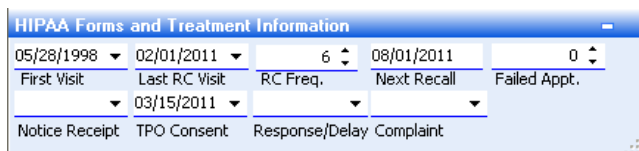- ☑ Code
- ☑ Treatment Description
- ☑ Tooth
- ☑ Surface
- ☑ Value
- ☑ Provider

Financial Information:

- ☑ Account Balances -- Aged accordingly based on patient primary doctor.
- ☑ Send Statement – Defaults to Yes
- ☑ Charge Interest – Defaults to Yes
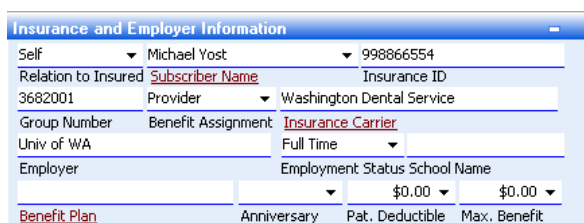- ☑ Send Dunning – Defaults to Yes

HIPAA Forms and Treatment Information:

- ☑ First Visit Date - Created Date
- ☑ Last Visit Date- Last Seen
- ☑ Last Recall Visit- Last Checkup Date
- ☑ Recall Frequency - defaulted to 6 for patients, 0 for auxiliary
- ☑ Next Recall Date – Based on last recall visit date using recall frequency
- ☑ TPO Consent – Defaults to Date of Conversion
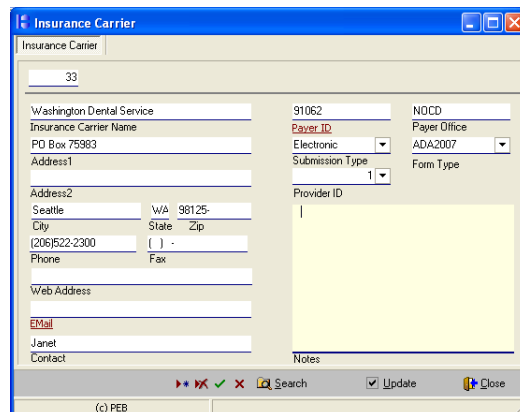
Insurance and Employer Information:

- ☑ Relation to Primary Policy Holder
- ☑ Subscriber Name
- ☑ Insurance Id – SSN field from Family File
- ☑ Group Number
- ☑ Benefit Assignment – Defaults to Provider
- ☑ Insurance Carrier Name
- ☑ Employer
- ☑ Employment Status – Defaults to Full Time
- ☑ Patient Deductible – Defaults to 0
- ☑ Max Benefit – Defaults to 0
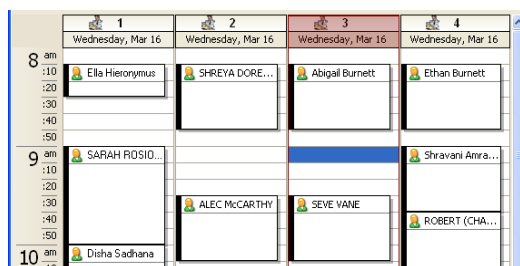
Insurance Carrier:

- ☑ Insurance Carrier Name
- ☑ Address 1
- ☑ Address 2
- ☑ City
- ☑ State
- ☑ Zip
- ☑ Phone
- ☑ Payer ID
- ☑ Payer Office – Defaults to NOCD
- ☑ Submission Type – Defaults to Electronic
- ☑ Form Type current ADA Form
- ☑ Provider ID – Defaults to 1

Appointment Book:

- ☑ Practice Appointments will convert to appropriate column -excluding new patients
- ☑ Patient Name
- ☑ Appointment Date
- ☑ Appointment Time
- ☑ Appointment Length - Defaults to 30 minutes
- ☑ All Appointments convert default Prophy Code [D1120]. Operative appointments may need to be modified following conversion.

XLChart™:
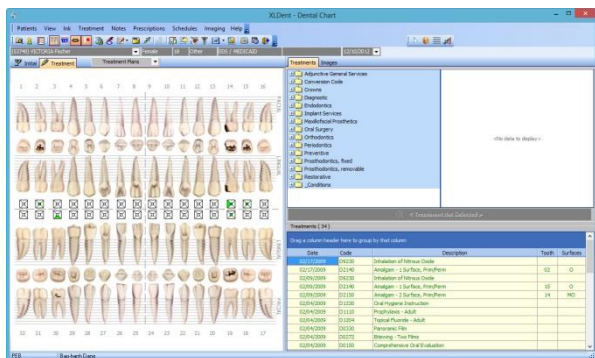
☑ Restorative Chart -- As a visual representation of treatment completed on valid ADA codes only. This will be recorded as Initial Treatment in XLChart™
☑ Date
☑ Patient Name
☑ Code
☑ Treatment
☑ Tooth
☑ Surface
☑ Value
☑ Provider

Treatment Plans:
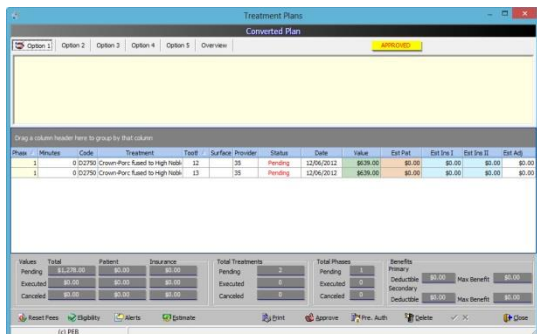
☑ Phase
☑ Minutes – Defaults to 0
☑ Code
☑ Treatment Description
☑ Tooth
☑ Surface
☑ Provider
☑ Status – Defaults to Pending
☑ Date
☑ Value
☑ Patient Value – Defaults to 0
☑ Insurance Value I – Defaults to 0
☑ Insurance Value II – Defaults to 0

Fee Table:
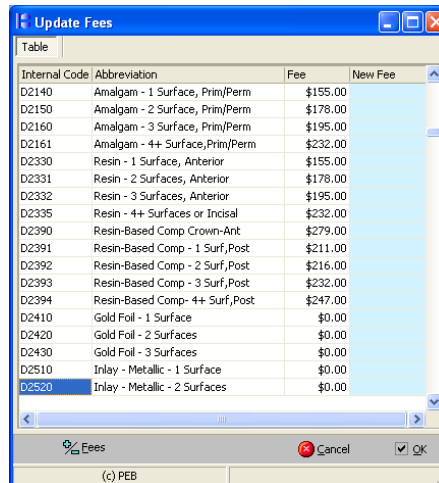
☑ Procedure Codes
 ♦ Active ADA Codes
 ♦ Base Code Abbreviation
☑ Fee 0 Schedule

Practice Information:
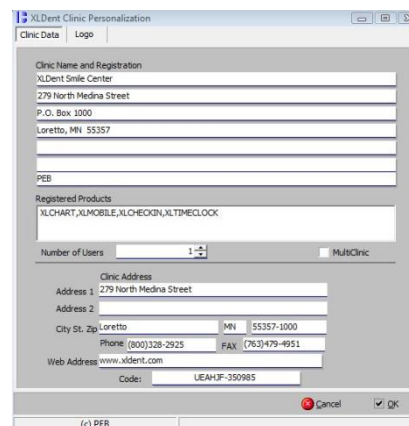
☑ Practice Demographic Information
☑ Clinic Name
☑ Clinic Address and Phone
☑ Clinic Logo

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Operators:

☑ Provider Information for all Doctors and Hygienists
☑ First Name
☑ Middle Initial
☑ Last Name
☑ Provider ID – Same as previous software
☑ SSN
☑ Federal TIN
☑ NPI Type 1
☑ State License Number
☑ DEA Number
☑ NPI Type 2
☑ Specialty
☑ Home Phone
☑ Mobile Phone
☑ Active – All convert as Yes
☑ Insurance ID's – If available

File Location:
?:\Doc_Aide\

Files Needed
?:\Doc_Aide*.*
Need software and license disks if available.

Disclaimer:
The success of the conversion is largely based on the data provided. Please be aware that not all data will be transferred. Information that is incorrect or corrupt in your previous system will not be corrected by the conversion. Therefore, some information will need to be manually entered. Verification of conversion data is dependent on supplied fax documents by end user.

Special Conversion Considerations:
Conversions are in constant development, in the event you have questions about data being converted or require special consideration. Please contact your XLDent™ Representative.

Items that do not convert:
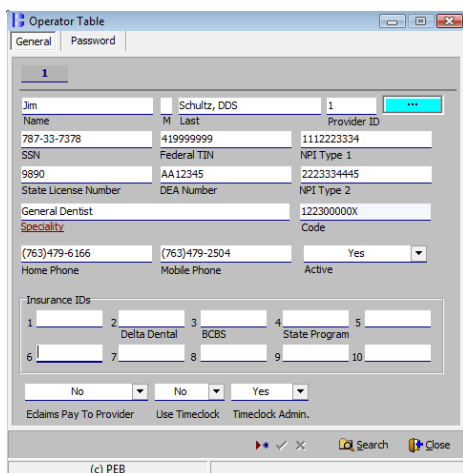Specific areas that will not convert include, but are not limited to, the following:

⊘ Periodontal Charting
⊘ Provider Accounts Receivable Distribution
⊘ Payment Plans/Contract Balances
⊘ Outstanding Insurance Claims
⊘ Prescription Listing
⊘ Patient Prescriptions
⊘ Benefit Plans / Allowed Amounts
⊘ Progress Notes
⊘ Secondary Insurance
⊘ 3rd Person account information

Notes on Conversions:
➢ Duplicated patients in your software will be converted as duplicates.
➢ Accounts containing both parents will convert the insurance holder as the responsible party. If no insurance, then the father will convert as responsible party.
➢ Appointments will convert with a defaulted prophy code. This can be manually changed after the conversion.
➢ Fee 0 was used as the default fee schedule.
➢ New Patient appointments will be manually entered during training.

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Below are some additional notes concerning some of the items that will or will not be converting.

Patient ID
A new patient identification number will be assigned for all patients. The patient id number in your previous system will not be converted.

Gender
When this is not converted or not entered into current system it will default to Male.

Marital Status
Marital Status converts as Single or Married. When this is not converted or not entered into current system it will default to Other.

Preferred Dentist
When this is not converted all patients will be assigned to the default doctor.

First Visit Date
When this is not converted or the patient does not have a created date, it will be assigned to the date of the conversion. This is done so the New Patient Report will be accurate for new patients entered into XLDent™. This can be manually changed.

Patient Status
Active and auxiliary status patients convert to XLDent™. Inactive accounts may convert based on quality of end users preliminary data conversion cleanup process.

Patient Appointment Length
All appointments defaulted to 30 minutes. This can be manually changed during training.
End of Month and End of Year will be processed during the conversion. You will be starting a new month and a new year after the conversion. You will want to maintain the End of Month and End of Year totals or reports from your previous system. At the end of the actual month and year, you will combine the totals from XLDent™ and the totals from your previous system to get an accurate Month to Date and Year to Date total.

If posting after conversion cutoff date in your existing practice management software, reports will be inaccurate for End of Month and End of Year due to duplicate entry.

Actual Data varies from dataset to dataset, visual representation may be different.

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