Patient Information:

- ☑ Patients grouped by responsible party
- ☑ First Name
- ☑ Last Name
- ☑ Middle Initial
- ☑ Preferred Name
- ☑ Address Line 1
- ☑ Address Line 2
- ☑ City
- ☑ State
- ☑ Zip
- ☑ Home Phone Number
- ☑ Work Phone Number (No extension)
- ☑ Mobile Phone Number(Pager Number)
- ☑ Fax Number (Other Phone Number)
- ☑ Email Address
- ☑ Gender
- ☑ Marital Status
- ☑ Birth Date
- ☑ Patient SSN
- ☑ Doctor of Record
- ☑ Record Status – Active and Auxiliary Only

Notes:

- ☑ Patient Notes
- ☑ Account Notes

Notes and Alerts:

- ☑ Medical Alerts convert to Patient Record Alert and Prescriptions Alert
- ☑ Patient Alerts convert to Patient Record Alert and Prescriptions Alert

History Reference Tab:

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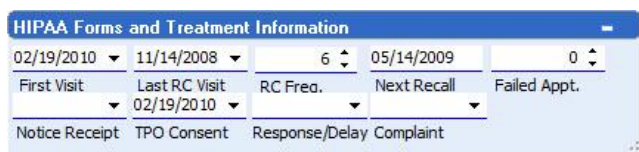- ☑ Code
- ☑ Treatment Description
- ☑ Tooth
- ☑ Surface
- ☑ Value
- ☑ Provider

Financial Information:

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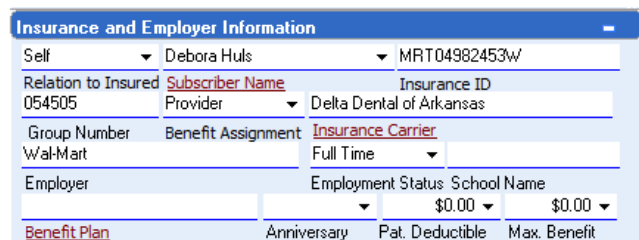☑ Send Dunning – Defaults to Yes

HIPAA Forms and Treatment Information:

☑ First Visit Date
☑ Last Visit Date
☑ Last Recall Visit – Based on Prior Treatment of Prophy
☑ Recall Frequency – Defaults to 6 months
☑ Next Recall Date – Based on last recall visit date using recall frequency
☑ TPO Consent – Defaults to Conversion Date
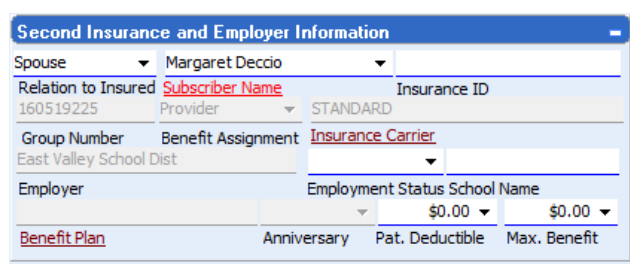
Insurance and Employer Information:

☑ Relation to Primary Policy Holder
☑ Subscriber Name
☑ Insurance Id – If blank defaults to SSN# if available
☑ Group Number
☑ Benefit Assignment – Defaults to Provider
☑ Insurance Carrier Name
☑ Employer Name - Converts from Group Plan
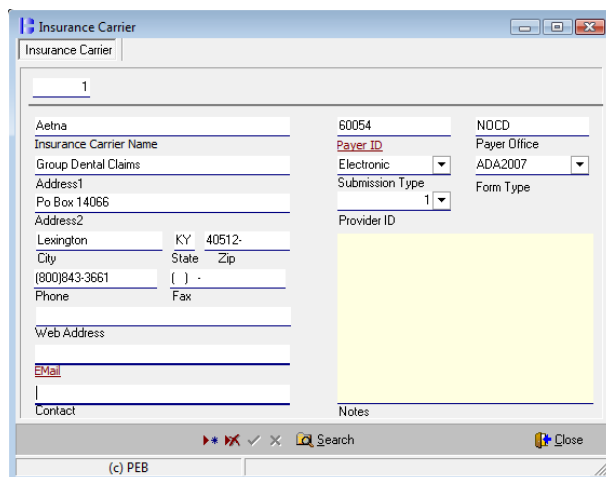
Second Insurance and Employer Information:

☑ Relation to Primary Policy Holder
☑ Subscriber Name
☑ Insurance ID – If Blank pulls from Subscriber
☑ Group Number
☑ Benefit Assignment
☑ Insurance Carrier Name
☑ Employer Name – Converts from Group Plan

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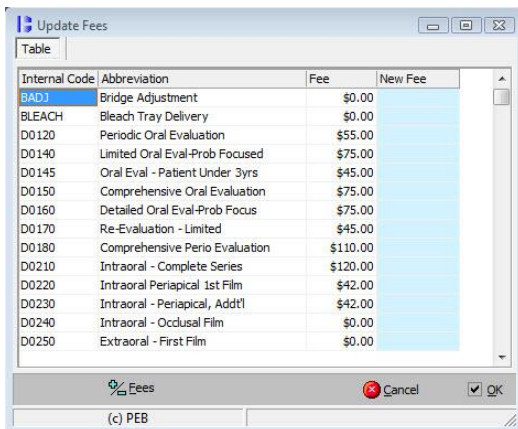
☑ Insurance Carrier Name
☑ Address 1
☑ Address 2
☑ City
☑ State
☑ Zip
☑ Phone
☑ Payer ID – Verify after conversion
☑ Payer Office Always NOCD
☑ Submission Type Always Electronic
☑ Form Type current ADA Form
☑ Provider ID – Defaults to 1

Appointment Book:
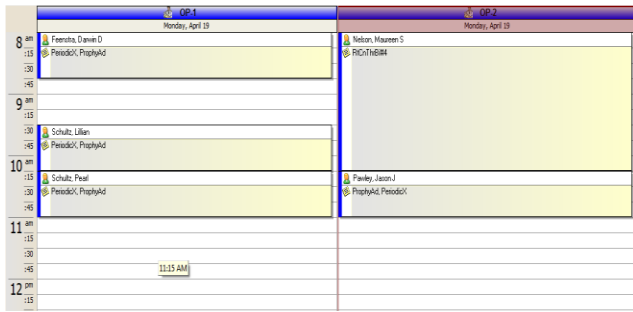
- ☑ Practice Appointments will convert to appropriate column
- ☑ Assigned to Doctor in the XLDent™ Scheduler
- ☑ Patient Name
- ☑ Appointment Date
- ☑ Appointment Time
- ☑ Appointment Length
- ☑ Appointment Notes
- ☑ All Appointments convert with procedure codes if supplied. Operative appointments may need to be modified following conversion.

Fee Table:

- ☑ Procedure Codes
  - ♦ Active ADA Codes
  - ♦ Base Code Abbreviation
- ☑ Primary Fee Schedule (Fee1 or Standard Fee in system)

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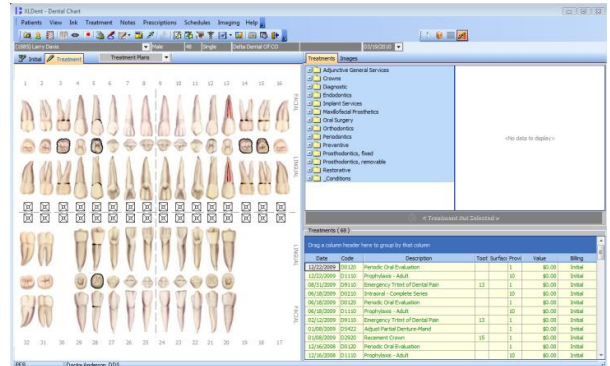
- ☑ Restorative Chart -- As a visual representation of treatment completed on valid ADA codes only. This will be recorded as Initial Treatment in XLChart™
- ☑ Date
- ☑ Patient Name
- ☑ Code
- ☑ Treatment
- ☑ Tooth
- ☑ Surface
- ☑ Value
- ☑ Provider

Progress Note Reference Tab
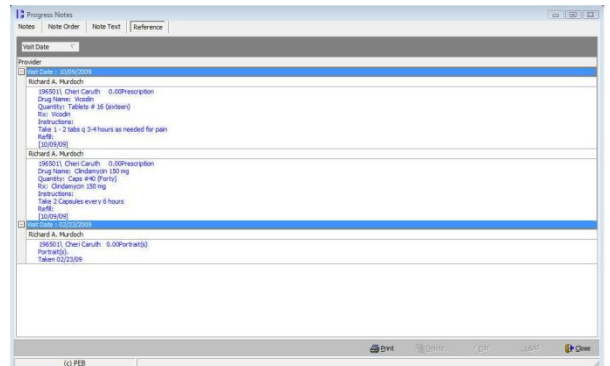
- ☑ Procedure Notes
  - ♦ Date
  - ♦ Note Detail
  - ♦ Provider

Treatment Plans:
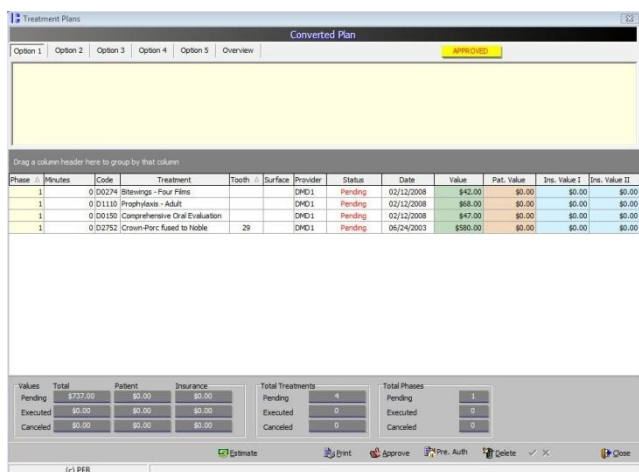
- ☑ Phase - Defaults to 1
- ☑ Minutes – Defaults to 0
- ☑ Code
- ☑ Treatment Description
- ☑ Tooth
- ☑ Surface
- ☑ Provider
- ☑ Status – Defaults to Pending
- ☑ Date
- ☑ Value
- ☑ Patient Value – Defaults to 0
- ☑ Insurance Value I – Defaults to 0
- ☑ Insurance Value II – Defaults to 0

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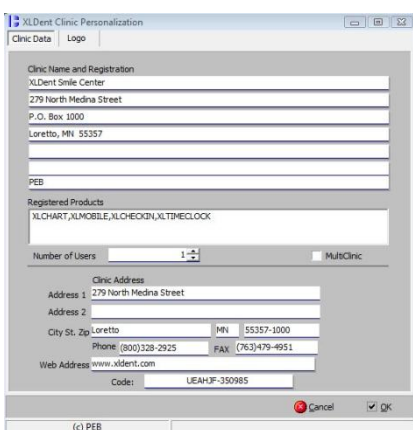
- ☑ Practice Demographic Information
- ☑ Clinic Name
- ☑ Clinic Address and Phone
- ☑ Clinic Logo

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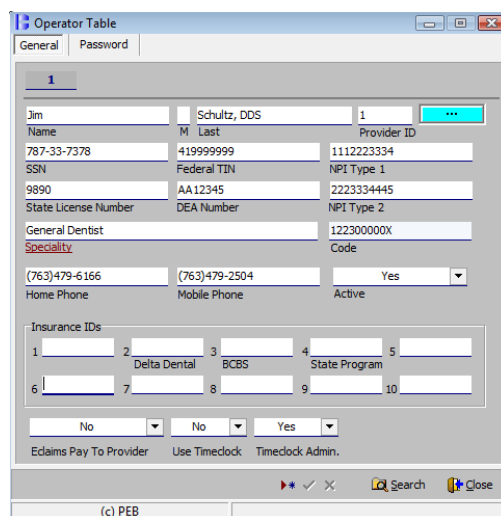
- ☑ Provider Information for all Doctors and Hygienists
- ☑ First Name
- ☑ Middle Initial
- ☑ Last Name
- ☑ Provider ID – Same as previous software
- ☑ SSN
- ☑ Federal TIN
- ☑ NPI Type 1
- ☑ State License Number
- ☑ DEA Number
- ☑ NPI Type 2
- ☑ Specialty
- ☑ Home Phone
- ☑ Mobile Phone
- ☑ Active –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

File Location:
?:\ezdental\ or ?:\program files\ezdental

Files Needed
?:\ezdental*.* excluding Images folder
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
- Referrals
- Prescription Listing
- Patient Prescriptions
- Benefit Plans / Allowed Amounts
- School Name
- Archived and Inactive Patients

Notes on Conversions:

- Patient phone numbers were found in different files. The patient data file took precedence when converting patient phone numbers.
- Patient Insurance may not be converted when linking in existing system is inaccurate or inconsistent.
- If a family member has dual insurance from a single subscriber, the secondary insurance carrier will not pull correctly. This must be reviewed after conversion.
- All adjustments and personal payments will be converted to guarantor.
- All conditions and existing will show in the account reference history.

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

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

Responsible Party ID#

Responsible party is determined by 1st family number found during conversion process. 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.

Preferred Hygienist

When this is not converted all patients will be default blank.

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 6.

Appointment Category 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.