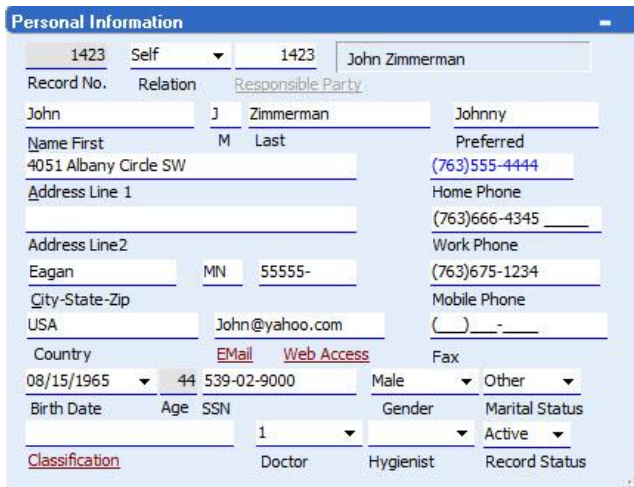


Patient Information:



Personal Information

1423 Self 1423 John Zimmerman

Record No. Relation Responsible Party

John J Zimmerman Johnny

Name First M Last Preferred

4051 Albany Circle SW (763)555-4444

Address Line 1 Home Phone

(763)666-4345

Address Line 2 Work Phone

Eagan MN 55555- (763)675-1234

City-State-Zip Mobile Phone

USA John@yahoo.com

Country EMail Web Access Fax

08/15/1965 44 539-02-9000 Male Other

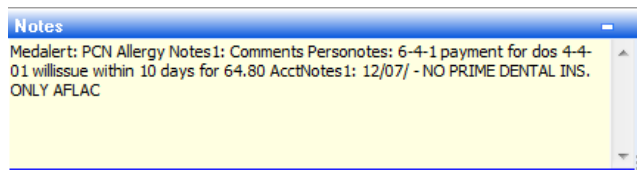
Birth Date Age SSN Gender Marital Status

1 Active

Classification Doctor Hygienist Record Status

- Patients grouped by Account ending in zero
- First Name
- Last Name
- Middle Initial
- Preferred Name
- Address
- City
- State
- Zip
- Home Phone Number
- Work Phone Number
- Mobile Phone Number
- Email Address
- Gender
- Marital Status
- Birth Date
- Doctor of Record
- Record Status – Active and Auxiliary

Notes:

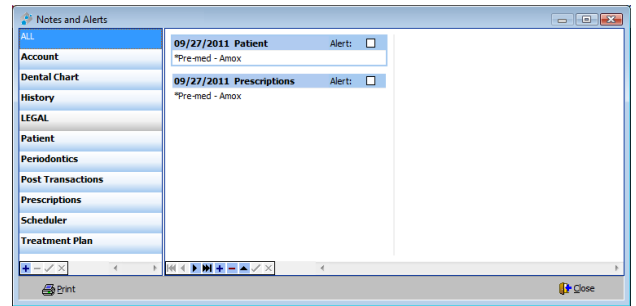


Notes

Medalart: PCN Allergy Notes1: Comments Personotes: 6-4-1 payment for dos 4-4-01 willissue within 10 days for 64.80 AcctNotes1: 12/07/ - NO PRIME DENTAL INS. ONLY AFLAC

- Office
- Account Code 1 and Account Code 2
- Insurance Coverage display P, S or N

Notes and Alerts:



Notes and Alerts

09/27/2011 Patient Alerts:

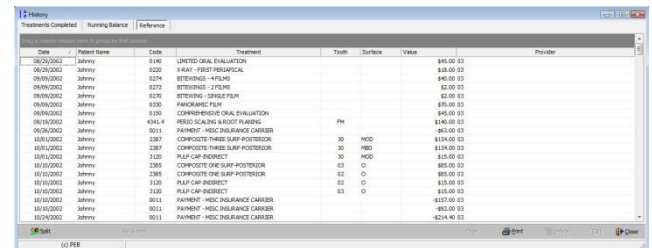
Account *Pre-med - Amox

09/27/2011 Prescriptions Alerts:

Prescriptions *Pre-med - Amox

- Patient Messages
- Medical Alert 1 to 5

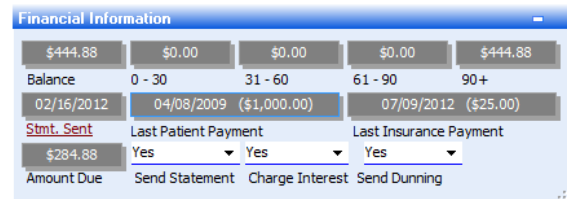
History Reference Tab:



Date	Patient Name	Code	Treatment	Tooth	Surface	Value	Provider
08/20/2002	Johnny	0140	LIMITED ORAL EVALUATION			\$45.00 03	
08/20/2002	Johnny	0220	EXAM - FIRST PERIAPICAL			\$30.00 02	
08/20/2002	Johnny	0274	BITEWING - PERIAP			\$40.00 02	
08/20/2002	Johnny	0272	BITEWING - PERIAP			\$20.00 03	
08/20/2002	Johnny	0276	BITEWING - PERIAP			\$20.00 02	
08/20/2002	Johnny	0220	PERIAPICAL FILM			\$20.00 02	
08/20/2002	Johnny	0350	COMPREHENSIVE ORAL EVALUATION			\$45.00 03	
08/20/2002	Johnny	0414	PROFESSORIAL ANDOT PLANNING		PH	\$140.00 02	
08/20/2002	Johnny	0011	PAYMENT - MEDIC INSURANCE CARRIER			\$51.00 02	
08/20/2002	Johnny	2387	COMPOSITE THREE SURF POSTERIOR	30	MED	\$124.00 02	
08/20/2002	Johnny	2387	COMPOSITE THREE SURF POSTERIOR	30	MED	\$124.00 02	
08/20/2002	Johnny	2388	COMPOSITE ONE SURF POSTERIOR	03	O	\$85.00 02	
08/20/2002	Johnny	2388	COMPOSITE ONE SURF POSTERIOR	02	O	\$85.00 02	
08/20/2002	Johnny	2389	COMPOSITE ONE SURF POSTERIOR	03	O	\$137.00 02	
08/20/2002	Johnny	2389	COMPOSITE ONE SURF POSTERIOR	02	O	\$137.00 02	
08/20/2002	Johnny	0011	PAYMENT - MEDIC INSURANCE CARRIER			\$92.00 02	
08/20/2002	Johnny	0011	PAYMENT - MEDIC INSURANCE CARRIER			\$214.00 02	

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

Financial Information:



Financial Information

\$444.88 \$0.00 \$0.00 \$444.88

Balance 0 - 30 31 - 60 61 - 90 90+

02/16/2012 04/08/2009 (\$1,000.00) 07/09/2012 (\$25.00)

Stmt. Sent Last Patient Payment Last Insurance Payment

\$284.88 Yes Yes Yes

Amount Due Send Statement Charge Interest Send Dunning

- 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
- Last Visit Date
- Last Recall Visit
- Recall Frequency
- Next Recall Date – Based on last recall visit date using recall frequency
- TPO Consent – Defaults to conversion date

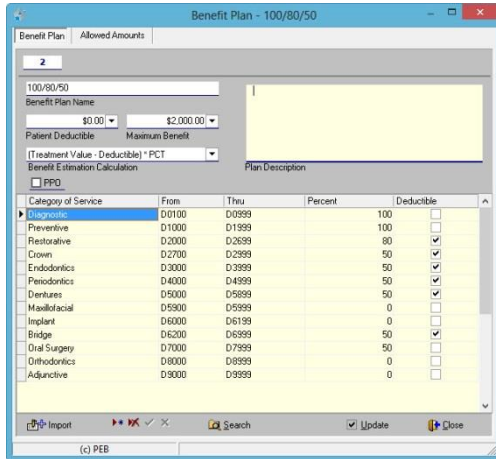
Insurance and Employer Information:

- Relation to Primary Insured Only – identified by patient 0. *Contingent on client decision to link.
- Subscriber Name
- Insurance Id – If blank defaults to SSN# if available
- Group Number
- Benefit Assignment – Defaults to provider
- Insurance Carrier Name
- Employer Name

Insurance Carrier:

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

Benefit Plan:



****Benefit Plan List Only – Not linked to Patients****

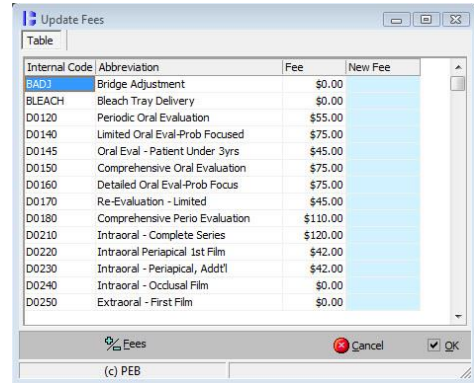
- Benefit Plan Name
- Patient Deductible
- Maximum Benefit
- Benefit Estimation Calculation – Defaults to (Treatment Value – Deductible) * PCT)
- Category of Service
- Codes From and Thru
- Percent

Appointment Book:

A Hygiene 1	B Hygiene 2	C Hygiene 3
Monday, February 22	Monday, February 22	Monday, February 22
Rick Albertson	Michael Albertson	
	Joseph Owen	David Ackerman
Mark Adler	Lance Adler	Nancy Adler
Stephanie Abraham	Lisa Abraham	Gene Abraham
Troy Abraham		Justin Allen

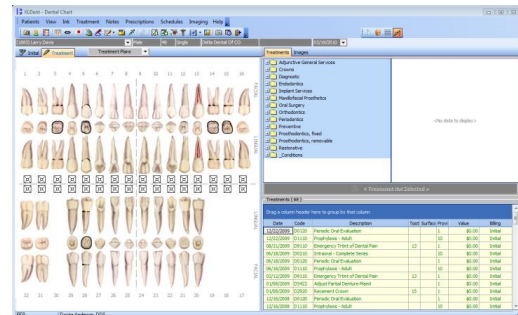
- Practice Appointments will convert to appropriate column
- Assigned to Doctor in the XL Dent™ Scheduler, not linked to provider table.
- Patient Name
- Appointment Date
- Appointment Time
- Appointment Length
- All Appointments convert default Prophy Code [D1110 or D1120] depending upon dentist specialty. Operative appointments may need to be modified following conversion

Fee Table:



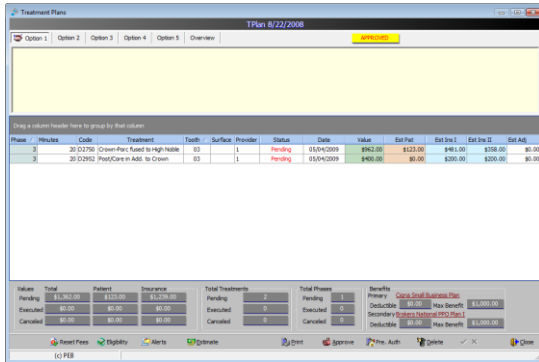
- Procedure Codes
 - ◆ Active ADA Codes
 - ◆ Base Code Abbreviation
- Primary Fee Schedule

XLChart™:



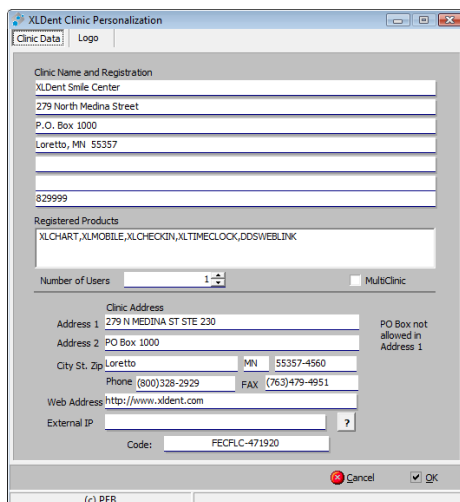
- Restorative Chart -- As a visual representation of treatment completed on valid ADA codes only. This will be recorded as Initial Treatment in XLChart™
- Date
- Patient Name
- Code
- Treatment
- Tooth
- Value
- Provider

Treatment Plans:



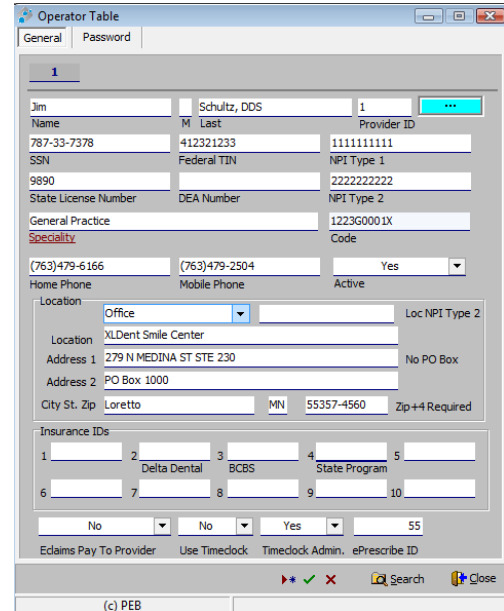
- Treatment Plans and In Progress Plans Convert.
- Phase
- Minutes – Defaults to 0
- Code
- Treatment Description
- Tooth
- Provider
- Status – Defaults to Pending
- Date
- Value
- Patient Value – Defaults to 0
- Insurance Value I – Defaults to 0
- Insurance Value II – Defaults to 0

Practice Information:



- Practice Demographic Information
- Clinic Name
- Clinic Address and Phone
- Clinic Logo

Operator Table:



- 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
- Location – Defaults to Office
- Loc NPI Type 2 – Defaults to Blank
- Location – Defaults to Clinic Name
- Location Address 1 – Defaults to Clinic Address 1
- Location Address 2 – Defaults to Clinic Address 2
- Location City, St, Zip – Defaults to Clinic City, St, Zip+4
- Insurance ID's – If available
- Eclaims Pay to Provider – Defaults to No
- Use Timeclock – Defaults to No
- Timeclock Admin – Defaults to No
- Eprescribe ID – Defaults to Blank

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
- ⊗ Treatment Plans
- ⊗ Referrals
- ⊗ Prescription Listing / Patient Prescriptions
- ⊗ Benefit Plans Allowed Amounts
- ⊗ Patient Social Security Number
- ⊗ Ledger Messages
- ⊗ Benefit Plan Notes
- ⊗ Dependent Insurance Converge

Notes on Conversions:

- Patient Insurance is based on member 0 being the subscriber.
- Responsible party is determined by the ending account number in existing dental software. If it ends in a zero this will be the responsible party in XLDent™. If no zero account exists or are active then family members will converted as individual accounts. Account ending with 9 in existing software will be set to auxiliary in XLDent™
- Benefit Classes in Dentech converted to equivalent categories in XLDent™.

Class #	Name	XLDent Category
1	Prevent	Dia / Preventative
2	Xray	Diagnostic
3	Rest/ext	Restorative / Endo / Oral Surgery
4	crowns	Crown / Bridge
5	prosth	Denture / maxillofacial
6	ortho	ortho
7	no ins	Appropriate Category/ Adjunctive
8	perio	Perio
- Patient Treatment Plans are taken from Treatment Scanning Area of Dentech, this does not output code surfaces.
- Account balance is a combination of patient balance and insurance balance added together. Insurance balance is added to current.

Below are some 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

Current Practice Management software has different status then XLDent™. Married converts to Married, Single Converts to Single, and all other statuses will default to other. When this is not converted or not entered into current system it will default to Other.

Responsible Party ID#

Responsible party is determined by account number in existing software. If not available, patients will need to be manually transferred to the correct Responsible Party after the conversion.

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 first visit 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.

Recall Frequency

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

Patient Status

Only active and auxiliary status patients convert into XLDent™.

Appointment Types on Appointment

When this is not converted the Appointment Category and Notes area will be blank. This can be manually updated after the conversion.

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.