

ChiroSpring



ChiroSpring Desktop User Manual

Welcome

Welcome to ChiroSpring... the most Advanced, Intuitive Chiropractic software on the market! Our mission is to provide the most full-featured, easy to use chiropractic software so that you can spend more time with your patients and less time worrying about your software.

ChiroSpring is multiplatform, works in the cloud, has been designed to work with touch from the ground up and has all of the features you would expect in a leading chiropractic practice management software.

This manual is designed to guide you through the many features in ChiroSpring. We hope that you find the manual helpful and informative. If you should have any questions, please do not hesitate to contact customer support.

Email: support@ChiroSpring.com

Web: www.ChiroSpring.com

Phone: 1-888-426-0007

Hours: M-F 8 am – 4 pm (central)

IMPORTANT: If you have not already done so, please add support@ChiroSpring.com to your contacts list. We have had some customers report emails sent from this email address are being reported as spam and thus not being seen. We will email you from this web address to notify you of software updates, so it is very important you receive the email.

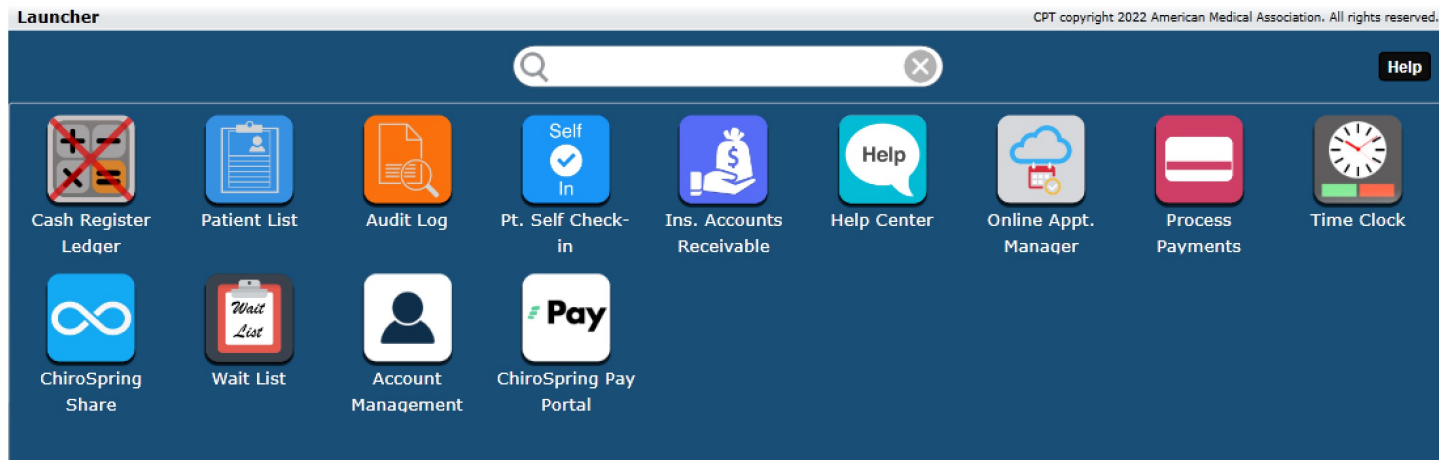
Software updates are announced via email. We can send to only one email address. Please let us know which email address you would like this information sent to.

Welcome

How to search this guide

From time to time, we update the user manual (as we are constantly adding new and innovative features to ChiroSpring). Because of this there may be times when our PDF hyperlinks do not work (see next page for example). However, the great news is this manual is easy to search without them. Each section of the manual is divided into App or Dashboard tile. So, for example, if you want to jump to the BILLING section do a search for the word #Billing. On a PC typically “Control” plus “F” will invoke the search. On a Mac “Command” plus “F” will invoke the search.

Also note that in ChiroSpring we have a Help Center app. This is a Google Search interface with hundreds of articles written by us. We encourage you to search the Help Center (24/7). If there is something not there you would expect, let us know. We can write an article to continue helping the community. 😊



Our Promise

Our Promise to You

Although ChiroSpring has been in development for almost a decade it takes time to refine a product. We have a HUGE following of chiropractors and are pleased to continue adding major advances in features.

With new features it is inevitable there WILL BE BUGS from time-to-time. If you find a bug our promise to you is we will fix as quickly as possible. You are backed by a very large team of doctors and engineers at ChiroSpring, and we absolutely care about YOUR BUSINESS.

Depending on how fast we fix a bug or add a new set of features will determine when we perform software updates. We announce software updates in three ways:

1. We email all customers in advance of the update
2. Update links are posted here: www.installChiroSpring.com
3. If you try to access ChiroSpring after an update has been pushed out a popup will appear with instructions on how to update.

What We Ask From You

We work VERY HARD (7 days per week around the clock) to provide you the BEST software in the industry. Not only are we refining current versions we are usually 2-3 versions down the road adding major features that have not even been announced. Here is what we ask from our customers:

- Feature requests take time and not all requests can be accommodated. What may be a great idea for your practice may not be for the majority of users. We currently have over 1,500 feature requests as of this writing.
- Please treat our staff respectfully. We treat our customers with the utmost respect and courtesy and expect the same. We are business partners after all.
- Before contacting support with a question always search our Help Center app first. We are constantly adding searchable articles (over 800 as of this writing) to make things easier for you. To access Help Center, click the Launcher app on the Front Desk, then click Help Center.
- If you encounter any bug or issue with the software, please notify us first by email at support@ChiroSpring.com. Include the name of the main doctor on your account so we can look you up if needed as well as a callback phone number.
- Be prepared for software updates. ChiroSpring updates automatically for PC users. Please review the full installation steps and videos here: www.installChiroSpring.com **BOOKMARK THIS PAGE 😊**

How ChiroSpring is Delivered

ChiroSpring is available in two ways. Both have their advantages and disadvantages. Some options may not be available based on the computer you are using.

- **Desktop App** – Here you INSTALL ChiroSpring to your Mac or PC.
 - Advantages
 - Use on unlimited computers at no extra cost to you.
 - Navigation can be faster as all of the software is installed on your computer and not rendered through a browser.
 - PC Users – App automatically updates
 - Disadvantages
 - Mac Users - Requires installing/updating software.
 - Will not work on Macs with Catalina or newer for their OS (use Cloud ChiroSpring if this is the case as it will work).
 - Does not support iPad or Chromebooks.
- **Cloud ChiroSpring** – Access ChiroSpring from the Google Chrome browser.
 - Advantages
 - More convenient access.
 - No software to install or update. It auto-updates.
 - Supports Mac (all versions), PC, Chromebooks and iPad.
 - Disadvantages
 - Cloud accounts come at a cost. Visit www.cloudChiroSpring.com for pricing information.
 - May experience some latency due to how the software renders in a browser. Typically this is not noticeable.

How To Search This Manual

This is a very lengthy user manual. On the next pages we have a table of contents. However, it is not hyperlinked. It should give you a good idea on what is in this manual.

The best way to search is to do a Control F (find) and type #SECTION NAME.

As an example, if you want help with Billing search for #billing.

If you want help with the calendar search for #calendar.

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Desktop App – Installation - PC

You can find complete installation instructions at www.InstallChiroSpring.com

First Time Install Procedure

1. [Download](#) and install the ChiroSpring Installer Tool
2. Run the ChiroSpring Installer Tool and enter your Customer ID

Update Procedure

ChiroSpring automatically updates on PC. It's that easy!

TIP: Completely close (shut down) ChiroSpring at the end of the day. Do not leave the program open for multiple days or overnight. The software requires a constant connection to the internet and many computers go to sleep or hibernate. Therefore, we recommend ALWAYS opening the program to start the day vs. leaving it open from the previous day.



Remember to shut down ChiroSpring every day! 😊

Desktop App – Installation - Mac

You can find complete installation instructions at www.InstallChiroSpring.com

First Time Install Procedure

1. [Download](#) and install the Plugin
 2. Download a supported Browser (Firefox ESR or Sea Monkey)
 3. Copy and Paste the CURRENT Install Link into a supported browser. Generate the current link on this page.
 4. When the software loads to 100% click the "Install ChiroSpring" button.
- DONE! :)

If you are running Catalina or newer you must use Cloud ChiroSpring.

Update Procedure

1. Copy and Paste the CURRENT Install Link into a supported browser. Generate the current link on this page.
2. When the software loads to 100% click the "Install ChiroSpring" button.
3. Make sure to uninstall the previous version of ChiroSpring by dragging the application to the trash.

TIP: Completely close (shut down) ChiroSpring at the end of the day. Do not leave the program open for multiple days or overnight. The software requires a constant connection to the internet and many computers go to sleep or hibernate. Therefore, we recommend ALWAYS opening the program to start the day vs. leaving it open from the previous day.



Remember to shut down ChiroSpring every day! 😊

Mac Installation – Keeps Saying to Install Silverlight



How Do I Get
Past This? I Already
Have Silverlight
Installed.

If you constantly see a message to Install Silverlight **this means the browser you are using is not supported**. It probably updated to a newer non-supported version automatically (without you even knowing).

ChiroSpring can ONLY be installed using SUPPORTED browsers and their specific VERSIONS. You can download either Firefox ESR or SeaMonkey from here: www.installChiroSpring.com

If you believe your supported browser UPDATED AUTOMATICALLY you will need to uninstall it and then download and install either Firefox ESR or SeaMonkey from here: www.installChiroSpring.com

PC users should never run into this issue by using the ChiroSpring Installer Tool: www.installChiroSpring.com

If you choose to use Firefox ESR or SeaMonkey make sure you go to the browser's settings and set it to "never check for updates". We explain how to do this for Firefox ESR here:

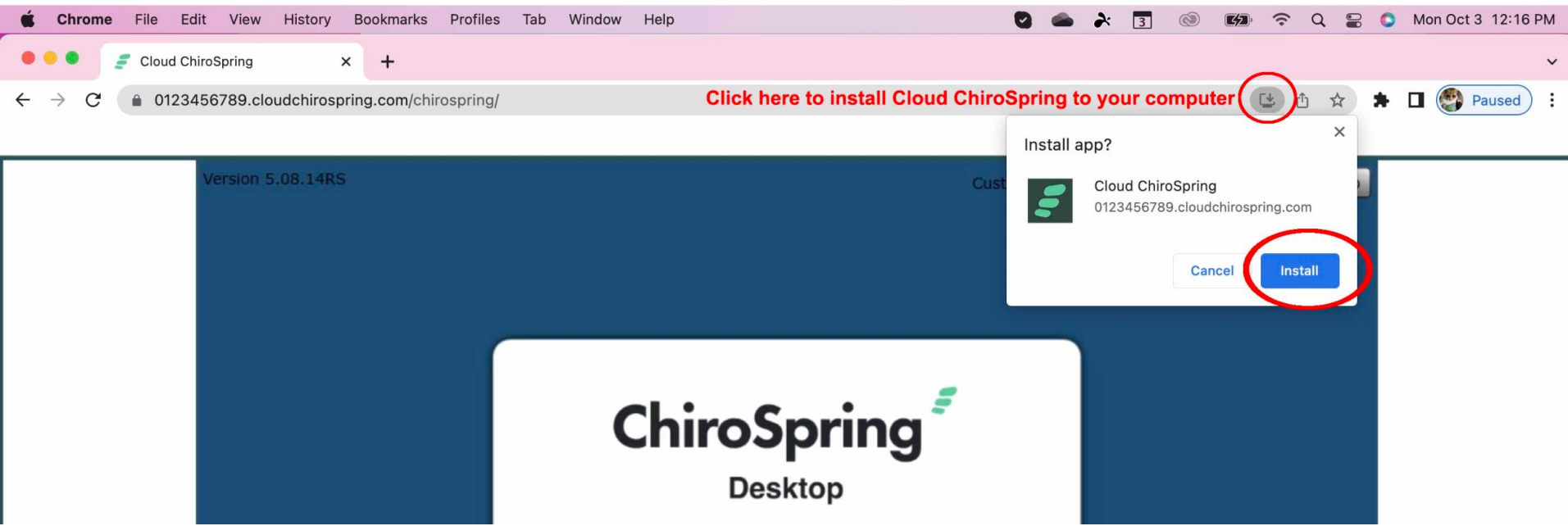
<https://www.installChiroSpring.com/Disable-Updates-Firefox-ESR.php>

Using Cloud ChiroSpring

Using Cloud ChiroSpring is simple. Visit www.cloudChiroSpring.com using the latest Google Chrome web-browser. Once there enter your Customer ID and press submit. That's it! 😊

Once Cloud ChiroSpring opens click the + symbol in the upper right corner. This will install this as a Web-App which offers the following benefits.

- **Faster Access** – Simply click the Cloud ChiroSpring icon every day to open. There is no need to open your browser anymore and visit www.cloudChiroSpring.com
- **Less Interference** - Removes the possibility of browser extensions from interfering with ChiroSpring. This provides you the best experience possible.



How to Get Help - ChiroSpring Customers Portal

Many helpful documents and videos can be found in our ChiroSpring Customers Portal. We recommend you bookmark this link and check back frequently for updated content.

Link: <https://info.chirospring.com/desktoptraining>

BOOKMARK THIS PAGE!



ChiroSpring Desktop Training Materials

Training Videos

We provide a great variety of training videos on various topics to help you learn the software. We also provide a full user manual we recommend you review. It is long but mostly pictures. Click below to download our user manual.

[DOWNLOAD USER MANUAL](#)

[DOWNLOAD GETTING STARTED CHECKLIST](#)



How to Get Help – Help Center app

You can also find quick answers to common questions in our Help Center app. This app uses a google search interface and has hundreds of articles to help you along the way. You can find the Help Center app by clicking the Launcher (left most icon on the Front Desk). Then select “Help Center”.



 drbrian ▾



New Customer Training Videos

Apps - Launcher

Learn about the various apps in CHIROSPRING's Launcher app.

Apps - Settings

Learn about the various apps in CHIROSPRING's Settings app.

Apps - Front Desk

Get help on the various apps on the CHIROSPRING Front Desk.

CHIROSPRING PAY

Help Center - Find Answers Quick and Easy

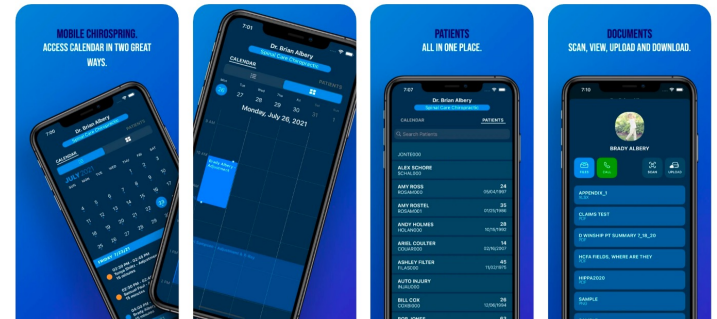
You can quickly find answers to your questions about using CHIROSPRING software.

iPhone/iPad apps

We provide **TWO** great iPhone apps. Both are different in what they offer so read below for a full understanding of each. The two apps are [ChiroSpring](#) and [ChiroSpring Browser](#).

ChiroSpring

- Here are just a few things you can do right from your iPhone:
- Access your calendar in two ways - quick view and detail view
- Schedule patients or edit appointments
- See all patients in one place
- Tap to call a patient
- Scan and upload documents to a patient profile
- View existing patient documents within a patient profile
- Share documents with your patient
- Snap a photo for the Patient Profile image



ChiroSpring Browser

This app launches Cloud ChiroSpring in our custom browser. We've included a digital trackpad for scrolling and pinch-to-zoom. When you open this app enter your Cloud ChiroSpring URL (you can generate this URL by visiting www.cloudChiroSpring.com and entering your Customer ID).

What is the Cloud?



ChiroSpring is a cloud-based software service. This means that your Electronic Health Records can be made available to you from any Internet connected computer. To ensure the safety of your patient and clinic information, we securely encrypt and store your practice data on a HIPAA compliant server and encrypt all data while in transit between your computer and the cloud. We also perform automatic backups of your ChiroSpring data, helping to ensure that your information is available anytime you need it. Because your ChiroSpring data is stored in the cloud, a strong Internet connection is critical to the proper function and speed of the software. To ensure the best experience with ChiroSpring, we provide our customers a help document to assist them in optimizing their Internet and local networking equipment. This document can be found in our Help Center.

Highlights from this help document include:

- If you are experiencing slow or sporadic connection to ChiroSpring while using a computer that is wirelessly connected to the Internet, we recommend that you reset your modem and router. A simple reboot of this equipment takes just a minute or two and can solve an abundance of computer connection problems.
- Satellite Internet connections often experience a high level of latency in their connection, making them slower than many DSL or Cable Internet connections. This is due to the signal's required travel time to and from the provider's orbiting satellites. Therefore, ChiroSpring customers with satellite connections will often experience slower software response times than those who use DSL or Cable services.
- Use wired Internet connections, when possible, for the fastest and most reliable service. Even if your wireless connection appears strong, interference from other wireless devices (such as wireless hot-spots, microwaves, or baby monitors) can delay or eliminate your computer's Internet connection. Therefore, connect direct when possible and eliminate interfering devices from your workspace.

Take a moment to review the help document found at the provided link. Just a few minutes of reading could significantly improve the efficiency of your connection to the ChiroSpring cloud.



ChiroSpring Pay

CHIROSPRING PAY PROVIDES THE EASIEST AND MOST ROBUST PAYMENT SOLUTION IN CHIROSPRING.

- ✓ Streamlined workflow (no external browser)
- ✓ Store cards on file (securely with a tokenized system)
- ✓ Create scheduled and recurring payments
- ✓ Reverse/void directly in CHIROSPRING
- ✓ Keyed entry support (machine not required)
- ✓ Fast enrollment process (directly in CHIROSPRING)
- ✓ Transparent pricing with no hidden or monthly fees
- ✓ Amazing support



To get started navigate in ChiroSpring to Settings/Practice Info/Integrated Payments

Getting Started With ChiroSpring

Prior to training you and your staff you will be required to have each read the user manual as well as watched all training videos. The following next slides offer a great “to-do” check list to ensure you are getting everything setup correctly.

We will send this checklist to you separately also as each task must be initialed and faxed back to us. 😊

We want to ensure our users know and understand how to use the software and these bullet points are crucial to understand. 😊

Remember, we **WANT YOU TO BE SUCCESSFUL** and Love ChiroSpring so please follow all of our training instructions. 😊

Getting Started Check List



- 1. Install ChiroSpring onto all computers. PC users will install the ChiroSpring Installer Tool. ChiroSpring auto-updates for PC users. Mac users must install Firefox ESR and **set it to never update**. Procedures can be found here: www.installChiroSpring.com.
- 2. Ensure, when provided, you keep your ChiroSpring Customer ID and secure PIN (we mail this to you) on file. You will not want to lose these.
- 3. Ensure all staff have read the user manual and watched all training videos. You will operate much better if you have done this. You can find them in our Customer's Portal.
- 4. Determine your clearinghouse (Office Ally, Etactics, Waystar, Infinedi, Trizetto, Smart Data Solutions, BCBS-MI) If billing CMS-1500.txt submit a batch of claims for your clearinghouse to map.

If billing EDI ensure you have setup your clearinghouse in Settings/Insurance/Clearinghouses. Providers will need their name, address, DOB, phone and email in Settings/Users.

Search our Help Center for your clearinghouse for specific guidance.

If you are using a clearinghouse not mentioned, it might work. The ones above are the ones we have tested.

- 5. All Insurance Carriers have been put into the Insurance Carrier's app in Settings.

For EDI you must have a Payor ID and proper claim filing indicator for your insurance carriers (see EDI Options tab).

For Medicare we created a guide on Medicare as primary, Medicare as secondary and Medicare with Medigap. You can search our Help Center for this our download from our Customer's Portal. You can also set the Edit Allowed Amounts.

Getting Started Check List



- 6. If ChiroSpring is importing patients from your previous software let us know ASAP so we can assist.
- 7. Perform patient balance transfers to provide patient balances in ChiroSpring. Create a product called “Balance Transfer”. Open Cash Register, select your patient, then product and change the price to the patient’s balance. Then click “No Receipt”.
- 8. Setup all of your user accounts. You can block any app, dashboard tile, SOAP note tab as well as set more user options in Settings/Users.
- 9. Customize your calendar and setup your work schedule (Settings/Calendar).
- 10. Setup your Rooms for Patient Flow (Settings/Rooms).
- 11. Setup your Visit Types and default colors/length/occupy columns (Settings/Visit Types).
- 12. Setup your Block-out Calendar Types in Settings/Block-out Calendar Types. Block out time on your calendar by right clicking and selecting ‘Add Block-out Time’.
- 13. Ensure you have properly entered your provider NPI, Billing NPI, Tax-ID and other billing information for your practice (Settings/Practice Info and Settings/Users). You can preview a claim to determine if things look correct.
- 14. If printing CMS-1500 claims ensure you have calibrated your printer with a blank CMS-1500 form (Settings/Forms).
- 15. Setup prices for all products and services. Determine if products are taxable. Determine if products or services can automatically copy to the next visit (e.g. you would want to disable this for an Exam most likely). Settings/Products and Settings/Services.
- 16. Ensure you have set your tax rate in Settings/Practice Info/Facility Locations.

Getting Started Check List



- 17. Determine from a global level if you are accepting copay, coinsurance and deductible (Settings/Practice Info/Charge Options).
- 18. Determine if you want payments to automatically apply to charges. They can apply to oldest charges first or charges matching the same visit date. Settings/Practice Info/Charge Options.
- 19. Customize your charges grid (Settings/Pin Charge Codes). This is on a per-user basis. Once you have charges pinned how you want them other user's logging in can use the 'Copy From User' option to make their charges grid match yours.
- 20. Pin your favorite diagnosis codes to folders (Settings/Diagnoses/ICD10 Associated Text). This is a global setting.
- 21. Customize your SOAP Macros

Create SOAP Macros (Settings/SOAP Macros Basic or Advanced SOAP Macros). Use the Nest SOAP Macros app to place Macros into folders.

Pin SOAP Macros (Settings/SOAP Macros/Pin SOAP Macros)

- 22. Setup "How Heard About" options in Settings/How Heard About. These are used in the Practice Analysis and How Heard About reports. If you use the patient kiosk this option will be asked for patients to complete.
- 23. Setup your default appointment type (Settings/Practice Info/Facility Locations). As an example, if 90% of your visits are an Adjustment you might want new appointments to default to this for faster scheduling.
- 24. Create a custom receipt and statement footer (Settings/Practice Info/General). The footer will appear at the bottom of the receipt or statement.

Getting Started Check List



- 25. Setup Appointment Reminders. This requires an account with www.remindercall.com. You would then copy and paste a specific username and password from Settings/Patient Messaging/Appointment Reminders into www.remindercall.com.
- 26. Schedule training with our support staff. Times fill quickly so we require a weeks notice for best availability.
- 27. If using multiple locations setup your default location. This can be per computer or per user.

Settings/Practice Info/Faculty Locations/Default Facility Location For This Computer

Settings/Users/Service & Billing Location/My Preferred Location

You also need to set your Primary Access. Settings/Users/Provider Info 2. If you are using the desktop app select this option. If you are using Cloud ChiroSpring select this option. Default location uses this setting so make sure it is correct. You can of course change it at anytime.

- 28. Arrange the order of your Dashboard Tiles (Settings/Arrange Dashboard).
- 29. For PI Practices add your attorneys (Settings/Attorneys). This list will be available inside the Insurance Cases tile within a patient dashboard.
- 30. Sign up for ChiroSpring Pay for your integrated payments.

Getting Started Check List



- 31. Customize your charges colors (this is based on Billing State). As an example, you might want bill primary to be blue and bill secondary to be red. Settings/Practice Info/Charge Options.
- 32. Set your option for Patient Statements to not show charges that are NOT reconciled. As an example, you might not want an x-ray charge to appear on a patient statement until you have gotten the remittance back from insurance and reconciled the charge.

This option is in Statements/Non-Reconciled Insurance Charges.

- 33. If using the Online Scheduler or Patient Kiosk ensure you have created a password for them (this is a separate password from your ChiroSpring password. However, you can make them the same if you want). Settings/Users/Kiosk Online Scheduler Password.
- 34. Online Scheduler – Make sure you have all of your provider’s work schedules setup correct. Also, you will need to pin which visit types you want shown on the online scheduler: Settings/Users/Online Scheduling.

In addition, for any visit type you want shown on the online scheduler you must mark it “show” using the ‘Online Scheduler Status’ dropdown. This is in Settings/Visit Types.

Set an email address for appointment requests to send to in Settings/Practice Info/Online Scheduling. If blank emails will be sent to the provider’s email address (if one was entered in Settings/Users).

We have a full training video on our Online Scheduler in our Customer’s Portal.

Getting Started Check List



- 35. Patient Kiosk – Customize which sections (e.g. smoking status, demographics, etc.) you want shown. You can set them to show for the first visit or all visits. Also determine if you want a section to be required. This is on a per-provider basis so ensure you have set these up for all providers. Settings/Kiosk/Kiosk.

Also upload your acknowledgments (as text only) and create additional intake questions. Use leading questions (yes/no questions that when marked 'Yes' will display all questions inside that category to the patient.

We have a full training video on our Patient Kiosk in our Customer's Portal.

- 36. Contacts can be exported in Settings/Export Data. You can import these into services like Constant Contact or Mail Chimp for marketing. You can also export missing in action patients to put them into a marketing funnel.
- 37. SOAP notes can be created for past visit dates. Schedule the patient for this date/time (in the past). Then right click on them (on the Calendar) and select Edit SOAP.
- 38. I am familiar with the guarantor option in the patient profile. This allows me to put Mom/Dad as a guarantor for a patient. The patient statement will then be addressed to the guarantor.
- 39. I understand how to set a product or service as "Bill to Insurance". If set to 'No' the product or service would never appear on a claim. (Settings/Products or Settings/Services).
- 40. I understand how to put an insurance case on hold (drop down on the top of the Insurance Case). When on hold, charges will not appear on claims until the hold is removed. Inside the Billing app is a Hold folder so you do not lose track of these charges. You can remove the hold inside the Billing app or inside the Insurance Case.

Getting Started Check List



- 41. ChiroSpring provides two iOS apps called ChiroSpring and ChiroSpring Browser.
- 42. I understand the ChiroSpring staff is helpful and friendly and want me to succeed. If I get stuck, I will work with ChiroSpring to resolve any issues. :)

I have read and understood the following:

- 44. Making a change in settings requires a full exit of ChiroSpring. Then re-open (this refreshes the database).
- 45. Reconciling insurance payments is a MUST. If not performed accounts receivable will never be correct.
- 46. The Recent Patient's list on Front Desk only displays recent patients. Press 'Enter' after typing a partial name to query a full database return.
- 47. Fast internet and a business class router with no WiFi dead zones are a must.
- 48. The Help Center can be accessed 24/7 in Launcher/Help Center. There are over 800 searchable articles here that we wrote to help you.
- 49. Exported claims are found in your document's folder in Documents/ChiroSpring/Exported Claims.
- 50. How to rebill charges (Billing app or Visits tile are the easiest places).
- 51. The Charges Report (located in Dashboard/Insurance Cases) is beneficial for attorneys.
- 52. I understand how to add a payment to a patient using Dashboard/Ledger.
- 53. I understand how to print a patient ledger and visit receipts (Dashboard/Ledger and Dashboard/Visits).
- 54. I understand workflow is important and the same user cannot edit the same data element at the same time. The Front Desk Awaiting Checkout column is designed so the Front Desk knows the provider is done with the patient and can safely be checked out (e.g. provider is not actively editing a SOAP note at the exact time a patient is being checked out). Provider's can complete their note after the patient has been checked out.

Transferring Balances/Credits

Before you start using ChiroSpring we recommend entering in all of your current patients prior to going live. We also recommend transferring all of their balances from the software you were using previously. We may be able to transfer in your patient names, DOB, etc. This depends on the previous software you were using. We are unable to transfer in any SOAP notes, balances or any other detailed patient information.

When transferring from a previous software you will need to generate a report from your old software showing all of your patient balances and credits (what you owe the patient). We recommend inputting all of your balances and credits the day before you go live.

There are three steps to ensure a smooth transition from your old software to ChiroSpring.

1. Transfer Balances (what patients owe you) from your old software into ChiroSpring
2. Transfer Credits (what you owe the patient) from your old software into ChiroSpring
3. After 1 and 2 above are complete, ZERO OUT all balances and credits from your old software. **You will still need to periodically run reports from your old software and repeat steps 1, 2 and 3 every month until you have finished reconciling all claims in your old software.** This is because reconciling remittances in your old software may affect the patient ledger thereby giving the patient a balance or credit which would subsequently need to be transferred into ChiroSpring.

Transferring Balance – Old Software into ChiroSpring

To transfer a Credit (positive balance) from your old software into ChiroSpring follow these steps.

- Go to the patient ledger for your patient.
- Go to the “Payments” tab.
- Click “Add Payment”.



Ledger

Add Payment

- Click the “Transfer” tab
- Enter the amount (positive amount) you are transferring into ChiroSpring
- In “Comments” type something similar to:
“Transferring patient credit from previous software”.

Your patient will now have a credit on their account. You now MUST zero out this credit in your OLD software (otherwise your patient will have a credit in each software).

Enter Payment

Payment Info	Assign Payment
<input type="button" value="Cash"/> <input type="button" value="Credit"/> <input type="button" value="Check"/> <input type="button" value="Return"/> <input type="button" value="Writeoff"/> <input type="button" value="Transfer"/> <input type="button" value="Other"/>	<p>Provider is adding a credit to the patient's account. Useful for transferring a patient credit from an existing system into ChiroSpring.</p> <p>This date reflects payment date on reports</p> <p>Payment Date 3/14/16 <input type="button" value="15"/></p> <p>Facility Location Main ▼</p> <p>Payer Chad Thompson</p> <p>Amount 45.00</p> <p>Comments Transferring patient credit from previous software</p>

<input type="button" value="1"/>	<input type="button" value="2"/>	<input type="button" value="3"/>
<input type="button" value="4"/>	<input type="button" value="5"/>	<input type="button" value="6"/>
<input type="button" value="7"/>	<input type="button" value="8"/>	<input type="button" value="9"/>
<input type="button" value="."/>	<input type="button" value="0"/>	<input type="button" value="C"/>

Once a payment is entered it is strongly recommended that its payment amount be applied to charges it will pay for. This is for accurate book-keeping. If the Auto-Apply Payments setting is enabled in Practice Settings then ChiroSpring will

Transferring Balance – Old Software into ChiroSpring

Enter Payment

Payment Info

Cash

Credit

Check

Return

Writeoff

Transfer

Other

Assign Payment

Provider is adding a credit to the patient's account. Useful for transferring a patient credit from an existing system into ChiroSpring.

This date reflects payment date on reports

Payment Date

3/14/16



Facility Location

Main

Payer

Chad Thompson

Amount

45.00

Comments

Transferring patient credit from previous software

1

2

3

4

5

6

7

8

9

.

0

Cl

Once a payment is entered it is strongly recommended that its payment amount be applied to charges it will pay for. This is for accurate book-keeping. If the Auto-Apply Payments setting is enabled in Practice Settings then ChiroSpring will

Transferring Balance – Old Software into ChiroSpring

If the patient owes you money you are going to want to transfer what they owe you from your old software into ChiroSpring. Again, we recommend you run a report from your previous software and enter in all patient balances and credits the day before you go live. Then zero out all patient balances and credits from your old software after you have transferred into ChiroSpring.

To transfer a patient balance from your old software into ChiroSpring follow the steps below:

1. Create a charge called “Patient Balance Transfer – Previous Software” by going to Settings/Products



- To create your new product, click “Add New”. Type your product name and leave the price as \$0.00.

NOTE: All changes you have made to products will not be available to use until AFTER you have shut down ChiroSpring completely and re-opened.

Products	
patient	
Patient Balance Transfer-Pr\$0.00	
UPC:	0.000%
SKU:	Qty: 0

Product Name
Patient Balance Transfer-Previous Software

UPC #



Transferring Balance – Old Software into ChiroSpring

This is the products screen. Here we are adding a product called “Patient Balance Transfer – Previous Software”

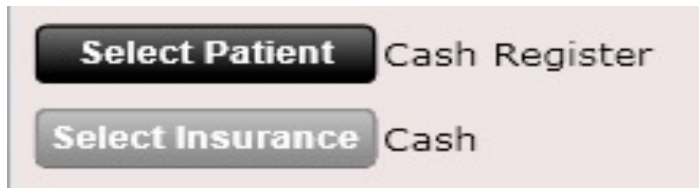
Products CPT copyright 2013 American Medical Association. All rights reserved.

Products	Details	
patient	Product Name Patient Balance Transfer - Previous Software	Description
Patient Balance Transfer -\$0.00 Previous Software	UPC # 	Manufacturer
UPC: 0.000%	NDC # 	SKU #
SKU: Qty: 0	Price 0.00	Cost 0.00 X
	Is Taxed No	Tax Rate ? 0.000
	Code (CPT®)	Bill To Insurance No
	Modifier 24d	Copy Next Visit ? Yes
	POS ? 24b	
	EMG ? 24c	
	EPSDT ? 24h	
	Inventory	
	Qty On Hand 0	Reorder at Qty 0
	Reorder to Qty 0	Reorder by Qty 0
	Qty On Order 0	Add to Inventory
	SOAP Free Text (this text will be appended to the printed SOAP note)	
	Subjective: 	
	Objective: 	
	Assessment: 	
	Plan: 	
	Discharge: 	

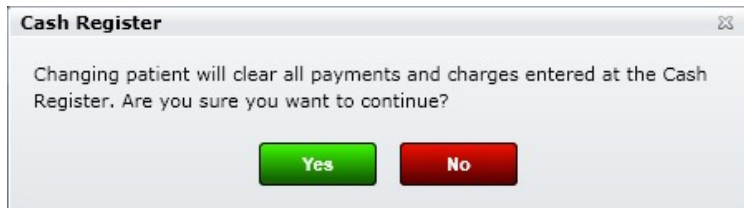
Close Dock Add New Delete Cancel Save

Transferring Balance – Old Software into ChiroSpring

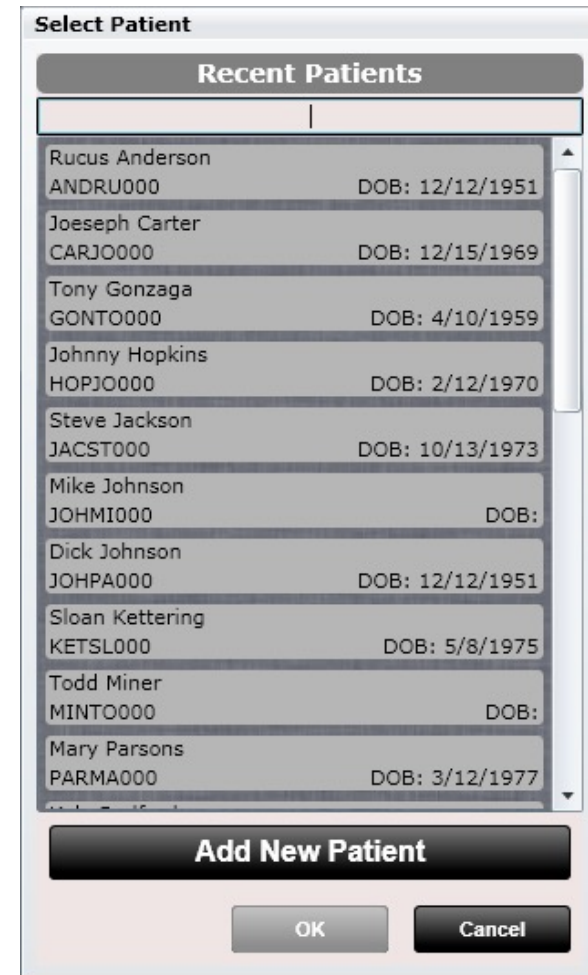
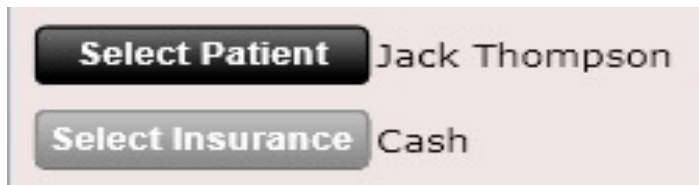
2. Next go to the cash register by clicking the Cash Register app from the front desk.
3. Click the “Select Patient” button at the top above the charges list box.



4. Select your patient from the patient dialog box.
5. A dialog will open stating all payments and charges will be cleared. Click “Yes”.

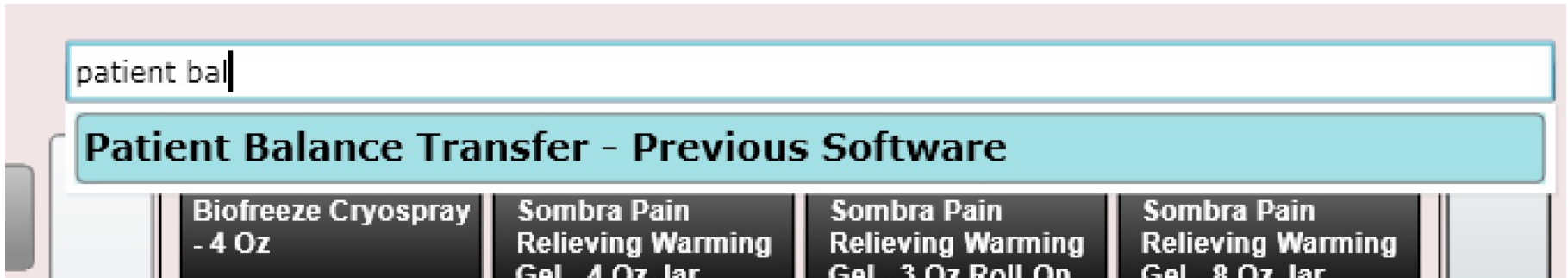


5. You should now see your patient as selected.



Transferring Balance – Old Software into ChiroSpring

6. Next search for your Patient Balance Transfer Charge in the search bar above the charges grid. Select the charge. In this example the charge I am using is called “**Patient Balance Transfer – Previous Software**”.



Transferring Balance – Old Software into ChiroSpring

Select Patient Jack Thompson Select Provider

Select Insurance Cash

Charges

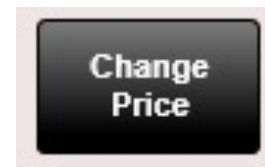
Patient Balance Transfer-Previous S	\$0.00
	Tax: 0.00%
SKU:	Dis: \$0.00
Price: \$0.00 (Cash)	Qty: 1

7. After selecting the charge it will appear in the charges list box with a total of \$0.00.
8. Click on the charge. Note it's price is \$0.00.

Charges

Patient Balance Transfer-Previous S	\$0.00
	Tax: 0.00%
SKU:	Dis: \$0.00
Price: \$0.00 (Cash)	Qty: 1

9. Then click on “Change Price” from the button grid below.



Transferring Balance – Old Software into ChiroSpring

10. Enter the patient balance in the New Price field. Then click “Ok”.
11. The charge will now reflect the correct price.
In this example the Patient Balance Transfer amount is \$45.29.
12. Click No Receipt and you are done. The patient will now have a balance on their ledger reflecting the amount you entered.

No Receipt

Select Patient Jack Thompson **Select Provider**

Select Insurance Cash

Charges

Patient Balance Transfer-Previous	\$0.00
Tax:	0.00%
SKU:	Dis: \$0.00
Price: \$0.00 (Cash)	Qty: 1

Change Price

New Price
45.29

Current Price
\$0.00

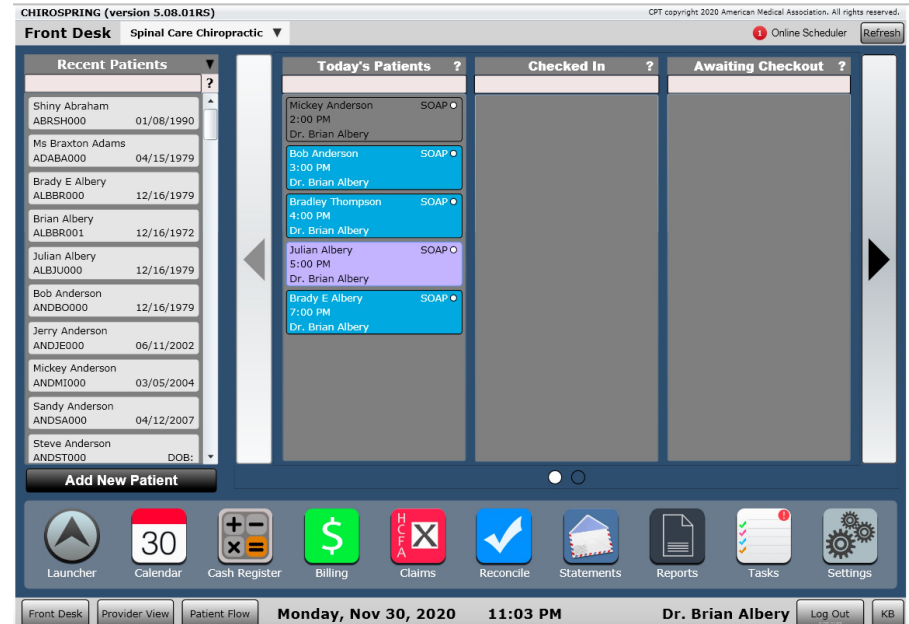
1	2	3
4	5	6
7	8	9
.	0	Cl

OK **Cancel**

Front Desk

The front desk is a highly organized central location that helps keep track of your patients, move them into appropriate columns and launch apps as needed. It is composed of three basic parts.

- **Recent Patients column on the left**
 - This includes the most recent 400 patients you have scheduled or added to the software
- **To the right you will find more columns which show you the current status of the patient**
 - Today's Patients
 - Checked In
 - Awaiting Checkout
 - Checked Out Patients
 - Missed
 - Unfinished SOAP Notes



Below the columns are apps which can be opened at any time

- Launcher
- Calendar
- Cash Register
- Billing
- Claims
- Reconcile
- Statements
- Reports
- Tasks
- Settings

View of Front Desk – Page 1

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Front Desk Spinal Care Chiropractic 1 Online Scheduler Refresh

Recent Patients	Today's Patients ?	Checked In ?	Awaiting Checkout ?
Shiny Abraham ABRSH000 01/08/1990	Mickey Anderson SOAP 2:00 PM Dr. Brian Albery		
Ms Braxton Adams ADABA000 04/15/1979	Bob Anderson SOAP 3:00 PM Dr. Brian Albery		
Brady E Albery ALBBR000 12/16/1979	Bradley Thompson SOAP 4:00 PM Dr. Brian Albery		
Brian Albery ALBBR001 12/16/1972	Julian Albery SOAP 5:00 PM Dr. Brian Albery		
Julian Albery ALBJU000 12/16/1979	Brady E Albery SOAP 7:00 PM Dr. Brian Albery		
Bob Anderson ANDBO000 12/16/1979			
Jerry Anderson ANDJE000 06/11/2002			
Mickey Anderson ANDMI000 03/05/2004			
Sandy Anderson ANDSA000 04/12/2007			
Steve Anderson ANDST000 DOB:			

Add New Patient

Launcher Calendar Cash Register Billing Claims Reconcile Statements Reports Tasks Settings

Front Desk Provider View Patient Flow **Monday, Nov 30, 2020 11:03 PM** Dr. Brian Albery Log Out KB

View of Front Desk – Page 2

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Front Desk Spinal Care Chiropractic 1 Online Scheduler Refresh

Recent Patients	Checked Out Patients ?	Missed	Unfinished SOAP Notes ?
<p>Shiny Abraham ABRSH000 01/08/1990</p> <p>Ms Braxton Adams ADABA000 04/15/1979</p> <p>Brady E Albery ALBBR000 12/16/1979</p> <p>Brian Albery ALBBR001 12/16/1972</p> <p>Julian Albery ALBJU000 12/16/1979</p> <p>Bob Anderson ANDBO000 12/16/1979</p> <p>Jerry Anderson ANDJE000 06/11/2002</p> <p>Mickey Anderson ANDMI000 03/05/2004</p> <p>Sandy Anderson ANDSA000 04/12/2007</p> <p>Steve Anderson ANDST000 DOB:</p>	<p>Brady E Albery S Appt Time: Nov 30, 6:00 PM K</p> <p>Omar Becker S Appt Time: Nov 30, 1:15 PM K</p>		<p>Brady E Albery S Appt Time: Nov 30, 6:00 PM K Dr. Brian Albery</p> <p>Omar Becker S Appt Time: Nov 30, 1:15 PM K Dr. Miranda Hansen</p> <p>Brady E Albery S Appt Time: Nov 27, 9:00 AM K Dr. Brian Albery</p> <p>Brady E Albery S Appt Time: Nov 25, 2:00 PM Dr. Brian Albery</p> <p>Bob Anderson S Appt Time: Nov 25, 9:20 AM Dr. Brian Albery</p> <p>Ken Burns S Appt Time: Nov 24, 1:00 PM Dr. Brian Albery</p> <p>Bob Anderson S Appt Time: Nov 24, 11:30 AM Dr. Brian Albery</p> <p style="text-align: center;">Load More</p>

Add New Patient


 Launcher


 Calendar


 Cash Register


 Billing


 Claims


 Reconcile


 Statements


 Reports


 Tasks


 Settings

Front Desk
Provider View
Patient Flow
Monday, Nov 30, 2020
11:03 PM
Dr. Brian Albery
Log Out
KB

Front Desk – Provider View

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Provider View

Refresh

Today's Patients	Checked In	Awaiting Checkout	Missed
<p>Mickey Anderson 2:00 PM Spinal Care Chiropractic location</p> <p>Bob Anderson 3:00 PM Spinal Care Chiropractic location</p> <p>Bradley Thompson 4:00 PM Spinal Care Chiropractic location</p> <p>Julian Albery 5:00 PM Spinal Care Chiropractic location</p> <p>Brady E Albery 7:00 PM Spinal Care Chiropractic location</p>			

Front Desk **Provider View** Patient Flow **Monday, Nov 30, 2020** **11:04 PM** **Dr. Brian Albery** Log Out KB

Front Desk – Provider View

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Provider View

Refresh

Unfinished SOAPs

- Brady E Albery
Appt Time: Nov 30, 6:00 PM
Spinal Care Chiropractic locatio
- Brady E Albery
Appt Time: Nov 24, 10:00 AM
Spinal Care Chiropractic locatio
- Brady E Albery
Appt Time: Nov 27, 9:00 AM
Spinal Care Chiropractic locatio
- Brady E Albery
Appt Time: Nov 25, 2:00 PM
Spinal Care Chiropractic locatio
- Brady E Albery
Appt Time: Nov 23, 6:00 PM
Spinal Care Chiropractic locatio
- Brady E Albery
Appt Time: Nov 23, 2:15 PM
Spinal Care Chiropractic locatio
- Brady E Albery
Appt Time: Nov 22, 9:00 PM
Spinal Care Chiropractic locatio
- Brady E Albery
Appt Time: Nov 21, 10:00 AM
Spinal Care Chiropractic locatio
- Brady E Albery
Appt Time: Nov 20, 3:30 PM

Load More

Front Desk

Provider View

Patient Flow

Monday, Nov 30, 2020

11:05 PM

Dr. Brian Albery

Log Out

KB

Front Desk – Patient Flow

Patient flow allows you to triage your patients to specific rooms. You can create rooms in Settings/Rooms. You can also
Make this screen HIPAA compliant in the Rooms app as well in the event you will have this in view of patients

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Patient Flow Refresh

Today's Patients	Treatment Room 2	Therapy Room	Awaiting Checkout
Mickey Anderson 2:00 PM Dr. Brian Albery		Brady E Albery Appt Time: Nov 30, 7:00 PM Checked In: 11:06 PM Dr. Brian Albery	
Bob Anderson 3:00 PM Dr. Brian Albery			
Bradley Thompson 4:00 PM Dr. Brian Albery			
Waiting For Room	Treatment Room 1	Exam Room 1	
	Julian Albery Appt Time: Nov 30, 5:00 PM Checked In: 11:06 PM Dr. Brian Albery		
	Exam Room 2	Healing Room	

Front Desk | Provider View | **Patient Flow** | Monday, Nov 30, 2020 | 11:07 PM | Dr. Brian Albery | Log Out | KB

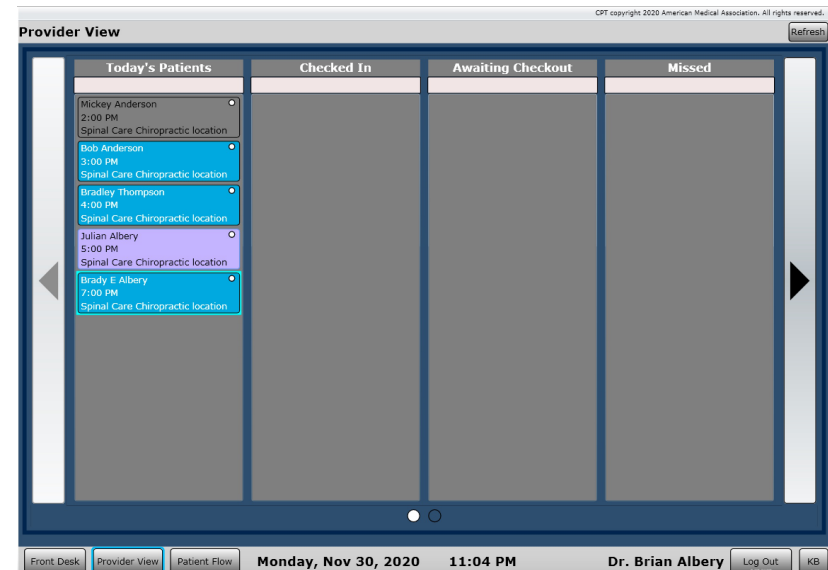
Front Desk – Provider View

ChiroSpring organizes the Front Desk even further by displaying only the logged in provider's patients when on Provider View.

To access the provider view, click the "Provider View" tab at the bottom of the front desk. Here you will have the complete front desk list boxes. The difference is that only YOUR patients will be displayed. In a busy practice with multiple providers this can be a very nice feature.



Power Tip: When in provider view if you double tap on a patient name it will open 'Edit SOAP'.



The screenshot shows the 'Provider View' interface with a 'Refresh' button in the top right corner. The main area is divided into four columns: 'Today's Patients', 'Checked In', 'Awaiting Checkout', and 'Missed'. The 'Today's Patients' column contains a list of patients with their names, appointment times, and locations. The 'Checked In', 'Awaiting Checkout', and 'Missed' columns are currently empty. At the bottom, there is a navigation bar with 'Front Desk', 'Provider View', and 'Patient Flow' tabs, along with the date 'Monday, Nov 30, 2020', the time '11:04 PM', the provider's name 'Dr. Brian Albery', and 'Log Out' and 'KB' buttons.

Today's Patients	Checked In	Awaiting Checkout	Missed
Mickey Anderson 2:00 PM Spinal Care Chiropractic location			
Bob Anderson 3:00 PM Spinal Care Chiropractic location			
Bradley Thompson 4:00 PM Spinal Care Chiropractic location			
Julian Albery 5:00 PM Spinal Care Chiropractic location			
Brady E Albery 7:00 PM Spinal Care Chiropractic location			

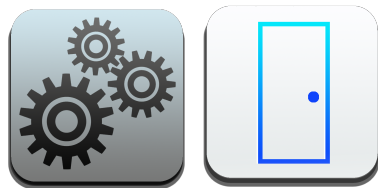
Front Desk – Patient Flow

If you want even further control of your patients locations, we suggest using Patient Flow. The Patient Flow button is located at the bottom of the Front Desk. Selecting this button this will reveal a window showing you all of the rooms in your practice.

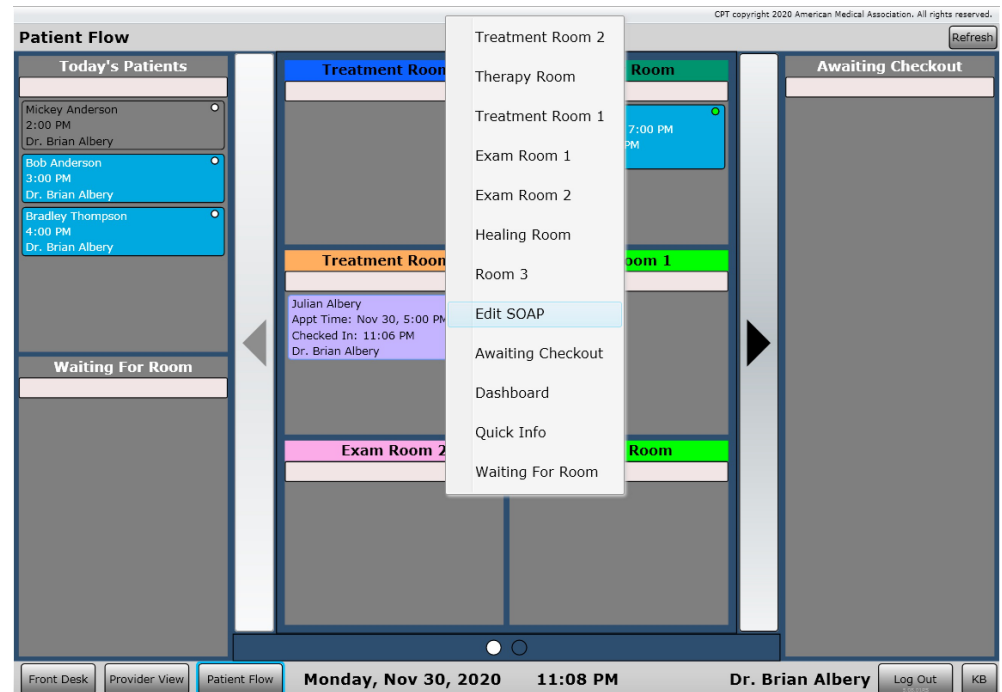


It is 100% possible to run your entire practice without ever going into the Patient Flow screen. This feature may be more important to larger practices with numerous rooms. In these large practices it can be very difficult keeping track of where a patient is at without using Patient Flow.

To use Patient Flow, you will first need to set up your ROOMS. To do this go to Settings/Rooms and add the rooms in your practice.



Settings/Rooms



Power Tip: Double tap a patient name in patient flow once checked in to “Edit SOAP”. This same tip can be used at the front desk as well.

Front Desk – Patient Flow – Rooms app

In Settings/Rooms you can create as many rooms as you like. Each room will appear in Patient Flow.

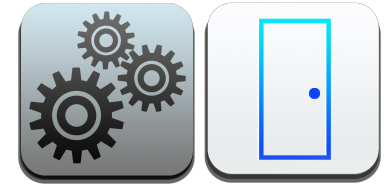
Arrange their order using the up/down arrows.

If you have multiple locations, you can change the “Select Facility Location” option above to customize your rooms for each location.

If you are using the Self Check-in App you can customize the rooms for this app.

Also set how many rooms you want shown per view.

Settings/Rooms



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Rooms

Select Facility Location: Spinal Care Chiropractic

Rooms - Pt. Flow: 6

Rooms - Pt. Self Check-in: All Rooms One View

Patient Display Name: Full Name

Sort Rooms by: Check-In Time (older times on top)

Waiting For Room Sorting: Check-In Time (Waited Longest)

Rooms

- Treatment Room 2
- Therapy Room
- Treatment Room 1
- Exam Room 1
- Exam Room 2
- Healing Room
- Room 3

Details

Room Name: Treatment Room 2

Description:

Room Colors

Background: Change

Font: Change

Preview

Close Dock

Add New Delete Cancel Save

Front Desk Provider View Patient Flow Tuesday, Dec 1, 2020 11:24 AM Dr. Brian Albery Log Out KB

Front Desk – Patient Flow – Rooms app

Rooms CPT copyright 2020 American Medical Association. All rights reserved.

Select Facility Location Spinal Care Chiropractic ▼	Rooms - Pt. Flow ? 6 ▼	Rooms - Pt. Self Check-in ? All Rooms One View ▼
Patient Display Name ? Full Name ▼	Sort Rooms by ? Check-In Time (older times on top) ▼	Waiting For Room Sorting ? Check-In Time (Waited Longest) ▼

Within the Rooms app are options along the top. Toggle by facility location to customize rooms for each location. Next set the number of rooms you will see in a single view (e.g. 6). If using the Self Check-in app, you can also customize it's view for rooms. In the example above we have it set to 'All Rooms One View'. You can see an example of this a few pages from this. Essentially this means there are no ROOMS and instead one giant list box where patients get checked into.

The Patient Display Name option allows you to choose Full Name or a HIPAA Complaint name. This allows you to have Patient Flow in view of patients without any worry about a breach in PHI.

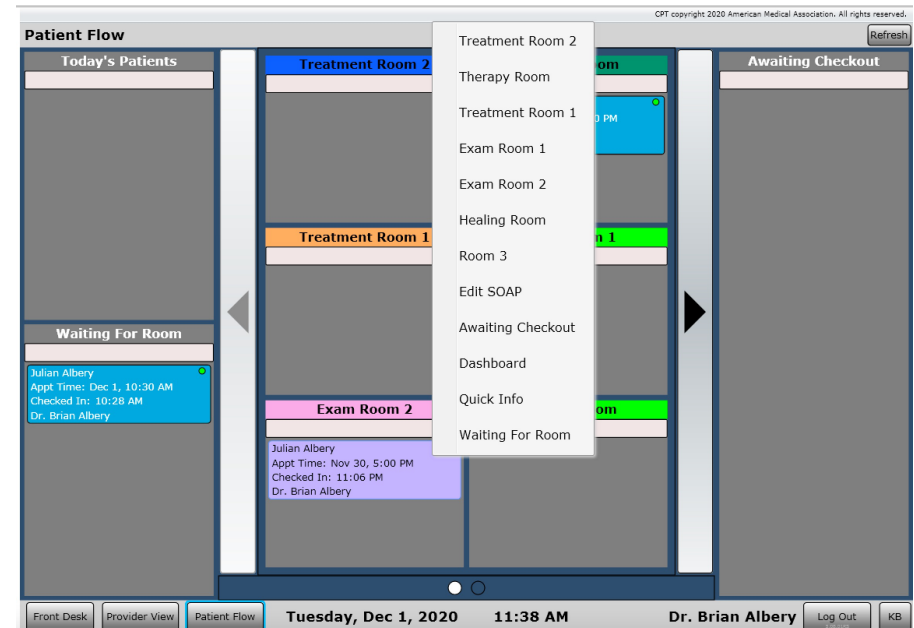
Front Desk – Patient Flow

From the patient flow screen if you right click on a patient's name (or press and hold) you will get a menu. This menu lists all rooms that you have set up in the software. Select a room or select "Check In" to move the patient to "Waiting for Room".

Once you select a room you will see the "Check In Dialog". This is the same Check In Dialog you see when you check a patient in from the front desk. After checking in the patient, you will see that the patient has both checked in and is not in the "Waiting for Room" box.

You can move patient from room to room by right clicking (or press and hold) on their name. When you are done moving the patient from room to room you can then move the patient to "Awaiting Checkout".

Power Tip: Double tap a patient name in patient flow once checked in to "Edit SOAP". This same tip can be used at the front desk as well. You must be a provider to use this double tap Edit SOAP feature.



Patient Flow – All Rooms One View Example

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Patient Flow
Refresh

Today's Patients	Checked In	Awaiting Checkout
Mickey Anderson 2:00 PM Dr. Brian Albery	Therapy Room	
Bob Anderson 3:00 PM Dr. Brian Albery	Brady E Albery Appt Time: Nov 30, 7:00 PM Dr. Brian Albery	Adjustment Checked In: 11:06 PM
Bradley Thompson 4:00 PM Dr. Brian Albery	Treatment Room 1	Julian Albery Appt Time: Nov 30, 5:00 PM Dr. Brian Albery
Waiting For Room		

Front Desk
Provider View
Patient Flow
Monday, Nov 30, 2020
11:06 PM
Dr. Brian Albery
Log Out
KB

Patient Flow – Multiple Rooms Per View Example

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Patient Flow

Refresh

Today's Patients	Treatment Room 2	Therapy Room	Awaiting Checkout
		Brady E Albery Appt Time: Nov 30, 7:00 PM Checked In: 11:06 PM Dr. Brian Albery	
	Treatment Room 1	Exam Room 1	
Waiting For Room	Exam Room 2	Healing Room	
Julian Albery Appt Time: Dec 1, 10:30 AM Checked In: 10:28 AM Dr. Brian Albery	Julian Albery Appt Time: Nov 30, 5:00 PM Checked In: 11:06 PM Dr. Brian Albery		

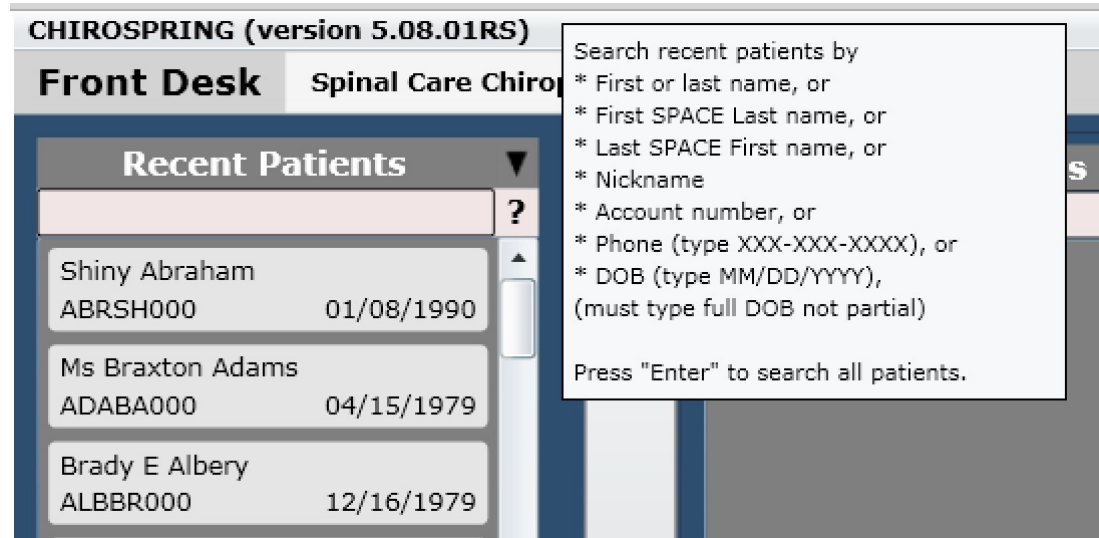
Front Desk Provider View Patient Flow Tuesday, Dec 1, 2020 11:41 AM Dr. Brian Albery Log Out KB

Front Desk – Recent Patients

The Recent Patients list box contains your most recent patients. It also allows you to type in a patient's first name, last name, account number or phone number to search your entire patient database for a patient.

To find a patient you are looking for you can type any of the following into the search box

- First or Last name
- First SPACE Last name
- Nickname
- Phone Number (XXX-XXX-XXXX format)
- Account Number
- DOB (MM/DD/YYYY format)



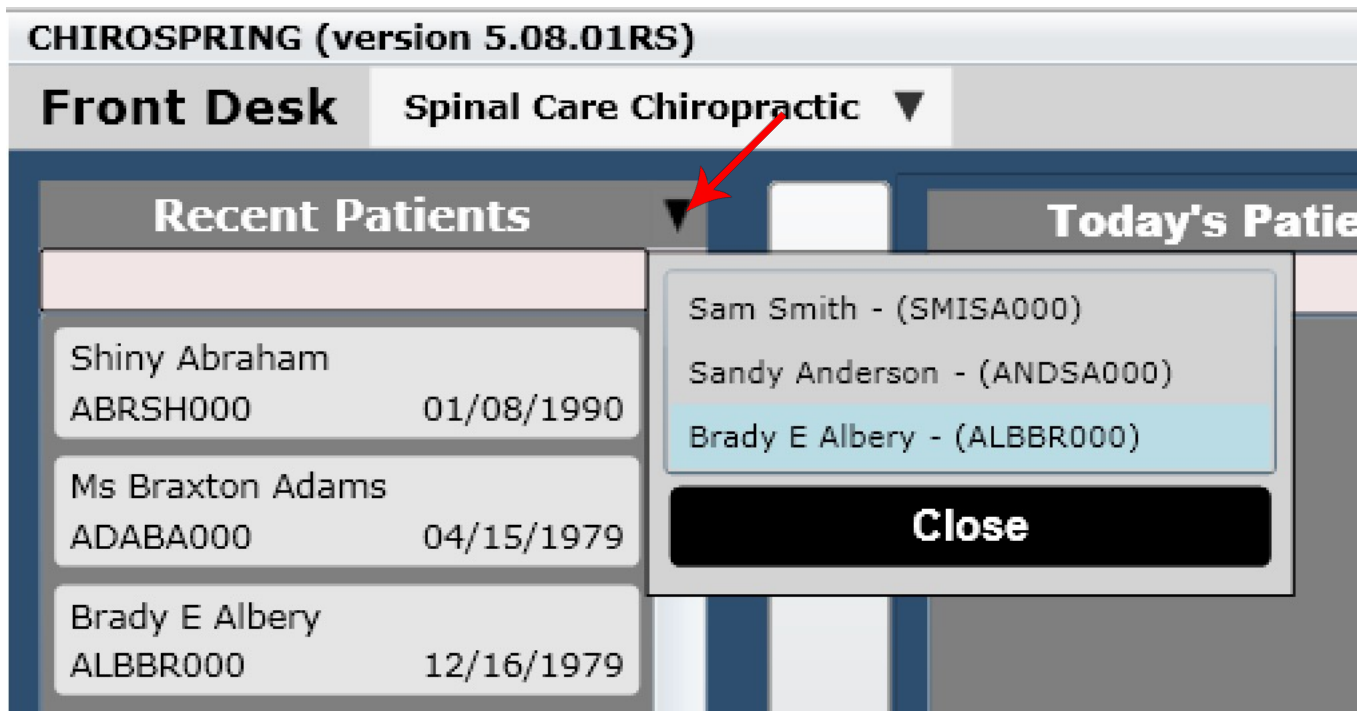
IMPORTANT!

This list box only displays your most RECENT PATIENTS. This means if you have not seen a patient in awhile, they will not automatically be displayed in this list box. To search the full database for a patient, type the required information in the search box and then press ENTER. This will display ALL matches for the information you typed and not just recent patients. This is very important to know and understand. We recommend getting into the habit of pressing ENTER for every patient search. This practice can help prevent the entering of duplicate patient information.

Front Desk – Recent Patients

If you want to see a patient, you recently viewed information on click the black “down” arrow. A dialog will open showing you the most recent 15 patients you have viewed.

This can be extremely beneficial if you viewed a patient’s ledger for example. Added a payment only to realize it was on the wrong patient. In frustration you might not remember what patient you were just on. Now you can find them easily. 😊



The screenshot shows the CHIROSPRING (version 5.08.01RS) interface. The main header includes 'Front Desk' and 'Spinal Care Chiropractic'. Below this, there are two tabs: 'Recent Patients' and 'Today's Patients'. The 'Recent Patients' tab is active, and a dropdown menu is open, showing a list of patients. A red arrow points to the dropdown arrow icon. The dropdown menu lists three patients: Sam Smith - (SMISA000), Sandy Anderson - (ANDSA000), and Brady E Albery - (ALBBR000). The 'Close' button is visible at the bottom of the dropdown menu.

Recent Patients	Today's Patients
Shiny Abraham ABRSH000 01/08/1990	
Ms Braxton Adams ADABA000 04/15/1979	
Brady E Albery ALBBR000 12/16/1979	

Sam Smith - (SMISA000)
Sandy Anderson - (ANDSA000)
Brady E Albery - (ALBBR000)

Close

Front Desk – Recent Patients

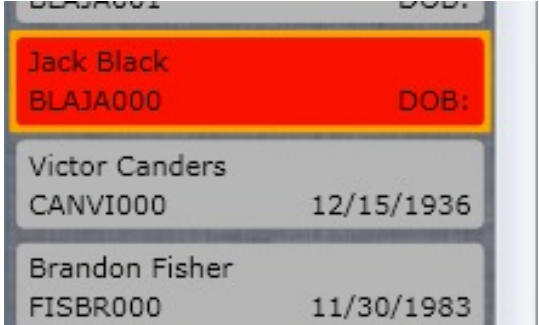
It is VERY important that you understand how the recent patients list box works

Again, it will display only your recent patients. This means that for a less frequent patient, when you type in their name, they will not appear in this list box. That is, **not until you press ENTER.**

Pressing enter will do a full data base search and find all patients, even if they are marked in the system as “inactive.”

Inactive patients will be marked in red. See “Jack Black” pictured to the right.

Inactive patients cannot be scheduled to the calendar. You must first go to their profile and make them active again.



Jack Black	BLAJA000	DOB:
Victor Canders	CANVI000	12/15/1936
Brandon Fisher	FISBR000	11/30/1983

If you do not see the patient you are looking for, press “ENTER”.

Front Desk – Create a New Patient

On the Front Desk click the “Add New Patient” button below the “Recent Patients” list box. A dialog box will open allowing you to input new patient data.

On the left you will see several tabs. Tabs include the following.

- Personal Information
- Care Plan
- Demographics
- Profile Picture
- Driver License Image
- Hobbies
- Emergency Contact
- Employment Info
- Primary Care Provider
- Acknowledgements
- Payment Methods (stored on file)

After you have filled in the appropriate patient information click “Save.” This will save the patient to the database. Now click “Close.” This will bring you back to the Front Desk. Your new patient will now appear in the “Recent Patient” list box.

Profile - Brady E Albery ALBBR000 DOB: 12/16/1979 Age: 40 INS: BCBS

Prefix	First Brady	Last Albery	Middle E	Suffix	Nickname
DOB 12/16/1979	Age 40	Birth Sex M	SSN 555-67-7654	Email Address support@chirospring.com	
Address 1234 Main St.		City Bettendorf	State Abbr. IA	Zip 52722	
Phone 1 563-505-7766	Type Mobile	Phone 2	Type Home	Fax 888-545-4455	
Notes (Visible in Check-In Dialog)					
Default Reason/Visit Note (Copies into Reason/Visit Note when scheduling new appointment)					
Account # ALBBR000	Fee Schedule Cash	Job Status Unknown	Marital Status Single		
Referred By Select Patient	How Heard About News and Views	Guarantor Select Patient			
Preferred Provider Dr. Brian Albery	In Collections No	Is Active Active	Is Pregnant No	Kiosk Pin 1234	Reset Kiosk Account
Appt Reminder Text (Mobile)	Message Contact None	Preferred Location Davenport	Patient Portal Not Enrolled		
Custom Receipt Footer Your insurance covers orthotics! We sell these. :)			Custom Statement Footer You are 120 days past due need payment ASAP!		

Close Save Dashboard

More information on creating a new patient can be found in the Dashboard/Profile section of this manual

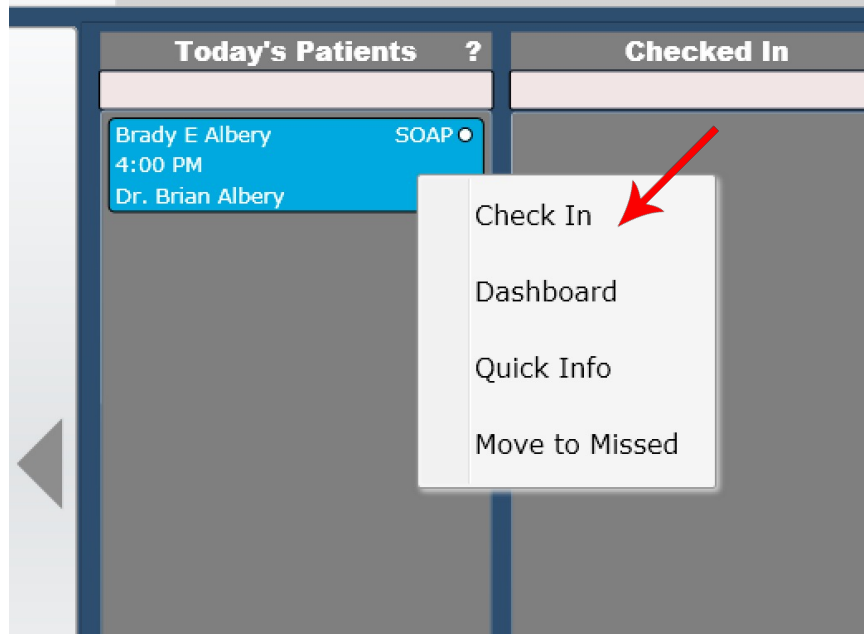
Front Desk – Check in a Patient

To check in a patient from the front desk:

- Right click on a patient in the “Today’s Patients” column.
- In the menu that opens click on “Check In.”
- The check in dialog will now open. Complete the check in process.
- Verify that your patient now appears in the “Checked In” column.

NOTE: You will also see an option for “Dashboard.” Clicking this will take you to the Patient Dashboard.

Power Tip: A **PRESS and HOLD** will also access the pop-up menu. This is useful when using a tablet devices with a touch screen.

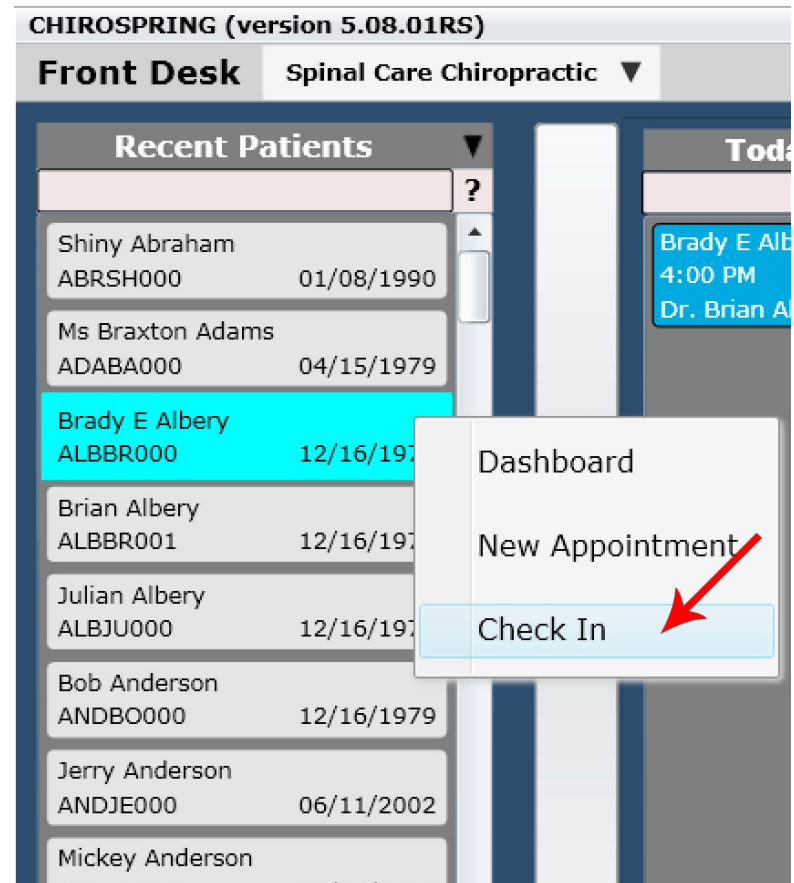


You can also check in a patient by right clicking on a patient in the Recent Patients list box. This is convenient for walk-in patients and will automatically create an appointment on the calendar once they are checked in.

Front Desk – Check in a Patient

You can also check in a patient by right clicking on a patient in the Recent Patients list box. This is convenient for walk-in patients and will automatically create an appointment on the calendar once they are checked in.

You can also check in a patient by right clicking on them on the Calendar. This option needs to be enabled in Settings/Practice Info/General.



Front Desk – Check in a Patient

Check In Dialog

After you check in your patient a dialog box will open. There are two tabs one for General and one for Care Plan.

General Tab

- View or edit patient information
- View, edit or select the insurance case
 - The default insurance case is marked by a red dot
- Add insurance information via the “Edit Insurance” button
- View deductible, copay and co-insurance
- View Patient Balance
- View Insurance Carriers for the selected insurance case
- View visit counters for Chiropractic and Therapy
- View Treatment Plan
- View Reason for Visit
- View appointment Note
- View or edit Notes
- View or edit the fee schedule
- appt. Reminder
- Mark Clinical Summary Preference
- Mark Preferred Location
- View or Edit Pregnancy Status

The screenshot shows a patient check-in dialog for Brady E Albery. The 'General' tab is active, displaying the following information:

- Patient Information:** Name: Brady E Albery, DOB: 12/16/1979, Age: 40, Birth Sex: M, SSN: 555-67-7654, Email Address: support@chirospring.com.
- Insurance:** Select Visit Insurance Case: BCBS (marked with a red dot). Edit Insurance button is present.
- Insurance Carriers:** Primary: 3456 WELCOME WAY. Chiro Visits: 9 of 20. Therapy: 1 of 10. Chiro Amt: \$930 of \$0.
- Member Responsibility:** Deductible: None, Copay: \$20.00, Co-insurance: 0%.
- Treatment Plan:** 3x per week for 4 week(s), 2x per week for 4 week(s). 11/11/2020 to 1/6/2021. 19 of 20 completed.
- Account Information:** Previous Balance: \$57.80.
- Address:** 1234 Main St, Bettendorf, IA, 52722.
- Phone 1:** 563-505-7766, Mobile.
- Phone 2:** Home, 888-545-4455.
- Notes:** Empty field with a question mark icon.
- Clinical Summary:** Denied.
- Message Contact:** None.
- Preferred Location:** Davenport.
- Is Pregnant:** No.
- Appointments:** Last Appointment: 11/30/2020, Next Appointment: 12/02/2020 9.

Buttons at the bottom include 'Save Changes & Check In' and 'Cancel'.

Front Desk – Check in a Patient

Check In Dialog

After you check in your patient a dialog box will open. There are two tabs one for General and one for Care Plan.

Care Plan Tab

- See details for the patient's care plan
- Toggle to a different care plan

The screenshot shows the 'Care Plan' tab for patient Brady E Albery. The interface includes several sections: Insurance Carriers, Chiro Visits, Therapy, Chiro Amt, Member Responsibility, Reason for Visit, Reason/Visit Notes, Treatment Plan, and Account Information. A 'Care Plan Details' section is expanded, showing a table of services with columns for Description, Units, Amount, Used, and Remaining.

Description	Units	Amount	Used	Remaining
98941 Manipulation 3-4 Regions	10	40.00	5	5
97035 Therapy-Ultrasound	5	25.00	3	2
99204-25 New Patient Comprehensive Examination	1	110.00	0	1

Check In Dialog - General

General
Care Plan

Brady E Albery


Select Visit Insurance Case
 BCBS

Edit Insurance

Patient Portal
 Not Enrolled

Appt Reminder
 Text (Mobile)

Fee Schedule
 Cash



Insurance Carriers		Chiro Visits	Therapy	Chiro Amt
Primary	3456 WECOME WAY	9 of 20	1 of 10	\$930 of \$0
Secondary				
Tertiary				

Member Responsibility	
Deductible	None
Copay	\$20.00
Co-insurance	0%

Reason for Visit Edit
 Adjustment

Reason/Visit Notes Edit

Treatment Plan
 3x per week for 4 week(s) 11/11/2020 to 1/6/2021
 2x per week for 4 week(s)
 19 of 20 completed

Account Information

Previous Balance	\$57.80

Prefix

First
Brady

Last
Albery

Middle
E

Suffix

Nickname

DOB
12/16/1979 X

Age
40

Birth Sex
M

SSN
555-67-7654

Email Address
support@chirospring.com

Address
1234 Main St.

City
Bettendorf

State Abbr.
IA

Zip
52722

Phone 1
563-505-7766

Type
Mobile

Phone 2

Type
Home

Fax
888-545-4455

Notes ?

Clinical Summary
Denied

Message Contact
None

Preferred Location
Davenport

Is Pregnant
No

Last Appointment : 11/30/2020

Used in Patient List app

Next Appointment : 12/02/2020 9:

Save Changes & Check In

Cancel

Check In Dialog – Care Plan

General
Care Plan

Brady E Albery


Select Visit Insurance Case
 BCBS

Edit Insurance

Patient Portal
 Not Enrolled

Appt Reminder
 Text (Mobile)

Fee Schedule
 Cash



Insurance Carriers		Chiro Visits	Therapy	Chiro Amt
Primary	3456 WECOME WAY	9 of 20	1 of 10	\$930 of \$0
Secondary				
Tertiary				

Member Responsibility	
Deductible	None
Copay	\$20.00
Co-insurance	0%

Reason for Visit Edit
 Adjustment

Reason/Visit Notes Edit

Treatment Plan
 3x per week for 4 week(s) 11/11/2020 to 1/6/2021
 2x per week for 4 week(s)

 19 of 20 completed

Account Information

Previous Balance	\$57.80

Preferred Provider
 Dr. Brian Albery

Care Plan Details

Care Plan
 Care Plan (10/31/2020 - 12/31/2020)

Description	Units	Amount	Used	Remaining
98941 Manipulation 3-4 Regions	10	40.00	5	5
97035 Therapy-Ultrasound	5	25.00	3	2
99204-25 New Patient Comprehensive Examination	1	110.00	0	1

Save Changes & Check In

Cancel

Front Desk – Uncheck in a Patient

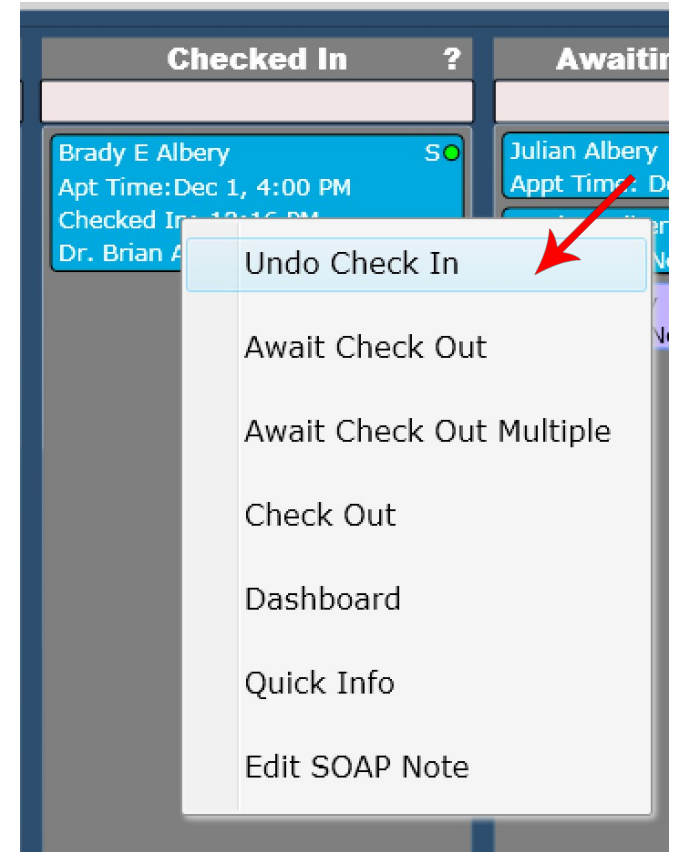
Undo Check In

- On the front desk right click on a patient in the “Checked In” column.
- In the menu that opens click on “Undo Check In.”
- Verify that your patient moves to the “Today’s Patients” column. You have now successfully unchecked in a patient.

Power Tip: If you check in a patient and click Edit SOAP Note and then later decide that you do not want to create a SOAP Note for this patient you can simply DELETE the SOAP Note. To delete a SOAP Note, open the Dashboard/Visits Tile. Next select the visit (it should be the top visit) and click the “Delete SOAP Note” button.



Once a SOAP Note has been signed by the provider it cannot be deleted.



Front Desk – Launch Patient Dashboard

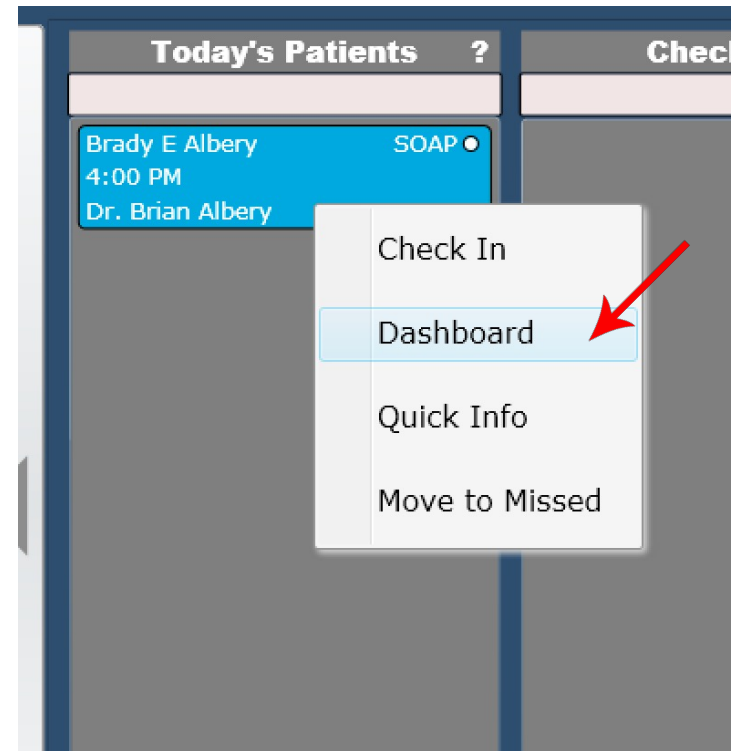
Right Click on the patient in one of the following columns

- Recent Patients
- Today's Patients
- Checked In
- Awaiting Checkout
- Checked Out Patients
- Missed
- Unfinished SOAP Notes

In the menu that appears click “Dashboard.” This will launch the Patient Dashboard.

Power Tip: You can also double click on the patient to open the dashboard in several of the patient list boxes.

Power Tip: On Provider view if you double click on a patient name that is checked in it will open the SOAP Note.



Front Desk – Launch Patient Dashboard



Use the left and right arrows to navigate between tabs. There are three dashboard tabs as shown above.

Power Tip: You can change the arrangement of your Dashboard Tiles in Settings/Arrange Dashboard.

Front Desk – Move a Patient to Awaiting Checkout

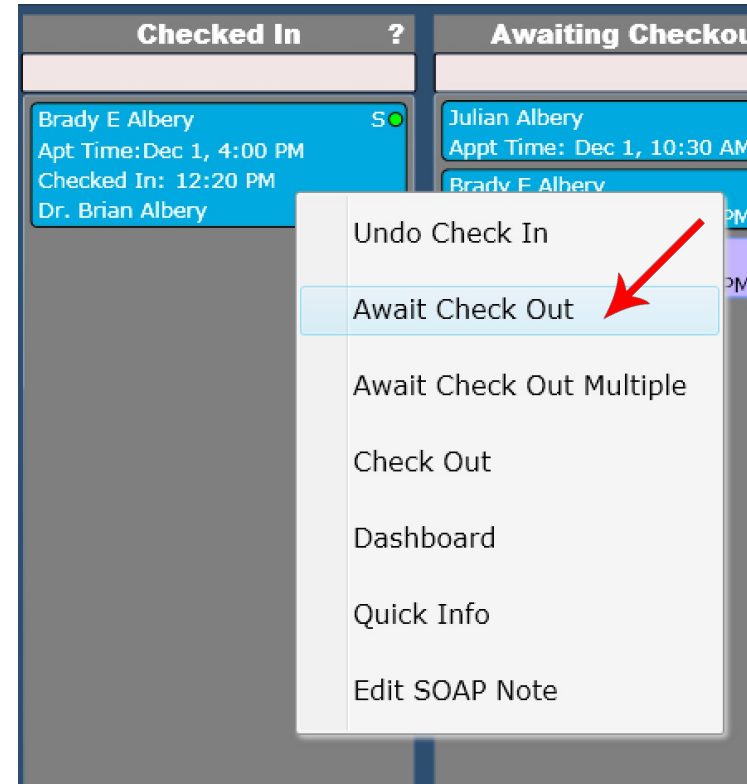
- Right Click on a patient in the “Checked In” column.
- In the menu that opens click “Await Check Out.”
- Verify that the patient has moved into the Awaiting Check Out column.

NOTE: Only the following persons are recommended to move a patient to awaiting checkout. This is to ensure that the provider has completed all charges prior to being checked out.

1. Scheduled to Provider
2. Rendering Provider
3. SOAP Signed Provider

Other users CAN move a patient to awaiting checkout, but this is not encouraged. If they attempt this a pop up will appear warning them against this.

Power Tip: You may checkout a patient WITHOUT having the SOAP signed. Just ensure you have the charges entered before checking out a patient.

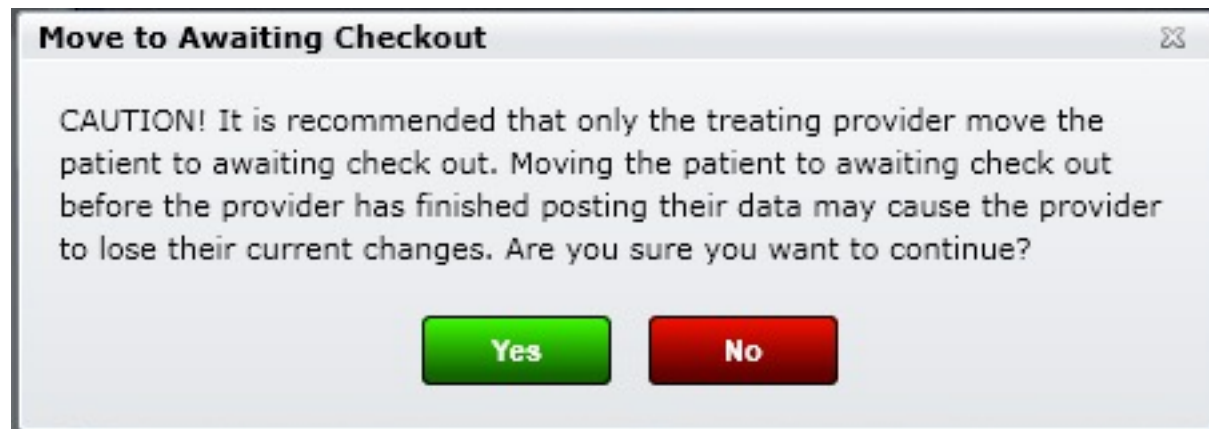


Front Desk – Move a Patient to Awaiting Checkout

This is the dialog box that appears when a non-provider attempts to move a patient to Awaiting Checkout.

Again, it is strongly discouraged to have your front desk staff moving patients to Awaiting Checkout. The provider should be doing this as it is a visual indicator to the front desk that the provider has finished entering in the patient charges for that visit. If the front desk person does move a patient to awaiting checkout and then subsequently “Check Out” any charges, the provider adds AFTER this will not be displayed at checkout. This can result in inaccurate patient charges at the cash register.

Power Tip: Providers CAN move patient’s to awaiting checkout even if they have not finished their SOAP Note completely. All that is necessary to check out a patient are the patient charges. Providers can go back and finish and sign the SOAP note later.



Front Desk – Move a Patient to Checkout

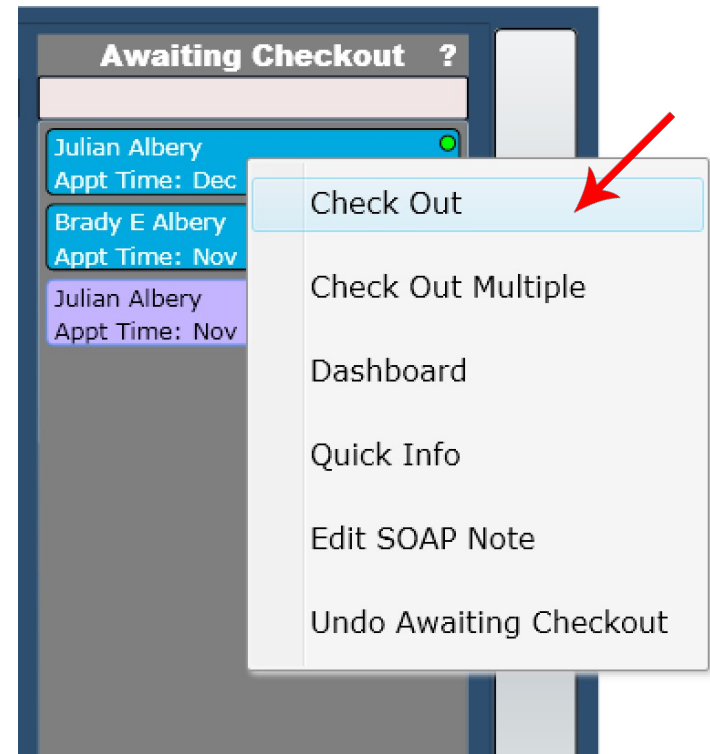
- Right Click on a patient in the “Awaiting Checkout” column
- In the menu that opens click on “Check Out.” This will open the cash register and begin the check out process for that patient.

Power Tip: A provider can also DIRECTLY checkout a patient by right clicking on their name when they are in the “Checked In” list box and selecting “Check Out.” This will launch the cash register directly and skip moving them to “Awaiting Checkout.”

There is also an option to ‘Check Out Multiple’. Select this if you would like to check out multiple patients at the same time. This is useful in the following situations:

1. The same patient was scheduled for therapy as well as an adjustment
2. An entire family comes in for treatment. Check the entire family out and take one payment

This process is detailed further in the Cash Register section of this manual.



Work Flow Columns

To the right of the Recent Patients list box are three columns

- Today's Patient's
- Checked In
- Awaiting Checkout

Notice there are large arrow tabs on the right and left sides of these columns. These are navigation arrows and clicking them will reveal another page of columns

- Checked Out Patients
- Missed
- Unfinished SOAP Notes

There are two dots below the three columns. These are used to notate which page you are on. When the first dot is solid white, you are on page one. When the second dot is solid white, you are on page two.




Work Flow Columns 1

CHIROSPRING (version 5.08.01RS) CPT copyright 2020 American Medical Association. All rights reserved.

Front Desk | Spinal Care Chiropractic Online Scheduler Refresh

Recent Patients	Today's Patients	Checked In	Awaiting Checkout
<p>Shiny Abraham ABRSH000 01/08/1990</p> <p>Ms Braxton Adams ADABA000 04/15/1979</p> <p>Brady E Albery ALBBER000 12/16/1979</p> <p>Brian Albery ALBBER001 12/16/1972</p> <p>Julian Albery ALBJU000 12/16/1979</p> <p>Bob Anderson ANDBO000 12/16/1979</p> <p>Jerry Anderson ANDJE000 06/11/2002</p> <p>Mickey Anderson ANDMI000 03/05/2004</p> <p>Sandy Anderson ANDSA000 04/12/2007</p> <p>Steve Anderson ANDST000 DOB: </p>		<p>Brady E Albery S Apt Time: Dec 1, 4:00 PM Checked In: 12:20 PM Dr. Brian Albery</p>	<p>Julian Albery ● Appt Time: Nov 30, 5:00 PM</p>

Add New Patient



Launcher




Calendar




Cash Register



Billing




Claims



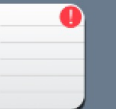
Reconcile




Statements



Reports



Tasks



Settings

Front Desk | Provider View | Patient Flow | **Tuesday, Dec 1, 2020** | **12:22 PM** | **Dr. Brian Albery** | Log Out | KB

Work Flow Columns 2

CHIROSPRING (version 5.08.01RS) CPT copyright 2020 American Medical Association. All rights reserved.

Front Desk | Spinal Care Chiropractic 1 Online Scheduler Refresh

Recent Patients	Checked Out Patients ?	Missed	Unfinished SOAP Notes ?
<p>Shiny Abraham ABRSH000 01/08/1990</p> <p>Ms Braxton Adams ADABA000 04/15/1979</p> <p>Brady E Albery ALBBER000 12/16/1979</p> <p>Brian Albery ALBBER001 12/16/1972</p> <p>Julian Albery ALBJU000 12/16/1979</p> <p>Bob Anderson ANDBO000 12/16/1979</p> <p>Jerry Anderson ANDJE000 06/11/2002</p> <p>Mickey Anderson ANDMI000 03/05/2004</p> <p>Sandy Anderson ANDSA000 04/12/2007</p> <p>Steve Anderson ANDST000 DOB:</p>	<p>Julian Albery S Appt Time: Dec 1, 10:30 AM</p>		<p>Julian Albery S Appt Time: Dec 1, 10:30 AM Dr. Brian Albery</p> <p>Brady E Albery S Appt Time: Nov 30, 7:00 PM Dr. Brian Albery</p> <p>Brady E Albery S Appt Time: Nov 30, 6:00 PM K Dr. Brian Albery</p> <p>Julian Albery S Appt Time: Nov 30, 5:00 PM Dr. Brian Albery</p> <p>Omar Becker S Appt Time: Nov 30, 1:15 PM K Dr. Miranda Hansen</p> <p>Brady E Albery S Appt Time: Nov 27, 9:00 AM K Dr. Brian Albery</p> <p>Brady E Albery S Appt Time: Nov 25, 2:00 PM Dr. Brian Albery</p> <p style="text-align: center;">Load More</p>

Add New Patient


 Launcher


 Calendar


 Cash Register


 Billing


 Claims


 Reconcile


 Statements


 Reports


 Tasks


 Settings

Front Desk
Provider View
Patient Flow
Tuesday, Dec 1, 2020
12:23 PM
Dr. Brian Albery
Log Out
KB

Front Desk - apps

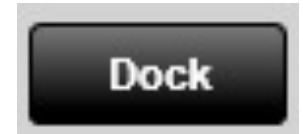
Below the columns are several apps. These apps take you into specific areas of ChiroSpring. Here are a list of the ChiroSpring apps.

- **Calendar** (Schedule patients)
- **Cash Register** (Used for non-visit associated cash register transactions)
- **Billing** (One app to locate all outstanding insurance charges)
- **Claims** (Submit insurance claims via print or export)
- **Reconcile** (Reconcile insurance remittances)
- **Statements** (Create patient statements to bill your patients)
- **Reports** (Every report you need to manage your practice)
- **Tasks** (Create tasks, groups and even assign tasks to other users)
- **Settings** (Additional apps to customize ChiroSpring)
- **Launcher** (opens additional Front Desk apps)



Docking apps

ChiroSpring offers peace of mind knowing you can quickly change from app to app without losing data. Let's say you are in the middle of entering a patient's data, the phone rings and you need to get back to the front desk. All you have to do is click the "Dock" button found in the lower left corner of the app you are presently on. This will put that app into a special docked section (see picture below) on the front desk. You can then open the calendar, move patients around on the front desk, open another app, or do anything you want for that matter.



When you are ready to go back to your docked app, click on it in the dock. It will open to exactly where you left off. This brilliant form of multitasking can be invaluable to busy chiropractic clinics.





Front Desk - Launcher

The “Launcher” will reveal additional front desk apps

- **Cash Register Ledger** (used to delete non-patient associated cash register transactions)
- **CQMs** (Information on the 9 CQMs you are attesting for if practicing Meaningful Use as well as access to CQM Solution which is the app used to generate the QRDA file for meaningful use submission)
- **Meaningful Use** (2014 Edition Cert Only)
- **Patient List** (Generate a list of patients based on multiple criteria)
- **Receive Data** (Receive lab results or a transition of care)
- **Transmit Data** (Send a patient transition of care CCDA or data portability CCDA)
- **Connect EHR** (Use this app to open Connect EHR. Here you can view patient CCDAs (clinical summary, summary of care) and send them to another provider via Direct Message (you will need a direct address to send a direct message. Contact ChiroSpring to obtain one).
- **Audit Log** – Records user activity
- **Pt. Self Check-in** – Used to allow your patients to move themselves into an available room
- **Insurance AR** – An interactive “report” to generate insurance AR
- **Help Center** – A google search interface with access to hundreds of articles to help you in ChiroSpring.
- **Online Appointment Manager** – Manage your pending online appointments
- **Process Payments** - Used to process scheduled payments created in the patient Ledger
- **Time Clock** – Used to calculate staff working hours and pay (use with Time Clock report and set wage in Users App)
- **ChiroSpring Share** – Share or download SOAP Macros, products, services and kiosk intake questions.
- **Wait List** – Add patients to a wait list when your calendar is full

















Launcher



The Launcher contains additional Front Desk apps.

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Search:

 Cash Register Ledger	 CQMs	 Meaningful Use	 Patient List	 Receive Data	 Transmit Data	 Connect EHR	 Audit Log	 Pt. Self Check-in
 Insurance AR	 Help Center	 Online Appt. Manager	 Process Payments	 Time Clock	 ChiroSpring Share	 Wait List		

Close **Dock**

Front Desk | Provider View | Patient Flow | **Tuesday, Dec 1, 2020** | **12:29 PM** | **Dr. Brian Albery** | Log Out | KB



Multiple Locations

ChiroSpring supports multiple facility locations. This is great for practices that have two or more physical locations.

Locations can be created in Settings/Practice Info/Facility Locations. Contact ChiroSpring support to add a location.



Settings



Practice Info

Each location can have a unique:

- Name
- Address
- Scheduler start and end time
- Default appointment Type
- Scheduler time increments (e.g. 10 min time slots, 15 min time slots, etc.)
- NPI Number or Facility Other ID#
- Tax Rate
- Scheduler Max Columns in View (how many columns do you want to see on the calendar screen before having to scroll to the right)

Tip: Make sure you enter your Tax Rate if you plan on collecting taxes on products sold.

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ChiroSpring supports multiple facility locations. Each location can specify its own address, scheduler options, tax rate, and exam rooms.

Default Facility Location for this Computer
Spinal Care Chiropractic (Active) [v]

Facility Locations
Spinal Care Chiropractic (Active) [v] [Add] [Edit Name] [Remove] [Set Active] [Set Inactive]

Facility Address 32

Name: Dr's Chiropractic | Email Address: info@gmail.com

Address: 234 Western | City: Davenport | State Abbr.: IA | Zip: 52722-1234

Phone 1: 563-545-4565 | Type: Home [v] | Phone 2: | Type: Home [v] | Fax:

Facility NPI #: 677282822 32a | Facility Other ID #: 32b | Default Tax Rate %: 8.000

Scheduler Day Start Time: 6:00 AM [?] [X] | Scheduler Day End Time: 9:30 PM [?] [X] | Default Appointment Type: Scheduled [v]

Scheduler Time-Slots per Hour: 4 - (15 minutes per time slot) [?] [v] | Scheduler Max Columns in View: 3 [?] [v] | Facility Time Zone: Central Standard Time or Mountain Da [v]

Default Visit Types: 1. Trigger Point Therapy [?] [Edit]

[Close] [Save]

Front Desk | Provider View | Patient Flow | **Tuesday, Dec 1, 2020 12:29 PM** | **Dr. Brian Albery** [Log Out] [KB]

Additional locations can be purchased by contacting support@ChiroSpring.com.

Multiple Locations - Setup

Practice Info

CPT copyright 2020 American Medical Association. All rights reserved.

ChiroSpring supports multiple facility locations. Each location can specify its own address, scheduler options, tax rate, and exam rooms.

Default Facility Location for this Computer
Spinal Care Chiropractic (Active) ▼

Facility Locations ?
Spinal Care Chiropractic (Active) ▼ **Add** **Edit Name** **Remove** **Set Active** **Set Inactive**

Facility Address 32

Name Dr's Chiropractic		Email Address info@gmail.com	
Address 234 Western	City Davenport	State Abbr. IA	Zip 52722-1234
Phone 1 563-545-4565	Type Home ▼	Phone 2	Type Home ▼
Fax			

Facility NPI # 32a 677282822

Facility Other ID # 32b

Default Tax Rate % ? 8.000

Scheduler Day Start Time ? 6:00 AM X

Scheduler Day End Time ? 9:30 PM X

Default Appointment Type ? Scheduled ▼

Scheduler Time-Slots per Hour ? 4 - (15 minutes per time slot) ▼

Scheduler Max Columns in View ? 3 ▼

Facility Time Zone ? Central Standard Time or Mountain Da ▼

Default Visit Types ? **Edit**

1. Trigger Point Therapy

Close

Save

Front Desk

Provider View

Patient Flow

Tuesday, Dec 1, 2020

12:29 PM

Dr. Brian Albery

Log Out

KB

Multiple Locations – Front Desk

Toggle location on the Front Desk using the drop down.

The screenshot displays the CHIROSPPRING (version 5.08.01RS) Front Desk interface. A red arrow points to a dropdown menu for the location, which is currently set to "Spinal Care Chiropractic". The dropdown menu lists three options: "Davenport", "Durant", and "Spinal Care Chiropractic". The main interface is divided into three columns: "Recent Patients", "Today's Patients", and "Checked In". The "Checked In" column shows a patient named Brady E Albery with an appointment time of Dec 1, 4:00 PM, checked in at 12:20 PM, and attended by Dr. Brian Albery. The "Awaiting Checkout" column shows a patient named Julian Albery with an appointment time of Nov 30, 5:00 PM. The interface includes a navigation bar at the bottom with icons for Launcher, Calendar, Cash Register, Billing, Claims, Reconcile, Statements, Reports, Tasks, and Settings. The status bar at the bottom indicates the current date and time as Tuesday, Dec 1, 2020, 1:33 PM, and the user as Dr. Brian Albery.

CHIROSPPRING (version 5.08.01RS) CPT copyright 2020 American Medical Association. All rights reserved.

Front Desk Spinal Care Chiropractic Online Scheduler Refresh

Recent Patients	Today's Patients ?	Checked In ?	Awaiting Checkout ?
Shiny Abraham ABRSH000		Brady E Albery Apt Time: Dec 1, 4:00 PM Checked In: 12:20 PM Dr. Brian Albery	Julian Albery Appt Time: Nov 30, 5:00 PM
Ms Braxton Adam ADABA000 04/15/1979			
Brady E Albery ALBBR000 12/16/1979			
Brian Albery ALBBR001 12/16/1972			
Julian Albery ALBJU000 12/16/1979			
Bob Anderson ANDBO000 12/16/1979			
Jerry Anderson ANDJE000 06/11/2002			
Mickey Anderson ANDMI000 03/05/2004			
Sandy Anderson ANDSA000 04/12/2007			
Steve Anderson ANDST000 DOB: ▾			

Add New Patient

Launcher Calendar Cash Register Billing Claims Reconcile Statements Reports Tasks Settings

Front Desk Provider View Patient Flow Tuesday, Dec 1, 2020 1:33 PM Dr. Brian Albery Log Out KB

Multiple Locations – Default

Default Location

The default location can be set at the computer level or at the user level.

Computer Level – Settings/Practice Info/Facility Locations/Default Facility Location For This Computer

Practice Info CPT copyright 2020 American Medical Association. All rights reserved.

General

ChiroSpring supports multiple facility locations. Each location can specify its own address, scheduler options, tax rate, and exam rooms.

Default Facility Location for this Computer

Spinal Care Chiropractic (Active) ▼

Facility Locations ?

Spinal Care Chiropractic (Active) ▼ Add Edit Name Remove Set Active Set Inactive

Facility Address

When set at the Computer Level any user who logs into this computer and has “Primary Access Type” set to “Desktop App” will see this location.

Primary Access can be set in Settings/Users/Provider Info 2

Primary Access ?

Cloud CHIROSPRING ▼

Desktop App

Cloud CHIROSPRING

Multiple Locations – Default

Default Location

The default location can be set at the computer level or at the user level.

User Level – Settings/Users/Service & Billing Location/My Preferred Location

User Dr. Brian Albery

General

Federal Tax ID Content 25 Practice EIN

Provider's EIN 25

Social Security # 25

Override Facility NPI 32a

Override Billing NPI 33a

My Preferred Location ? ? Spinal Care Chiropractic

Service Facility Location ? 32

Override Service Facility Location: Useful for practices with multiple locations. This information applies only to this user and the check box must be checked in order to populate this information onto the HCFA.

Name Pugs Chiropractic

Email Address

Address 5012 Pug Drive

City Bettendorf

State Abbr. IA

Zip 52722

To use the preferred location based on user you must also set primary access to Cloud ChiroSpring.

Primary Access can be set in Settings/Users/Provider Info 2

Primary Access ?

Cloud CHIROSPRING

Desktop App

Cloud CHIROSPRING

Multiple Locations - Calendar



Toggle between locations on the calendar using the location drop down in the upper right corner.

The screenshot displays a medical calendar interface for Dr. Brian Albery on Tuesday, December 1, 2020. The interface includes a sidebar with a list of recent patients and appointments in view. The main calendar grid shows a completed appointment for Julian Albery at 10:30 AM. A dropdown menu in the upper right corner allows for selecting between different locations: Spinal Care Chiropractic (selected), Davenport, Durant, and Moline. A red arrow points to this dropdown menu. The bottom of the interface features a navigation bar with buttons for Close, Dock, New, Edit, Reschedule, Cancel, Delete, Refresh, Today, Jump To, Front Desk, Provider View, Patient Flow, and Log Out. The status bar at the very bottom shows the date, time (1:40 PM), and the provider's name (Dr. Brian Albery).

Calendar

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Recent Patients

- Shiny Abraham ABRSH000 01/08/1990
- Ms Braxton Adams ADABA000 04/15/1979
- Brady E Albery ALBBER000 12/16/1979
- Brian Albery ALBBER001 12/16/1972
- Julian Albery ALBJU000 12/16/1979

Add New Patient

Apts in View Filter

- Brady E Albery Dec 01, 04:00 PM
- Julian Albery Dec 01, 10:30 AM

Total: 2 New: 0

Navigation: Close, Dock, New, Edit, Reschedule, Cancel, Delete, Refresh, Today, Jump To

Front Desk, Provider View, Patient Flow, Tuesday, Dec 1, 2020 1:40 PM, Dr. Brian Albery, Log Out, KB

Multiple Locations

Like the front desk, Patient Flow will show the facility location at the top and display only patients from that location.

Patient Flow - Spinal Care Chiropractic location Refresh

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Today's Patients	Treatment Room 2	Therapy Room	Awaiting Checkout
			Julian Albery Appt Time: Nov 30, 5:00 PM
Waiting For Room	Treatment Room 1	Exam Room 1	
Brady E Albery Appt Time: Dec 1, 4:00 PM Checked In: 12:20 PM Dr. Brian Albery			
	Exam Room 2	Healing Room	

Front Desk | Provider View | **Patient Flow** | **Tuesday, Dec 1, 2020** | **1:43 PM** | **Dr. Brian Albery** | Log Out | KB

#Calendar





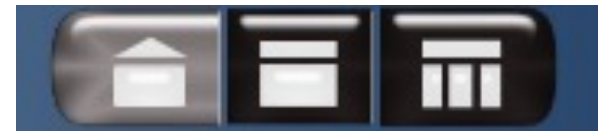
Calendar

The calendar is where you go to schedule patients and is opened by clicking on the Calendar app from the front desk. There are three calendar views.

- Home
- Day
- Week

Clicking on the menu bar at the bottom of the calendar will allow you to change these views.

- **Home View** – Shows all of the providers to where a patient can be scheduled (pictured to the right).
- **Day View** – Shows the daily schedule of a single provider.
- **Week View** – Shows the week schedule of a single provider.



Home Day Week

Calendar CPT copyright 2020 American Medical Association. All rights reserved.

Recent Patients

Shiny Abraham ABRSH000 01/08/1990	:30 :45
Ms Braxton Adams ADABA000 04/15/1979	1 PM :15
Brady E Albery ALBR000 12/16/1979	:30 :45
Brian Albery ALBR001 12/16/1972	2 PM :15
Julian Albery ALBU000 12/16/1979	:30 :45

Add New Patient

Apts in View Filter

Brady E Albery Dec 01, 04:00 PM	:30 :45
Julian Albery Dec 01, 10:30 AM	4 PM :15
Ken Burns Dec 01, 04:00 PM	:30 :45
Molly Cross Dec 01, 03:30 PM	5 PM :15
Chris Paper Dec 01, 01:30 PM	:30 :45

Total: 5 New: 0

Close Dock New Edit Reschedule Cancel Delete Refresh Today Jump To

Front Desk Provider View Patient Flow Tuesday, Dec 1, 2020 1:45 PM Dr. Brian Albery Log Out KB



Calendar

Switching Providers

To switch to a different provider's view, select the drop-down arrow at the top right corner of the calendar (when on Day or Week view). This will display a list of all providers and allow you to select the provider you want.

Note that each provider has a unique color. Provider colors can be selected in Settings/Users/Provider Info Tab

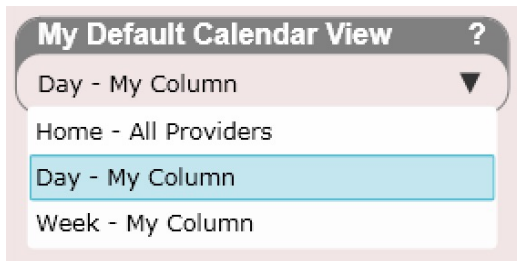




Calendar – Day View

Day view allows you to see more appointment information (the complete patient name as well as the status of the appointment) without having to hover over the appointment or click on it.

Power Tip: You can default the calendar to open to your preferred view. This is done in Settings/Users/Provider Info 2.



Calendar

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Recent Patients

- Shiny Abraham ABRSH000 01/08/1990
- Ms Braxton Adams ADABA000 04/15/1979
- Brady E Albery ALBBER000 12/16/1979
- Brian Albery ALBBER001 12/16/1972
- Julian Albery ALBJU000 12/16/1979

Add New Patient

Apts in View Filter

Dr. Brian Albery
Tuesday, December 1, 2020
Spinal Care Chiropractic

1 PM
:15
:30
:45
2 PM
:15
:30
:45
3 PM
:15
:30
:45
4 PM
:15
:30
:45
5 PM
:15
:30
:45
6 PM
:15

Brady E Albery
Dec 01, 04:00 PM

Julian Albery
Dec 01, 10:30 AM

Brady E Albery
Checked In

Total: 2 New: 0

Close Dock New Edit Reschedule Cancel Delete Refresh Today Jump To

Front Desk Provider View Patient Flow Tuesday, Dec 1, 2020 1:46 PM Dr. Brian Albery Log Out KB

Calendar – Week View



Week view allows you to see the entire week for a provider.



Power Tip: If you want to display more information in your columns (make the screen less “scrunched”) go to Settings/Practice Info/Facility Locations. Then modify the “Scheduler Max Columns in View” drop down box. The smaller the number the more content you will see in a single view. To accommodate more content in a single view scroll bars will form at the bottom of the calendar screen.

The screenshot shows a medical scheduling software interface. At the top, it displays the date range "Nov 29, 2020 - Dec 5, 2020" and the provider "Spinal Care Chiropractic". The main area is a calendar grid for "Dr. Brian Albery" showing appointments from Sunday, Nov 29 to Saturday, Dec 5. The grid is divided into 15-minute slots. Appointments are shown as colored blocks: a blue block for "Bradley Thor" (Scheduled) on Monday, Nov 30 at 4:15 PM; a green block for "Brady E Albe" (Checked In) on Tuesday, Dec 1 at 4:15 PM; a purple block for "Julian Albery" (Checkout New Patient Visit) on Monday, Nov 30 at 5:15 PM; a green block for "Brady E Albe" (Completed) on Monday, Nov 30 at 6:15 PM; and another green block for "Brady E Albe" (Completed) on Monday, Nov 30 at 7:15 PM. On the left side, there is a "Recent Patients" list with names and IDs, an "Add New Patient" button, and an "Apts in View" list showing a scrollable list of appointments for Brady E Albery. At the bottom, there is a navigation bar with buttons for "Close", "Dock", "New", "Edit", "Reschedule", "Cancel", "Delete", "Refresh", "Today", and "Jump To". The status bar at the very bottom shows "Tuesday, Dec 1, 2020 1:46 PM" and "Dr. Brian Albery".



Calendar – Work Schedule

You may have noticed several areas on the calendar that are a light grey (shown to the right). These are areas marked off as non-schedulable.

This is a great way to block off times on the calendar when the practice is not open. These times are completely customizable for each provider.

To change the blocked off times for a provider go to Settings/Users/Work Schedule.



Settings



Users

You can also customize user's work schedules and more in Settings/Calendar.

The screenshot shows a medical software interface for a calendar. At the top, it displays 'Calendar' and 'Spinal Care Chiropractic'. The date is 'Tuesday, December 1, 2020'. The provider is 'Dr. Brian Albery'. The calendar grid shows time slots from 1 PM to 6 PM. A red arrow points to a greyed-out area between 3 PM and 4 PM. The 'Recent Patients' list includes Shiny Abraham, Ms Braxton Adams, Brady E Albery, Brian Albery, and Julian Albery. The 'Apts in View' list shows appointments for Brady E Albery and Julian Albery. The bottom of the interface has a toolbar with buttons like 'Close', 'Dock', 'New', 'Edit', 'Reschedule', 'Cancel', 'Delete', 'Refresh', 'Today', 'Jump To', 'Front Desk', 'Provider View', 'Patient Flow', and 'Log Out'.

Power Tip: These greyed out areas can still have appointments scheduled to them. Thus, they differ from the right click “Add Block-out Time” option of blocking off time. When time is blocked off by right click = Add Block-out Time” then you cannot schedule an appointment in this time slot.



Calendar – Work Schedule



Settings



Users

Here is the work schedule. Customize the day start and end as well as up to two breaks. You can do this for up to two locations per day.

User Dr. Brian

The first Monday of my work schedule begins on
Always regardless of Work Schedule

My work schedule repeats every 1 week(s).

< > Edit work schedule for week 1 Current week for your work schedule is 1

	Location	Day	Start / End	Break 1	Break 2
Monday	<input type="button" value="Edit Location 1"/> Main		8:00 AM / 2:00:PM		
	<input type="button" value="Edit Location 2"/> Get Well Clinic 3		2:00 PM / 7:00:PM		
Tuesday	<input type="button" value="Edit Location 1"/> Get Well Clinic 3		8:00 AM / 5:00:PM		
	<input type="button" value="Edit Location 2"/> Not at location today				
Wednesday	<input type="button" value="Edit Location 1"/> Main		8:00 AM / 5:00:PM		
	<input type="button" value="Edit Location 2"/> Get Well Clinic 3		2:00 PM / 7:00:PM		
Thursday	<input type="button" value="Edit Location 1"/> Main		8:00 AM / 8:00:PM		
	<input type="button" value="Edit Location 2"/> Not at location today				
Friday	<input type="button" value="Edit Location 1"/> Main		12:20 AM / 12:45:AM		
	<input type="button" value="Edit Location 2"/> Not at location today				
Saturday	<input type="button" value="Edit Location 1"/> Main		9:00 AM / 1:00:PM		
	<input type="button" value="Edit Location 2"/> Not at location today				
Sunday	<input type="button" value="Edit Location 1"/> Not at location today				
	<input type="button" value="Edit Location 2"/> Not at location today				



Calendar – Work Schedule

The calendar supports blocking off times for each provider (marking areas in a grey color). This makes it easier for your scheduler so they know what times you can see patients.

You can block off times on the same day for up to two locations. This is beneficial if you work at location A in the morning and location B in the evening (or something like this).

	Location	Day Start / End	Break 1 Start / End	Break 2 Start / End
Monday	Edit Location 1 Main	8:00 AM / 5:00:PM	12:00 PM / 1:00:PM	
	Edit Location 2 Not at location today			

To block off time click “Edit Location 1”. This will open up the dialog shown to the right. Here you can enter the Day Start and Day End times as well as up to two breaks.

If you wish to block off time for a second location, click “Edit Location 2”.

In Facility Today?
Yes

Facility Location
Durant

Day Start Time: 10:00 AM

Day End Time: 10:00 PM

Break 1 Start Time: 12:00 PM

Break 1 End Time: 1:00 PM

Break 2 Start Time: [Empty]

Break 2 End Time: [Empty]

OK Cancel



Calendar – Work Schedule

At the top you will notice an “Add Week” button, as well as left and right arrow to navigate in between weeks. The calendar supports up to 4 weeks of block off times and will then repeat. If your weeks repeat the same you will not need to add additional weeks.

My work schedule repeats every 1 week(s). **Add Week** Remove Week

< > Edit work schedule for week 1

Clicking “Add Week” will create a new week (shown to the right). If you have a schedule that repeats every two weeks, you will then of course only create two weeks.

My work schedule repeats every 1 week(s). **Add Week** Remove Week

< > Edit work schedule for week 1

	Location	Day Start / End	Break 1 Start / End	Break 2 Start / End
Monday	Edit Location 1 Not at location today			
	Edit Location 2 Not at location today			
Tuesday	Edit Location 1 Not at location today			
	Edit Location 2 Not at location today			
Wednesday	Edit Location 1 Not at location today			
	Edit Location 2 Not at location today			
Thursday	Edit Location 1 Not at location today			
	Edit Location 2 Not at location today			
Friday	Edit Location 1 Not at location today			
	Edit Location 2 Not at location today			
Saturday	Edit Location 1 Not at location today			
	Edit Location 2 Not at location today			
Sunday	Edit Location 1 Not at location today			
	Edit Location 2 Not at location today			



Calendar – Work Schedule

If you do not setup your work schedule and there are also no other providers with their work schedule setup the calendar will display this message. Make sure you setup your work schedule or select the option “Always Regardless or Work Schedule”.

Calendar CPT copyright 2013 American Medical Association. All rights reserved.

Recent Patients < > **Friday, February 9, 2018**

6 AM
:05
:10
:15
:20
:25
:30
:35
:40
:45
:50
:55
7 AM
:05
:10
:15
:20
:25
:30
:35
:40
:45
:50
:55
8 AM
:05
:10
:15
:20
:25
:30
:35
:40
:45
:50

Add New Patient

Apts in View Filter

Total: 22 **New: 2**

Close **Dock** **New** **Edit** **Reschedule** **Cancel** **Delete** **Today** **Jump To**

Front Desk **Provider View** **Patient Flow** **Friday, Feb 9, 2018** **8:51 AM** **Log Out** **KB**

Calendar – Customization

Note: You can also customize the calendar in Settings/Calendar

You can also change the first start time that appears on the calendar and the last time (end time) that appears on the calendar. This way you do not have a 24-hour calendar, but instead may show something like an 8 am to 6 pm view. To change these settings, go to Settings/Practice Info/Facility Locations.



Settings



Practice Info

You can also set the number of time slots per hour. For example, you may want 4 slots per hour which would be 15-minute interval slots. Or, you may wish to have 6 slots per hour which would be 10-minute interval slots.

You can also set the max columns in view. For example, if you have 6 providers and feel that the home view of the calendar is getting too scrunched, simply set the “Scheduler Max Columns in View” to 3 and see only three providers on the screen. Use scroll bars at the bottom of the calendar to see more the other providers.

Scheduler Day Start Time

6:00 AM



Scheduler Day End Time

10:00 PM



Scheduler Time-Slots per Hour

6



Scheduler Max Columns in View

3



Calendar – Customization

Note: You can also customize the calendar in [Settings/Calendar](#)

You may set Default appointment Types. This way when you are scheduling an appointment you can already have your appointment type selected. To set your default appointment type(s) go to Settings/Practice Info/Facility Locations. Click the “Edit” button in the Default Visit Types box to reveal the dialog shown below.



Settings Practice Info

Default Visit Types

Visit Type (Primary)
 Adjustment

Visit Type (Secondary)
 Massage

Visit Type (Tertiary)
 Ultrasound Therapy

Visit Type (Quaternary)
 Acupuncture

Done **Cancel**

You can also set a default visit type PER PROVIDER in Settings/Users/Provider Info. This will override the facility default visit types if they exist.

Default Visit Type ?

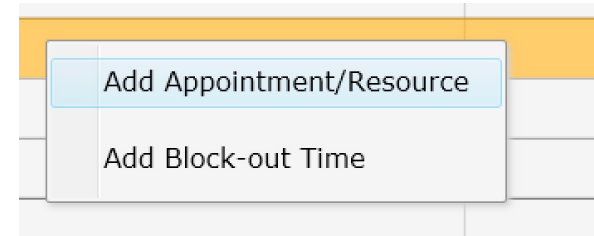
Adjustment



Calendar – New Appointment Behavior

There are two ways to schedule a new appointment:

- Double click a specific area on the calendar
- Right click on a row and select “New Appointment/Resource”



Double clicking will ALWAYS schedule the appointment to the specific column you double clicked. This is noted by the “Column Start” as shown below.

Appointment Time

Date		Time	
01-07-2019	15	3:00 PM	
Column Start	Occupy Columns		
2	X	1	X

However, with Right Click there is an option in Settings to allow Column Start to be “blank”. When column start is blank this provides a “SNAP” effect when appointments in a row are rescheduled or deleted. Let’s look at an example of this setting option on the next page.



Calendar – New Appointment Behavior

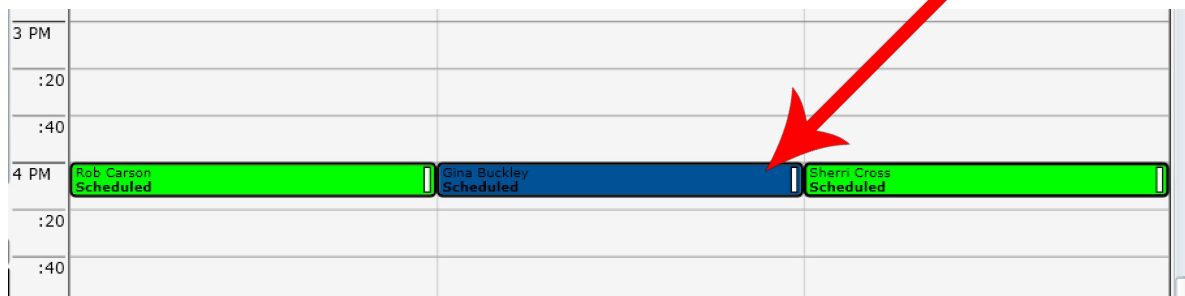
Calendar - New Appointment Behavior

Do not force column start on Right Click/New Appointment

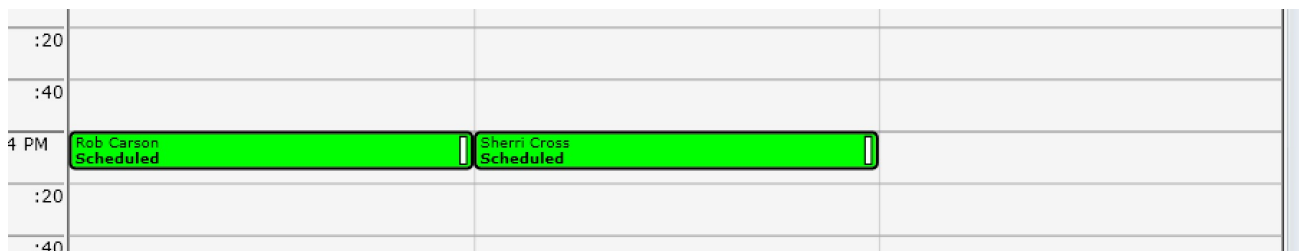
When this option is selected creation of a new appointment upon right click will not select a column start.

Appointment Time	
Date	Time
01-07-2019	4:00 PM
<input type="text" value="15"/>	<input type="text" value=""/>
Column Start	Occupy Columns
<input type="text" value=""/>	<input type="text" value="1"/>

Now if we delete the center appointment...



We then see the right appointment shift to the left to “fill the gap”.





Calendar – New Appointment Behavior

Calendar - New Appointment Behavior ?

Force column start on Right Click/New Appointment ▼

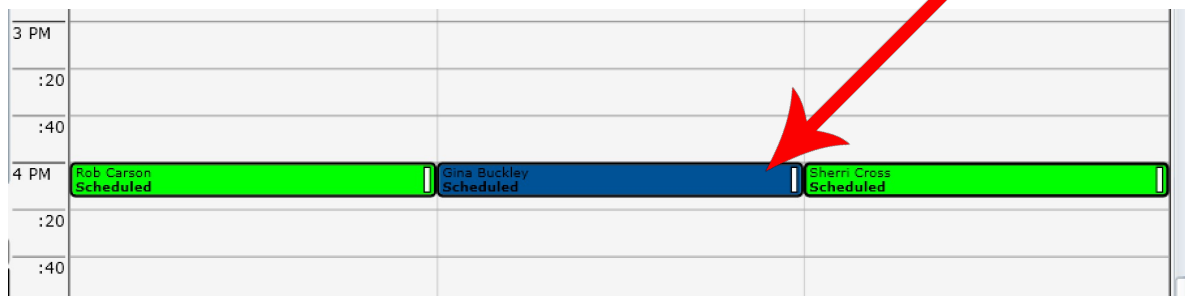
When this option is selected creation of a new appointment upon right click will select a column start.

Appointment Time

Date	Time
01-07-2019	4:00 PM

Column Start	Occupy Columns
2	1

Now if we delete the center appointment...



We will NOT see any shifting and a gap is formed.



Calendar – Block-out Time



For occasions where you want to block off time on the fly or in a more specific way, use the “Block-out Time” option on the calendar.

First you will need to create your “Block-out Calendar Types”. For example, you may want a block-out type called “Personal Time”. Or perhaps “Vacation”. Just like creating Visit Types you can set a default length as well as color.

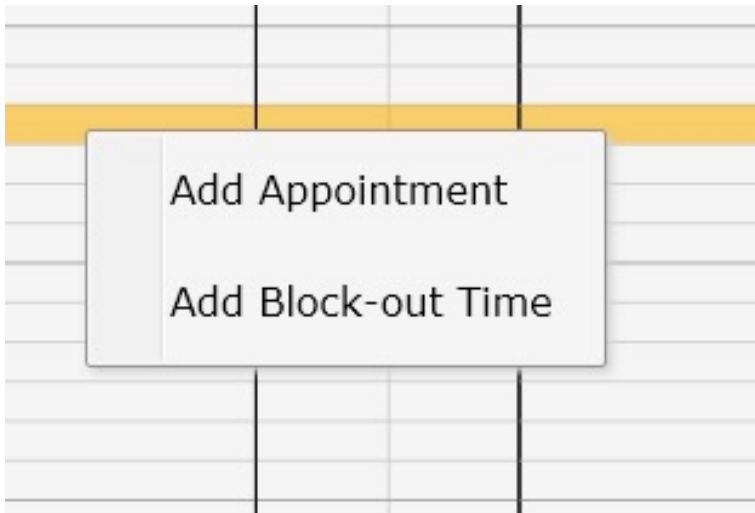


Settings



Block out
Calendar
Types

To add a block-out time to the calendar right click on a time and select “Add Block-out Time”.



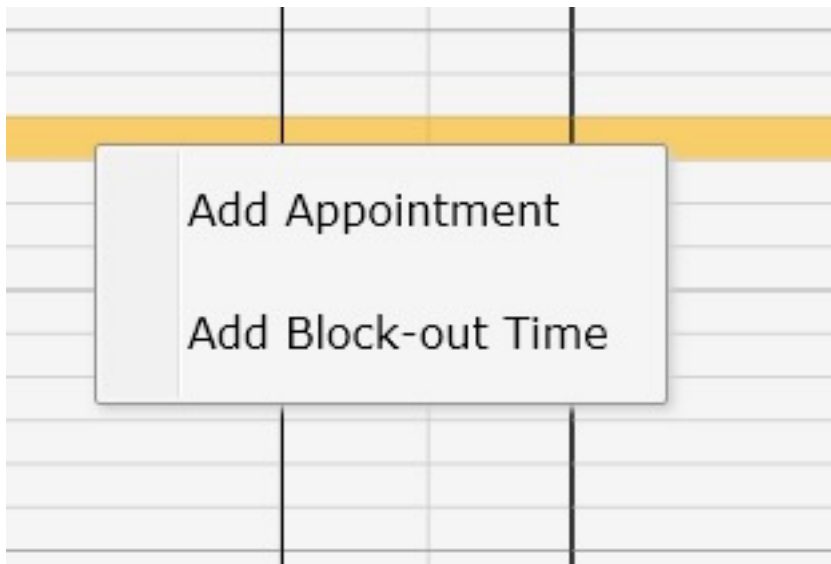
Note: You will not be able to schedule an appointment ON TOP of this blocked out time. If you do need to schedule an appointment over this time you will need to edit or delete the block out time first.



Calendar – Block-out Time

Pictured to the right is the Block-out Time dialog. This dialog will appear after right clicking on the calendar and selecting “Add Block-out Time. Enter your details and click “Save”.

Block-out times appear semi-transparent so they can be distinguished from regular appointments.

A screenshot of the "New Block-out Time" dialog box. The dialog has a title bar and several sections:

- Facility Location:** A dropdown menu with "Davenport" selected.
- Scheduled To:** A dropdown menu with "Dr. Brian Albery DC" selected.
- Start Time:** A section with "Date" and "Time" sub-sections. The date is "7/28/14" and the time is "2:20 PM".
- Duration:** A dropdown menu with "30 minutes" selected.
- Type:** A dropdown menu with "Personal Time" selected.
- Note:** A text input field.
- Repeat Every:** A section with a checkbox for "Repeat this block-out time every:", a spinner set to "1", the text "week(s) until <M/d/yy> 15 on:", and a row of checkboxes for days of the week (S, M, T, W, T, F, S).

At the bottom of the dialog are two buttons: "Save" (green) and "Cancel" (black).



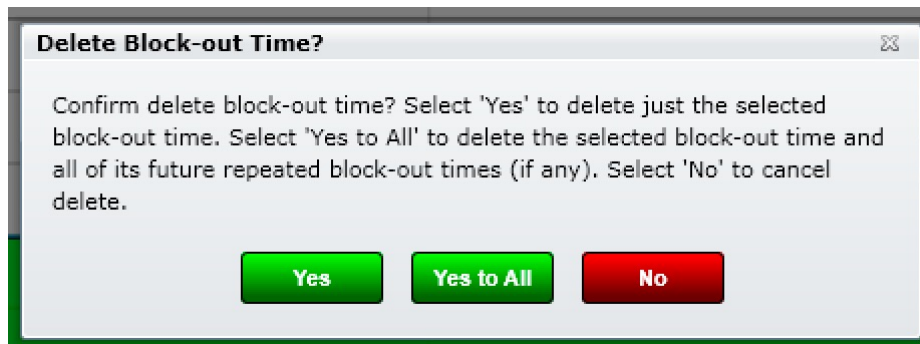
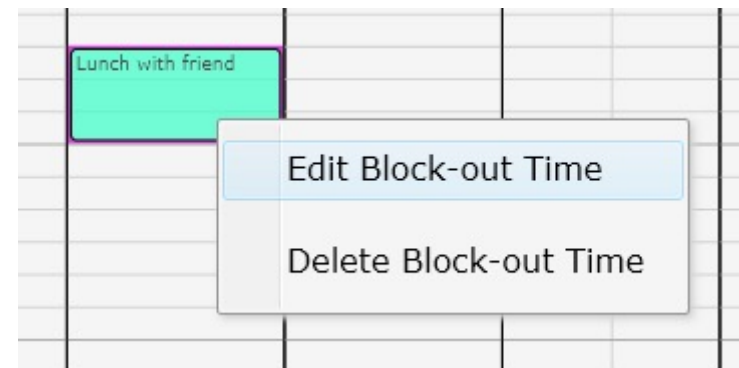
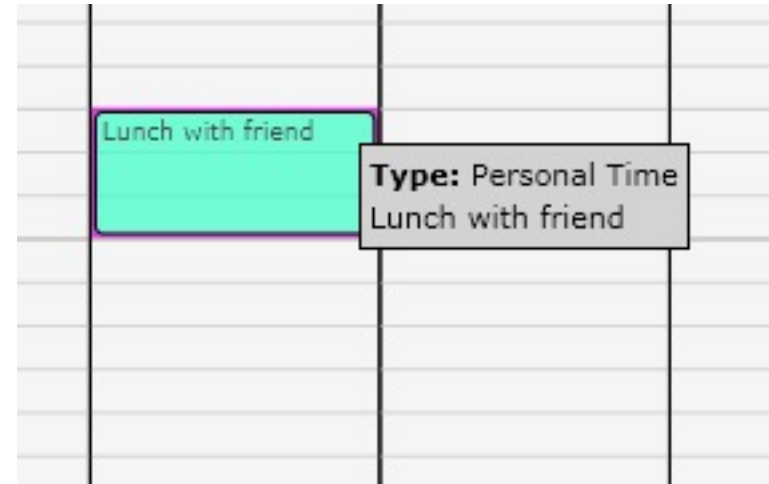
Calendar – Edit - Block-out Time

Pictured to the right is a block-out time. When you hover over with your mouse you can see a pop up showing the notes for the block-out time.

To edit a block-out time right click on the block-out time and click “Edit Block-out Time”.

To delete a block-out time right click on the block-out time and select “Delete Block-out Time”.

If you created Block-out time using the repeat option, you will be provided an option to delete the selected or this and all future block-outs in this series.

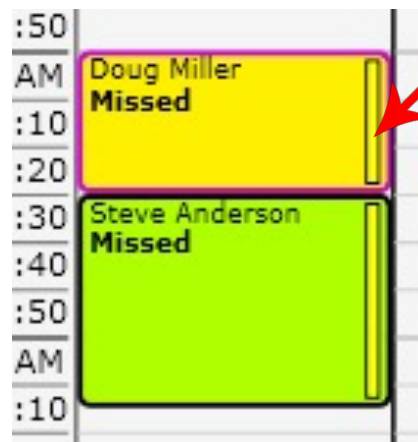


Calendar – Appointment Status

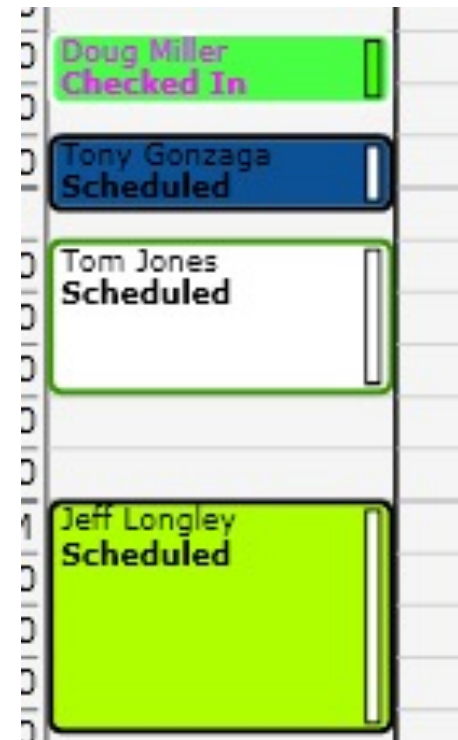


On the far right of the patient appointment is a colored box. This box is a visual indicator to quickly let you know the status of the patient's appointment by looking at the calendar.

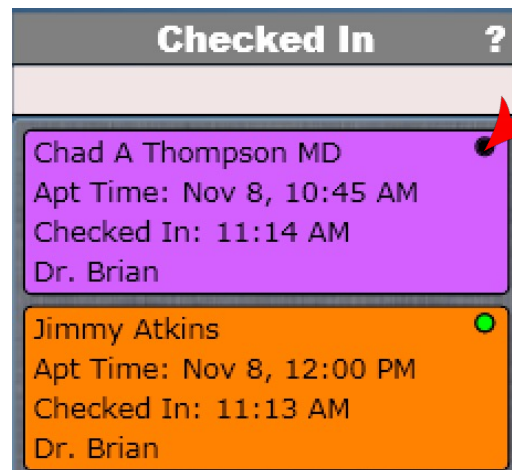
- Green = Checked In or Complete
- Yellow = Missed
- White = Future (or scheduled)
- Black = SOAP Signed



Appointment Status



This same color scheme is followed as DOTS on the Front Desk as shown to the right.





Calendar – Appointment Details

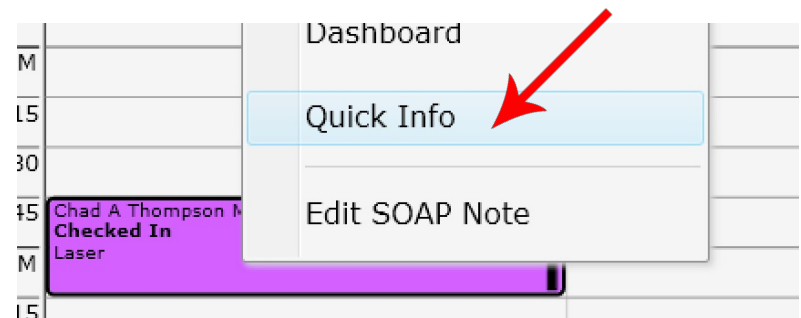
A very nice feature on the calendar is the ability to see appointment details without having to click inside the appointment. Simply hover the mouse over the appointment to reveal the details about the appointment. This can be a great time saver if all you are looking for is the patient's phone number.

Hover details include

- Patient Name
- DOB - Age
- Phone Number
- Appointment Time
- Length
- Status
- New Patient Visit
- Provider
- Visit Type(s)
- Notes
- Scheduled By
- Scheduled On
- Kiosk (sent or completed)

Omar Becker - BECOM000
12/13/1957 - Age 63
563-299-7876
Time: 09:00 AM
Length: 15 minutes
Status: Scheduled
New Patient Visit: No
Provider: Dr. Brian Albery
Visit Type (Primary): Adjustment
Visit Type (Secondary):
Visit Type (Tertiary):
Visit Type (Quaternary):
Notes: Pregnant
Scheduled By: Dr. Brian Albery
Scheduled On: 09 Dec 2020 01:41 PM
Kiosk: Sent

Power Tip: You can right click on a patient and select Quick Info to reveal other helpful information including appointments, insurance information and the ability to print appointments.



Quick Info Dialog

Quick Info - Brady E Albery ALBBR000 DOB: 12/16/1979 Age: 40 INS: BCBS CPT copyright 2020 American Medical Association. All rights reserved.

General

Care Plan

Brady E Albery



HT: 72.0 in

WT:

BMI:

Gender: Male

1234 Main St.,
Bettendorf, IA 52722

Mobile: 563-505-7766

Insurance Carriers		Chiro Visits	Therapy	Chiro Amt
Primary	3456 WECOME WAY - BCBS	9 of 20	1 of 10	\$930 of \$0
Secondary				
Tertiary				

Member Responsibility	
Deductible	None
Copay	\$20.00
Co-insurance	0%

Treatment Plan	
3x per week for 4 week(s)	11/11/2020
2x per week for 4 week(s)	to 1/6/2021
19 of 20 completed	

Diagnosis

Reason for Visit

Adjustment

Reason/Visit Notes

Account Information	
Previous Balance	\$57.80

Appointments History

350 Completed 3 Canceled
440 Missed 0 Rescheduled
4 Future Signed SOAP

Dec 4, 2020 - 10:00 AM	Fri	Dr. Brian Albery Scheduled
Dec 4, 2020 - 9:00 AM	Fri	Dr. Brian Albery Scheduled
Dec 3, 2020 - 9:00 AM	Thu	Dr. Brian Albery Scheduled
Dec 2, 2020 - 9:00 AM	Wed	

Print Future Appointments

Last Appointment : 11/30/2020

Next Appointment : 12/02/2020

Close

Print

Dashboard

Front Desk

Provider View

Patient Flow

Tuesday, Dec 1, 2020

1:49 PM

Dr. Brian Albery

Log Out

KB

Calendar – New appointment

This is the FULL appointment dialog. For simplicity the next few slides will only show the left portion of this dialog.

New Appointment

Recent Patients

brady ?

Brady E Albery
ALBBR000 12/16/1979

Facility Location
Spinal Care Chiropractic

Patient Name
Brady E Albery

Is New Patient Visit
No

Scheduled To
Dr. Brian Albery

Preferred Provider
Dr. Brian Albery

Appointment Time
Date: 12-01-2020 Time: 1:00 PM
Column Start: 1 Occupy Columns: 2

Appointment Length
15 minutes

Visit Type (Primary)
Adjustment

Visit Type (Secondary)

Visit Type (Tertiary)

Visit Type (Quaternary)

Selected Insurance Case
BCBS

Care Plan
Care Plan

Appointment Type
Scheduled

Visits - Primary Ins.
Chiropractic: 9 of 20
Therapy: 1 of 10

Visits - Secondary Ins.
Chiropractic
Therapy

Visits - Tertiary Ins.
Chiropractic
Therapy

Treatment Plan
3x per week for 4 week (s) 11/11/2020 to 1/6/2021
2x per week for 4 week (s)
19 of 20 completed

Brady E Albery

Appointments History

350	Completed	3	Canceled
440	Missed	0	Rescheduled
4	Future		Signed SOAP

Dec 4, 2020 - 10:00 AM Fri
Dr. Brian Albery
Scheduled

Dec 4, 2020 - 9:00 AM Fri
Dr. Brian Albery
Scheduled

Dec 3, 2020 - 9:00 AM Thu
Dr. Brian Albery
Scheduled

Dec 2, 2020 - 9:00 AM Wed
Dr. Brian Albery
Scheduled

Dec 1, 2020 - 4:00 PM
Dr. Brian Albery
Checked In

Nov 30, 2020 - 7:00 PM
Dr. Brian Albery
Completed

Nov 30, 2020 - 6:00 PM
Dr. Brian Albery
Completed

Buttons: Repeat This Appointment, Save, Cancel, Kiosk Visit, View Available Time



Calendar – New appointment

Scheduling a New appointment can be accomplished in three ways.

- Double Click on an open time slot on the calendar
- Right Click on an open time slot on the calendar
- Click the “New” button at the bottom of the calendar

These actions will open the “New appointment” dialog. Using the Recent Patient list box select your patient. Then fill in the appropriate information to schedule your appointment and click save.

Fields include:

- Facility Location (defaults to your default location)
- Patient Name
- Is New Patient Visit (Yes/No)
- Scheduled To (Provider Name)
- Preferred Provider
- Appointment Time
- Column Start and Occupy Columns
- Appointment Length
- Visit Type (Primary)
 - This will determine the appointment color and default length
- Visit Type (Secondary)
- Visit Type (Tertiary)
- Visit Type (Quaternary)
- Appointment Note
 - Will appear on the SOAP Note Intro Tab
 - Will appear when you check in patient

New Appointment

Recent Patients

brady ?

Brady E Albery
ALBBER000 12/16/1979

Facility Location

Spinal Care Chiropractic

Patient Name

Brady E Albery

Is New Patient Visit

No

Scheduled To

Dr. Brian Albery

Preferred Provider

Dr. Brian Albery

Appointment Time

Date 12-01-2020 **Time** 1:00 PM

Column Start 1 **Occupy Columns** 2

Appointment Length

15 minutes

Visit Type (Primary)

Adjustment

Visit Type (Secondary)

Visit Type (Tertiary)

Visit Type (Quaternary)

Add New Patient

Reason/Visit Notes

Repeat This Appointment **Save**

Calendar – New appointment



Power Tip: When scheduling an appointment on the calendar, you can either click the “New” button or double click on the calendar in a time slot. If you click the “New” button the provider that is logged in will be the default provider. If you double-click on the calendar the provider’s column you double clicked on will be the scheduled to provider. Knowing this can save you a step.

Power Tip: To quickly see a list of available appointment times click the “View Available Times” button in the lower right corner of the New appointment Dialog.



New Appointment

Recent Patients

brady	?
Brady E Albery ALBBR000	12/16/1979

Facility Location
Spinal Care Chiropractic

Patient Name
Brady E Albery

Is New Patient Visit
No

Scheduled To
Dr. Brian Albery

Preferred Provider
Dr. Brian Albery

Appointment Time

Date	Time
12-01-2020	15 1:00 PM

Column Start 1 **Occupy Columns** 2

Appointment Length
15 minutes

Visit Type (Primary)
Adjustment

Visit Type (Secondary)

Visit Type (Tertiary)

Visit Type (Quaternary)

Reason/Visit Notes

Repeat This Appointment **Save**



Calendar – View Available Times

If you wish to schedule an appointment and don't want to spend time searching the calendar for OPEN TIMES, then use the "View Available Times" button.

Clicking this button will open a dialog showing you all the available times.

Use the Arrows at the top to navigate between days quickly or click the Calendar to easily select the date you are looking for.

By default, only your main location will be shown. Click "Search all Locations" to view all locations.

Click "Search all Providers" to view appointment times for all providers.



Search all Locations Search all Providers

Facility Location
Main ▼

Scheduled To
Dr Chrissy J Albery DC ▼

Appointment Length
15 minutes ▼

Date
◀ 7/31/14 15 ▶

Available Appointment Times

Facility Location ▲	Provider	Start Time ▲	Slots
Main	Dr Chrissy J Albery DC	11:00 AM	2
Main	Dr Chrissy J Albery DC	11:15 AM	2
Main	Dr Chrissy J Albery DC	11:30 AM	2
Main	Dr Chrissy J Albery DC	11:45 AM	2
Main	Dr Chrissy J Albery DC	12:00 PM	2
Main	Dr Chrissy J Albery DC	12:15 PM	2
Main	Dr Chrissy J Albery DC	12:30 PM	2
Main	Dr Chrissy J Albery DC	12:45 PM	2
Main	Dr Chrissy J Albery DC	01:00 PM	2
Main	Dr Chrissy J Albery DC	01:15 PM	2
Main	Dr Chrissy J Albery DC	01:30 PM	2
Main	Dr Chrissy J Albery DC	01:45 PM	2
Main	Dr Chrissy J Albery DC	02:00 PM	2
Main	Dr Chrissy J Albery DC	02:15 PM	2

OK Cancel

Calendar



The right portion of the appointment Dialog includes many features

- **Select Insurance Case or Care Plan**
 - Allows you to see or change the insurance case or Care Plan for the scheduled appointment
 - The red dot indicates the default case (this is configured in Dashboard/Insurance Cases)
- **Appointment Type**
 - This is used to track scheduled, walk-in or call-in appointments. You can set the default in Settings/Practice Info/Facility Locations
- **Visit Counters**
 - Chiropractic for primary/secondary/tertiary
 - Therapy for primary/secondary/tertiary
- **Treatment Plan**
 - This can help determine how to schedule the patient's appointment(s)
- **Appointments**
 - Shows a snapshot of the patient's appointments and color codes them based on the menu at the top. Click "History" to see a 6-month history.

The screenshot shows the appointment dialog for Brady E Albery. It features several sections:

- Selected Insurance Case:** BCBS (indicated by a red dot)
- Care Plan:** Care Plan (indicated by a red dot and a red X)
- Appointment Type:** Scheduled
- Visits - Primary Ins.:** Chiropractic (9 of 20), Therapy (1 of 10)
- Visits - Secondary Ins.:** Chiropractic, Therapy
- Visits - Tertiary Ins.:** Chiropractic, Therapy
- Treatment Plan:** 3x per week for 4 week (s) 11/11/2020 to 1/6/2021; 2x per week for 4 week (s) 1/6/2021; 19 of 20 completed
- Appointments:** A list of appointments with status indicators (green for completed, yellow for missed, red for canceled, orange for rescheduled, white for future, black for signed SOAP). A "History" button is visible.

Buttons at the bottom include "Cancel", "Kiosk Visit", and "View Available Time".

Calendar – Kiosk Visit



If you are using the Patient Kiosk you may already know you can set default kiosk sections (e.g. Complaints). However, defaults do not provide complete flexibility on setting a specific section for a specific visit.

To override defaults and add/remove sections or individual intake question categories, acknowledgements or outcome assessments click the Kiosk Visit button. Then add/remove using the checkbox.



The screenshot shows a configuration window for a kiosk visit, divided into four sections. Each section has a title, a "Select All" button, and a "Clear All" button. The sections are:

- Kiosk Sections This Visit:** Contains four items: "Welcome" (checked), "Personal Information" (checked), "Enrollment" (unchecked), and "Demographics" (unchecked).
- Additional Intake Questions This Visit:** Contains four items: "Personal Injury - History" (checked), "Personal Injury - Hospital Information" (checked), "Personal Injury - Condition" (checked), and "Auto Accident - History" (checked).
- Acknowledgements This Visit:** Contains four items: "Verification of Privacy" (unchecked), "Verification of X-ray" (unchecked), "Authorization to Contact" (unchecked), and "Verification of Payment" (unchecked).
- Outcome Assessments This Visit:** Contains four items: "Headache Disability Index" (checked), "Lower Extremity Disability Index" (checked), "Neck Pain Disability Index" (checked), and "Oswestry Low Back Pain Disability Index" (checked).

At the bottom of the window are two buttons: a green "Ok" button and a red "Cancel" button.

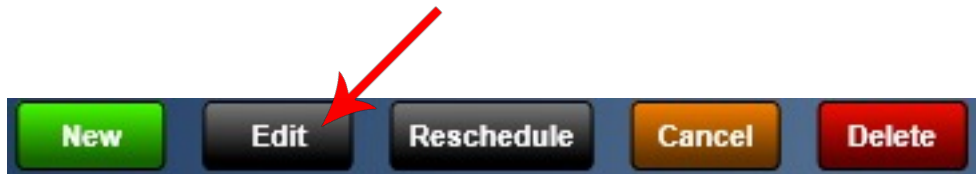
Calendar – Edit Appointment



To edit an appointment

- Click on the appointment you wish to edit. Then click on the black “Edit” button below.
- Right click on the appointment and select “Edit” from the pop-up menu.

This will open the “Edit appointment” Dialog. Make any necessary changes and click Save.



Edit Appointment

Recent Patients	
Shiny Abraham ABRSH000	01/08/1990
Ms Braxton Adams ADABA000	04/15/1979
Brady E Albery ALBBER000	12/16/1979
Brian Albery ALBBER001	12/16/1972
Julian Albery ALBJU000	12/16/1979
Bob Anderson ANDBO000	12/16/1979
Jerry Anderson ANDJE000	06/11/2002
Mickey Anderson ANDMI000	03/05/2004
Rucus Anderson	

Facility Location	
Spinal Care Chiropractic	

Patient Name	
Brady E Albery	

Is New Patient Visit	
No	

Scheduled To	
Dr. Brian Albery	

Preferred Provider	
Dr. Brian Albery	

Appointment Time	
Date	Time
12-01-2020	4:00 PM
Column Start	Occupy Columns
1	2

Appointment Length	
15 minutes	

Visit Type (Primary)	
Adjustment	

Visit Type (Secondary)	

Visit Type (Tertiary)	

Visit Type (Quaternary)	

Reason/Visit Notes

Repeat This Appointment

Save

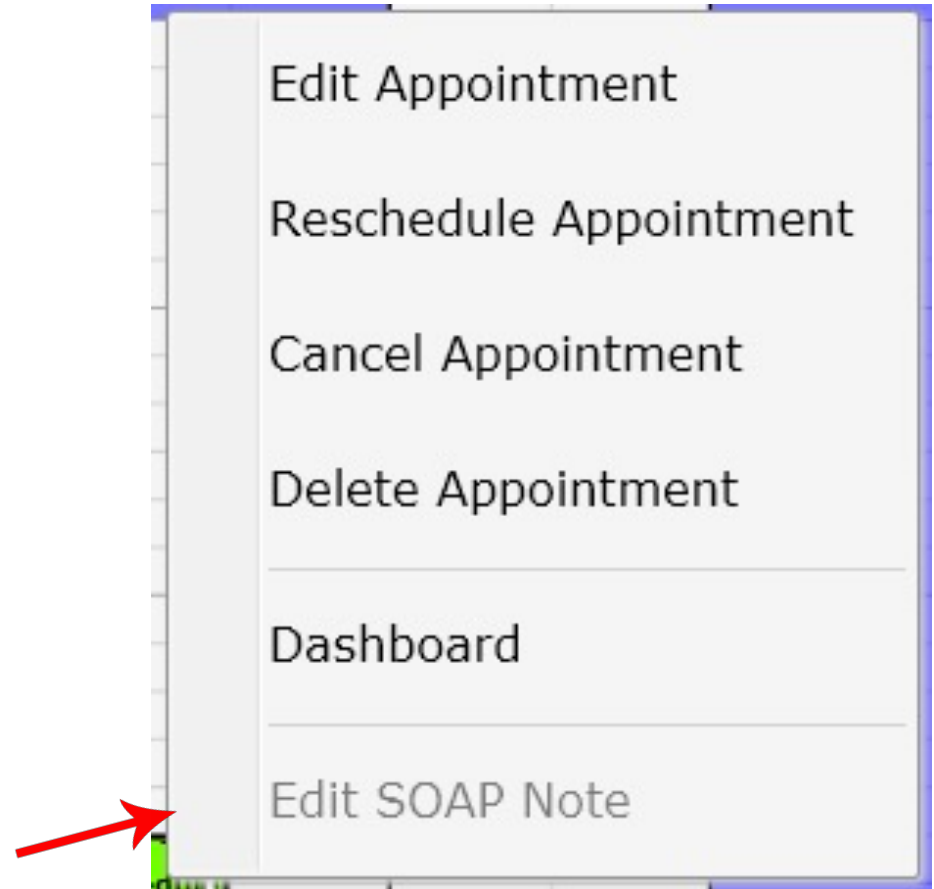


Calendar – Edit SOAP Note

Power Tip: Right clicking on an appointment will allow you to:

1. Edit appointment
2. Reschedule appointment
3. Cancel appointment
4. Delete appointment
5. Dashboard
6. Edit SOAP Note

Note: The Edit SOAP option is only selectable if you scheduled the appointment for a day PRIOR to today OR if the patient has been checked in.





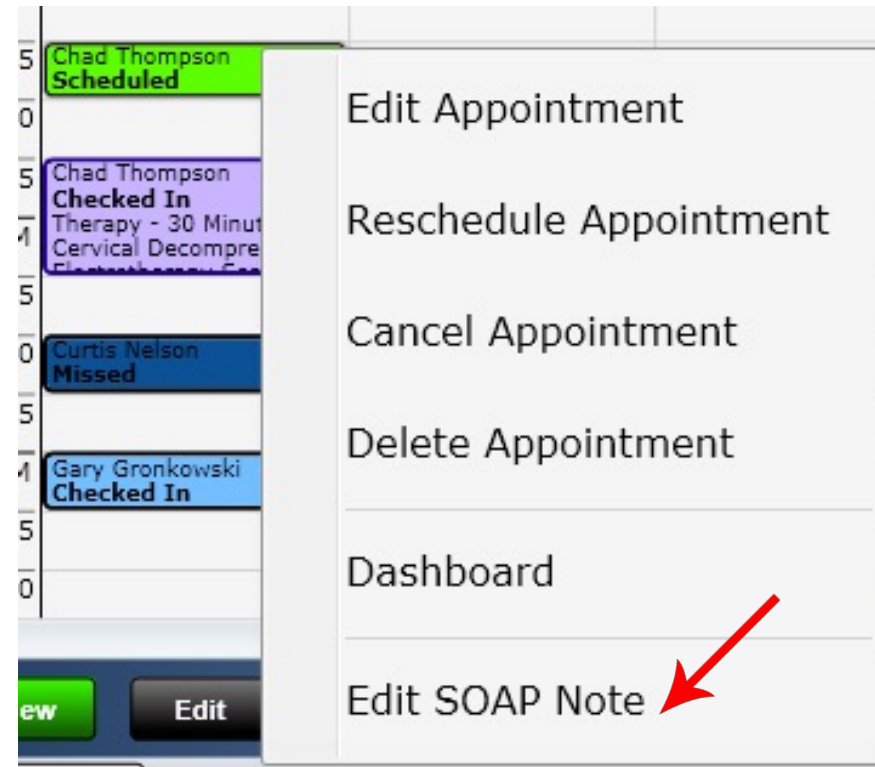
Calendar – Edit SOAP Note

Power Tip: When you right click on an appointment you will have the option to Edit the SOAP Note only if:

- The appointment is scheduled for a day **PRIOR** to today
- Today's patient is checked in.

This is a great feature as you can write a SOAP note on a patient for a date in the past. For example, if you saw a patient over the weekend (Sunday) and didn't get a chance to put them on the calendar and write the SOAP you can use this feature. Simply come in on Monday, schedule the patient on the calendar for Sunday, right click on their scheduled appointment and click "Edit SOAP Note". You can now write the SOAP note.

The patient will not appear on the front desk as this appointment exists on a previous day. If you need to enter payment, go to the Dashboard and then Ledger and "Add Payment".





Calendar – Reschedule Appointment

To reschedule an appointment

- Click on the appointment you wish to reschedule, then click on the black “Reschedule” button at the bottom of the calendar. The “Reschedule appointment” dialog box will open.
- Right click on the appointment and select “Reschedule” from the pop-up menu.



Rescheduled Appointment?

Reason Rescheduled:

Had to go into work|

OK Cancel

Reschedule Appointment

Recent Patients

Anee	00AN001	DOB:
Daniel Abraham	ABRDA000	DOB:
John Abraham	ABRJO000	10/10/2000
Eleanor Abram	ABREL000	03/10/1967
Brian Albery	ALBBR000	05/18/1900
Dr. Brian E Albery D.C.	KIOTO000	10/20/1987
Tyson Alcantar	ALCDA000	06/29/1921
Vicki Alexander	ALEVI000	02/01/1967
Allison Alinton		

Add New Patient

Reason/Visit Notes

Want's Massage Every Visit

Facility Location

Main

Patient Name

Chad A Thompson

Is New Patient Visit

No

Scheduled To

Dr. Brian

Preferred Provider

Ima Therapist

Appointment Time

Date: 04-29-2017 15 10:20 AM

Column Start X Occupy Columns X

Appointment Length

15 minutes

Visit Type (Primary)

Adjustment

Visit Type (Secondary)

Visit Type (Tertiary)

Visit Type (Quaternary)



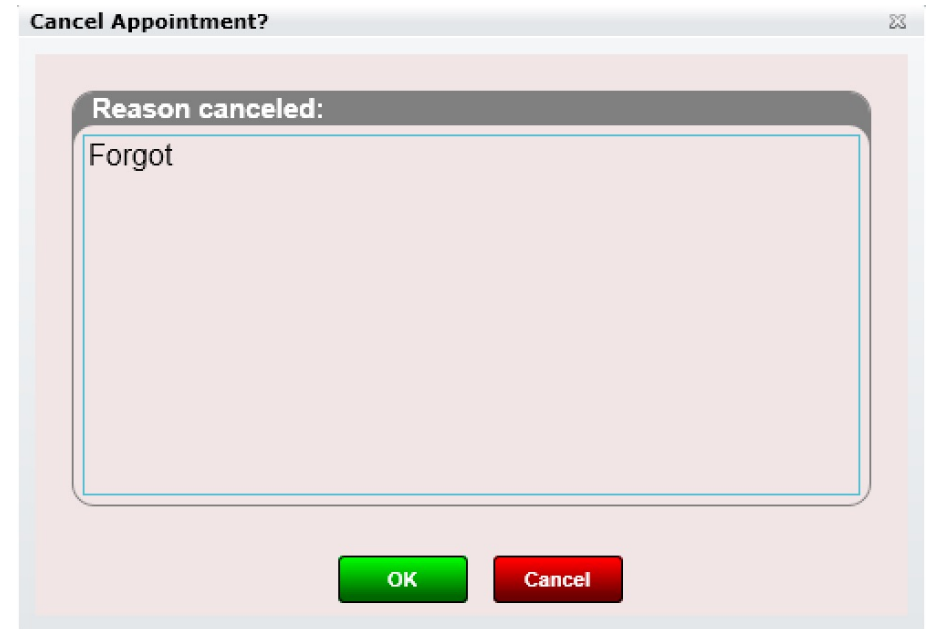
Calendar – Cancel an Appointment

To cancel an appointment

- Click on the appointment, then select the orange “Cancel” button at the bottom of the calendar.
- Right click on the appointment and select “Cancel” from the pop-up menu.

The “Cancel appointment” dialog box will open. This allows you to type in the reason cancelled.

It is important to note that there is a major difference between cancelling an appointment and deleting an appointment. Deleting an appointment keeps no record that that appointment ever existed. Cancelling an appointment keeps a permanent history in the patient’s record.





Calendar – Cancel an Appointment

Power Tip: You can change the “Cancelled appointment Message” at anytime by going into the patient Dashboard/appointments Tile.

Reason Missed or Canceled

Forgot to come in

Power Tip: You can also change the “appointment Note” at anytime by going into the patient Dashboard/appointments Tile.

Appointment Note

Want's message every visit

Note: Neither of these fields populate on the SOAP Note. These fields are only to help you stay organized in your practice.

APPOINTMENTS

- Future
- Missed
- Canceled
- Rescheduled
- Completed

Appointments - Chad Thompson THOCH000 DOB: 10/22/1975 Age: 40 INS: Blue C

Appointments

- Completed
- Canceled
- Missed
- Rescheduled
- Future

Sep 6, 2016 - 10:00 AM Dr. Brian DC Scheduled
Sep 5, 2016 - 9:45 AM Dr. Brian DC Checked In
Sep 5, 2016 - 9:15 AM Dr. Brian DC Scheduled
Sep 1, 2016 - 12:45 PM Dr. Brian DC Missed
Sep 1, 2016 - 12:30 PM Dr. Brian DC Completed
Aug 31, 2016 - 1:41 PM Dr. Brian DC Completed
Aug 31, 2016 - 9:45 AM Dr. Chrissy DC Completed
Aug 30, 2016 - 8:45 PM Dr. Brian DC Missed
Aug 30, 2016 - 7:59 PM Dr. Brian DC Completed
Aug 29, 2016 - 8:30 AM Dr. Brian DC Completed

Visit Type (Primary)
Adjustment

Visit Type (Secondary)

Visit Type (Tertiary)

Visit Type (Quaternary)

Appointment Note
Want's Message Every Visit

Reason Missed/Canceled/Rescheduled

General Visit Note

Load more



Calendar – Delete an Appointment

To delete an appointment

- Click on the appointment, then select the red “Delete” button at the bottom of the calendar.
- Right click on the appointment and select “Delete” from the pop-up menu.

The “Delete appointment” dialog box will open allowing you to confirm your deleted appointment.

“Permanently delete this appointment? All records of this appointment will be erased.” Select either Yes or No.

There is a fundamental difference between deleting an appointment or cancelling an appointment. Deleting an appointment will keep no record that that appointment ever existed. Cancelling an appointment records history in the patient’s record that that appointment was cancelled.





Calendar – Delete an Appointment

Power Tip: You can also delete appointments from the appointments Tile (located in the patient dashboard). This is useful for deleting multiple appointments quickly as you do not have to find the appointment directly on the calendar to delete.



Appointments - Brady E Albery ALBBR000 DOB: 12/16/1979 Age: 40 INS: BCBS CPT copyright 2020 American Medical Association. All rights reserved.

Appointments

361	Completed	3	Canceled
442	Missed	0	Rescheduled
14	Future		Signed SOAP

Dec 21, 2020 - 7:00 PM Mon
Dr. Brian Albery
Scheduled Repeat Apt

Dec 18, 2020 - 7:00 PM Fri
Dr. Brian Albery
Scheduled Repeat Apt

Dec 16, 2020 - 7:00 PM Wed
Dr. Brian Albery
Scheduled

Dec 15, 2020 - 11:00 AM
Dr. Brian Albery
Completed

Dec 15, 2020 - 10:00 AM
Dr. Brian Albery
Completed

Dec 14, 2020 - 1:00 PM
Dr. Brian Albery
Missed

Dec 14, 2020 - 11:00 AM
Dr. Brian Albery
Missed

Dec 14, 2020 - 9:00 AM
Dr. Brian Albery
Completed

Dec 10, 2020 - 3:00 PM
Dr. Brian Albery
Completed

Load more future Load more past

● = Un-signed SOAP Note

Close Dock Delete New Appointment Calendar Save Print Future Appointments Activate V Go to Setting

Tuesday, Dec 15, 2020 10:41 PM Dr. Brian Albery Log Out KB

Delete Recurring Appointment

Would you like to delete this appointment only, this and all future appointments, or all appointments in this series?

This appointment only All other appointments in this series will remain unchanged.

This and future appointments This and all future scheduled appointments will be deleted.

All appointments All scheduled appointments in this series will be deleted.

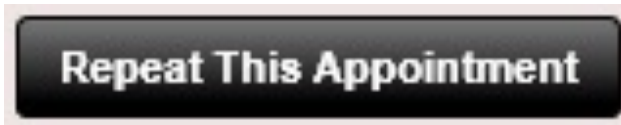
Cancel

Tip: Canceling, Rescheduling or Deleting an appointment will not delete any information your patient may have entered in the Kiosk. SOAP relevant information will be added to the next SOAP note when you select Edit SOAP.



Calendar – Repeat an Appointment

When scheduling an appointment, you may have noticed the “Repeat appointment” button. Click this button to reveal the following dialog box.



The dialog box is titled "Repeat Appointment" and contains three sections:

- Repeat Every:** A section with a left arrow, the number "1", a right arrow, and the word "Weeks".
- Repeat On:** A section with seven checkboxes labeled S, M, T, W, T, F, and S. The checkbox for "F" (Friday) is checked.
- Repeat Ends:** A section with the word "After", a left arrow, the number "1", a right arrow, and the text "Appointment(s)".

At the bottom of the dialog box are two buttons: a green "Create Appointments" button and a black "Cancel" button.

Now select the “Repeat Every” number of weeks. To repeat every week leave it at 1. To repeat every other week, select 2. To repeat every four weeks, select 4, etc.

The “Repeat On” will have the appointment you are now scheduling checked (in this case Friday). You MUST have at a minimum the day you are creating the original appointment selected.

Select the days of the week you want the appointment to repeat on.

Select the “Repeat Ends” after number of appointments. Then click “Create appointments”.

Power Tip: The original appointment does not count in the “Repeat Ends” section. Thus for 10 total appointments have the repeat end after 9 appointments.

Calendar – Reason/Visit Note



When creating an appointment you will see a field called “Reason/Visit Note.” Anything you type in here will be displayed to the provider when editing a SOAP note on the Subjective “Intro Tab” or in the Check-in Dialog for the Front Desk.

In the Patient Profile there is a text box called “Default Reason/Visit Note.” Anything you type here will be saved and COPIED to the “Reason/Visit Notes” section when scheduling an appointment. This is a great feature.

Examples of default reason/visit notes could be:

- Patient wants traction every appointment
- Patient requests TEXT Message Reminders
- Patient wants muscle stimulation every appointment
- Patient will NOT see Dr. Blank for any reason

Hopefully you get the idea and see the benefit to this feature.

Note: The “Reason/Visit Note” will be included in the Clinical Summary as part of the “Reason For Visit”. This was an EHR requirement. This will not be part of the SOAP note, however.

A screenshot of a 'Reschedule Appointment' form. The form is divided into several sections. On the left, there is a 'Recent Patients' list with columns for patient name, ID, and DOB. Below this is an 'Add New Patient' button. The 'Reason/Visit Notes' section is highlighted with a red arrow and contains the text 'Want's Massage Every Visit'. On the right side, there are several dropdown menus and input fields for 'Facility Location', 'Patient Name', 'Is New Patient Visit', 'Scheduled To', 'Preferred Provider', 'Appointment Time', 'Appointment Length', and four 'Visit Type' categories (Primary, Secondary, Tertiary, Quaternary). The 'Appointment Time' section shows a date of 04-29-2017 and a time of 10:20 AM. The 'Appointment Length' is set to 15 minutes. The 'Visit Type (Primary)' is set to 'Adjustment'. There are red 'X' marks in the 'Column Start' and 'Occupy Columns' fields in the 'Appointment Time' section.

Calendar – Reason/Visit Note



Pictured below is the Default Reason/Visit box found in the Patient Profile. Again, anything typed in here will **copy over to the Reason/Visit Notes field when scheduling an appointment.**

Examples of default appointment notes could be:

- Patient wants traction every appointment
- Patient requests TEXT Message Reminders
- Patient wants muscle stimulation every appointment
- Patient will NOT see Dr. Blank for any reason



Profile

Default Reason/Visit Note (Copies into Reason/Visit Note when scheduling new appointment) ?

Wants massage every visit

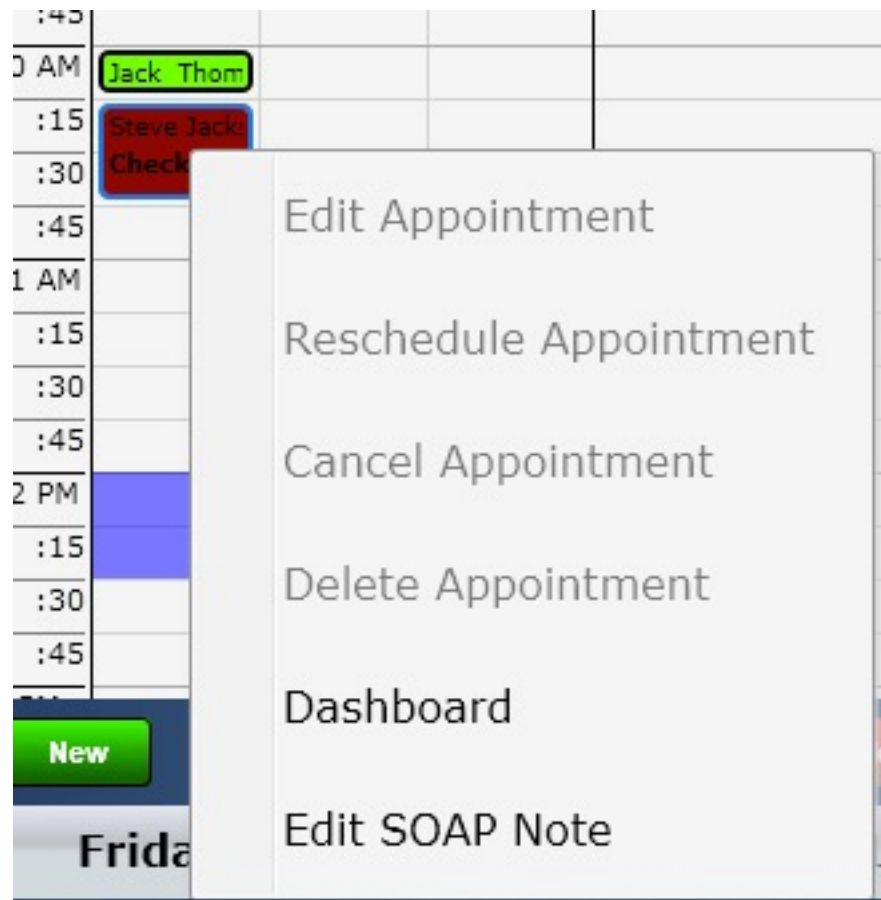
NOTE: The Reason/Visit Note is NOT part of the SOAP Note. As previously mentioned, it IS part of the Clinical Summary “Reason for Visit” section as required by EHR Certification.

Calendar – Schedule an Appointment in the Past



ChiroSpring allows you to schedule an appointment in the past. This is convenient if you saw a patient on a day when you were not in the office. For example. Let's say you saw a patient on a Sunday for a home visit. You do not want to put them on your Monday calendar. You can still schedule them on the calendar for Sunday. Then right click on their appointment and click Edit SOAP Note!

If you wish to take payment for this visit you will have to go to the patient ledger, payments tab and "add payment". Because it is a visit for a past day the patient will not appear on the Front Desk.





Calendar – Appointments in View

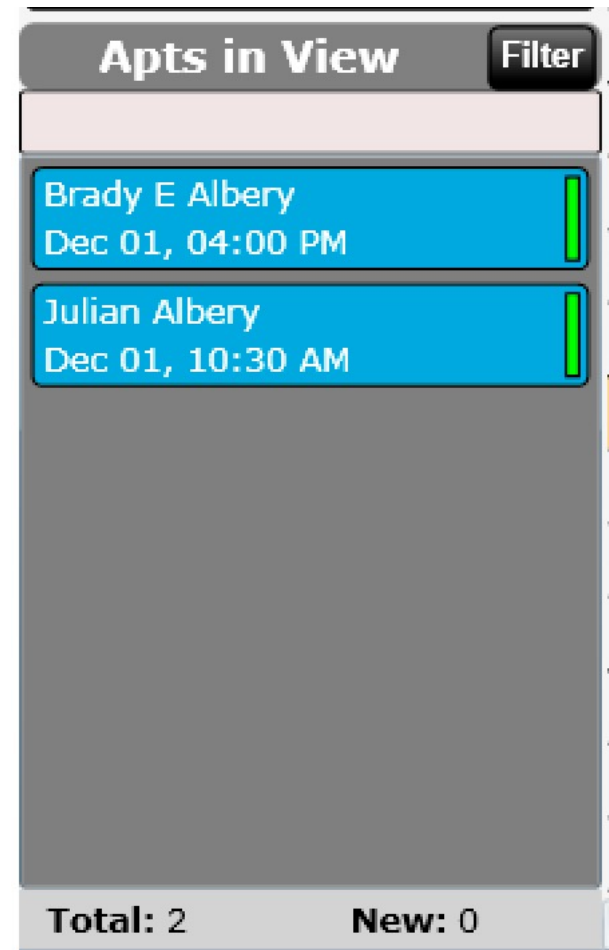
On the lower left side of the calendar is a list box called “Appointments in View.” This can be a very valuable tool for the provider. Here is how it works.

As discussed, there are three calendar views

- **Home View** – Shows all of the providers where a patient can be scheduled.
- **Day View** – Shows the daily schedule of a single provider.
- **Week View** – Shows the week schedule of a single provider.

Depending on the selected view the patients in that view will be displayed in this “Patients in View” list box. If you are on the Home View, for example, you will be able to see the total number of appointments for all providers for the day selected as well as the number of appointments that are new. Selecting the day view will show you both the total and number of new appointments for a single provider.

This allows the provider to get a quick snapshot of their day or week without having to scroll through the entire calendar.





Calendar – Appointments in View

Another benefit of the “Appointments in View” list is to help you quickly determine if a patient is scheduled. For example, let’s say a patient calls and wants to re-schedule their appointment. They do not remember what day it is on but know it’s during the next two weeks sometime. Simply click through the days on the calendar until you see the patient’s name appear in the “Patient’s in View” list. When you see their name, you will know they are scheduled on that day. This can be a huge time saver!

We recommend switching to WEEK view and then using the arrows at the top of the calendar to quickly toggle between weeks. If you typed in a portion of the patient’s name, they will show up in the appointments in View if they do in fact have an appointment.

Also, you can right click on patients in this view to perform necessary actions.

The screenshot shows the 'Appointments in View' interface. On the left, a list of patients is displayed with their names and IDs. Below this list are buttons for 'Add New Patient' and 'Apts in View'. On the right, a context menu is open, listing various actions that can be performed on a selected patient.

Patient Name	ID	DOB
Shiny Abraham	ABRSH000	01/08/1990
Ms Braxton Adams	ADABA000	04/15/1979
Brady E Albery	ALBBR000	12/16/1979
Brian Albery	ALBBR001	12/16/1972
Julian Albery	ALBJU000	12/16/1979

Buttons: Add New Patient, Apts in View

Context Menu Actions:

- Edit Appointment
- Reschedule Appointment
- Cancel Appointment
- Delete Appointment
- Dashboard
- Quick Info
- Edit SOAP Note
- Email Kiosk Web Link

Appointment List:

Patient Name	Time
Brady E Albery	Dec 01, 04:00 PM
Julian Albery	Dec 01, 10:30 AM



Calendar – Appointments in View - Filter

There is also an option to filter your appointments in view. For example, perhaps you want to see only appointments with non-completed SOAP notes. You can do this. Click Filter and chose the filter option(s) you want. To clear the filter simply select “Clear All”.

The screenshot shows a medical calendar interface for Dr. Brian Albery on Tuesday, December 1, 2020. The interface includes a 'Recent Patients' list on the left, a 'Calendar' view in the center, and a 'Select a filter' dialog box overlaid on top. The dialog box contains four filter options: 'Scheduled', 'Missed', 'Completed', and 'Signed SOAP'. At the bottom of the dialog, there are four buttons: 'Select All', 'Clear All', 'OK', and 'Cancel'. A red arrow points to the 'Filter' button in the 'Apts in View' section, and another red arrow points to the 'Clear All' button in the dialog box. The calendar view shows appointments for Brady E Albery and Julian Albery. The status bar at the bottom indicates 'Tuesday, Dec 1, 2020 10:04 PM' and 'Dr. Brian Albery'.



Calendar – Appointments in View

As you can see below Chad does in fact have an appointment in view. I started typing his name and his name was displayed in the box below.

Tony does not have an appointment in view. I started typing his name and the box became empty.

The image displays two side-by-side screenshots of a mobile application interface. Both screens have a title bar with the text "Apts in View" and a "Filter" button. The left screen shows a search input field with the text "brady|". Below the input field, a blue list item is displayed with the text "Brady E Albery" and "Dec 01, 04:00 PM". The right screen shows a search input field with the text "tony". Below the input field, the list is empty. At the bottom of each screen, there is a status bar with the text "Total: 2" and "New: 0".

Search Term	Appointment Name	Appointment Date/Time
brady|	Brady E Albery	Dec 01, 04:00 PM
tony		



Calendar – Recent Patients

In the upper left portion of the calendar is a text box, the same one you will find on the front desk in fact, called “Recent Patients.” You may be wondering why it is on the calendar. It can be used in a variety of ways.

Its main function is for assisting in scheduling a patient. For example, if you are on the calendar and a patient calls in for an appointment you can quickly type their name here to see if they are already in the system. If they are not in the system click the “Add New Patient” button. This is extremely useful as you do not have to go back to the front desk to complete this function.

Calendar

Recent Patients

Shiny Abraham	ABRSH000	01/08/1990
Ms Braxton Adams	ADABA000	04/15/1979
Brady E Albery	ALBBER000	12/16/1979
Brian Albery	ALBBER001	12/16/1972
Julian Albery	ALBJU000	12/16/1979

Dashboard
New Appointment
Check In

Add New Patient

You can also quickly navigate to the patient’s dashboard from here by right clicking their name.

Calendar

Recent Patients

Shiny Abraham	ABRSH000	01/08/1990
Ms Braxton Adams	ADABA000	04/15/1979
Brady E Albery	ALBBER000	12/16/1979
Brian Albery	ALBBER001	12/16/1972
Julian Albery	ALBJU000	12/16/1979

Add New Patient



Calendar – Add New Patient

Another great feature of the calendar is the ability to add a new patient. This can be done by clicking on the “Add New Patient” button. This button is found in the left “Recent Patient’s” list box as well as the “New appointment” dialog. This can be a handy feature and time saver preventing you from having to navigate back to the front desk to add a new patient.

Calendar

Recent Patients

Shiny Abraham	ABRSH000	01/08/1990
Ms Braxton Adams	ADABA000	04/15/1979
Brady E Albery	ALBBER000	12/16/1979
Brian Albery	ALBBER001	12/16/1972
Julian Albery	ALBJU000	12/16/1979

Add New Patient

New Appointment

Recent Patients

Shiny Abraham	ABRSH000	01/08/1990
Ms Braxton Adams	ADABA000	04/15/1979
Brady E Albery	ALBBER000	12/16/1979
Brian Albery	ALBBER001	12/16/1972
Julian Albery	ALBJU000	12/16/1979
Bob Anderson	ANDBO000	12/16/1979
Jerry Anderson	ANDJE000	06/11/2002
Mickey Anderson	ANDMI000	03/05/2004
Rucus Anderson		

Add New Patient

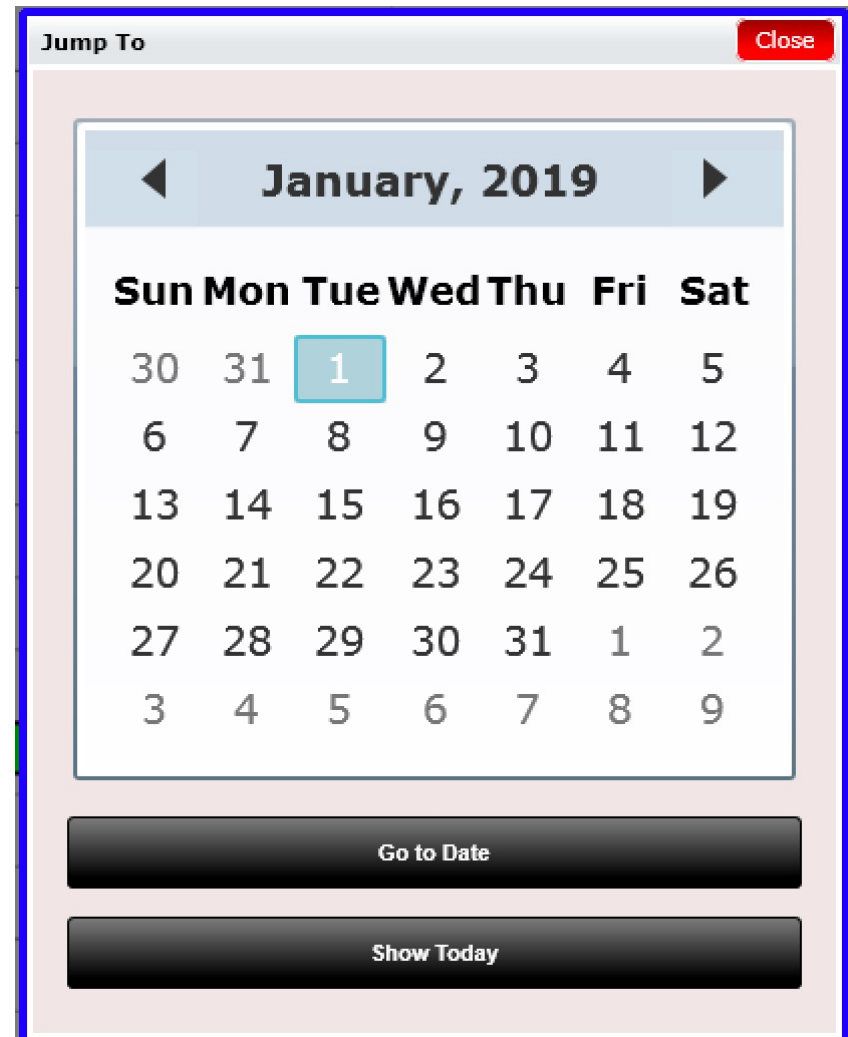


Calendar – Jump to Date

Navigating the calendar is easy. Using the arrows at the top of the calendar you can flip between days. Or, if you'd rather jump to a specified date simply click on the "Jump To" button at the bottom of the calendar. A dialog will open allowing you to quickly select any date.

To get back to today's date click on the "Today" button located at the bottom of the calendar.

Clicking the "Show Today" button as shown to the right will not take you to today but will highlight today's date on the calendar.





Calendar – Patient Flow

Some practices enjoy the ability to check in their patient directly from the calendar. This feature must be enabled if you want to use it. To enable go to Settings/Practice Info.

Change the box shown below to “Yes”. Save changes, completely exit ChiroSpring and re-open to refresh changes.

Allow Patient Flow on Calendar (when yes you will have the same Front Desk patient flow options on the calendar)

Yes



Settings



Practice Info

Calendar – Patient Flow



Once enabled you will be able to “Check In” your patient from the calendar as shown here.

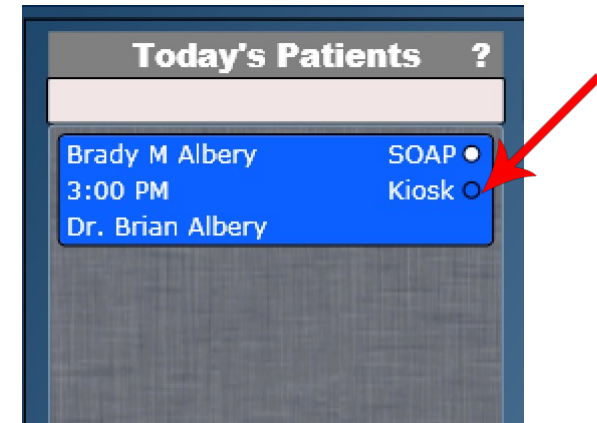
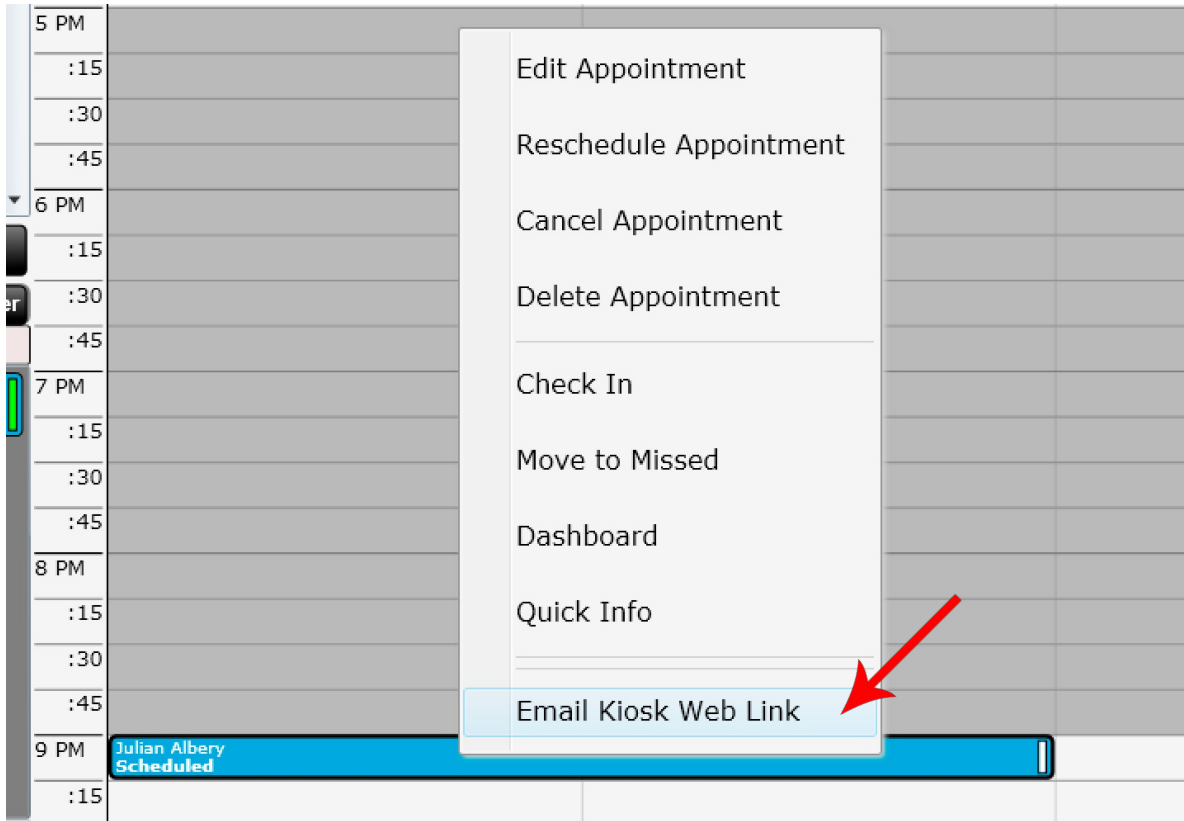
The screenshot displays a medical software interface for a calendar. At the top, it shows navigation controls for Day, Week, and Month, with the current date being Tuesday, December 1, 2020. The location is identified as Spinal Care Chiropractic. The main area is a calendar grid for Dr. Brian Albery, showing a patient flow for Tuesday, Dec 1. A patient, Brady E Albery, is shown as 'Checked In' at 4:00 PM. A context menu is open over the 4:00 PM slot, listing actions: Edit Appointment, Reschedule Appointment, Cancel Appointment, Delete Appointment, Check In (highlighted with a red arrow), Move to Missed, Dashboard, Quick Info, and Email Kiosk Web Link. On the left, there is a 'Recent Patients' list including Shiny Abraham, Ms Braxton Adams, Brady E Albery, Brian Albery, and Julian Albery. Below this is an 'Add New Patient' button and an 'Apts in View' filter set to 'brady'. The bottom of the interface features a toolbar with buttons for Close, Dock, New, Edit, Reschedule, Cancel, Delete, Refresh, Today, and Jump To. The status bar at the very bottom shows 'Front Desk', 'Provider View', 'Patient Flow', the date and time 'Tuesday, Dec 1, 2020 10:11 PM', and the user 'Dr. Brian Albery' with Log Out and KB buttons.



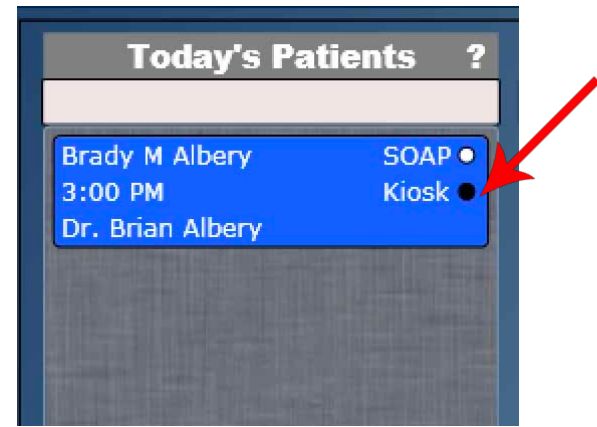
Calendar – Email Kiosk Web Link

If you have an active account with www.remindercall.com and the patient kiosk feature you can email the kiosk web link to your patient. This allows them the opportunity to complete prior to their visit saving you time.

You will know when your patient has completed the kiosk when the dot below turns solid black.



Here the kiosk is complete as the dot is solid black (see below).



#Cash Register





Cash Register

The cash register can be accessed in several ways.

- From the front desk click the “Cash Register” app
- Check out a patient by right clicking on the patient and selecting “Check Out”
- Check out multiple patients by clicking on the patient and selecting “Check Out Multiple”

Access to the cash register by these methods is very useful. Use the “check out” feature to complete the checkout process for a patient that had a visit in your practice. Here you will see all of the charges added by the provider and have an option for adding additional products during checkout.

Launching the cash register via the “Cash Register” app should be used when you are adding charges for a patient that did not have a visit. Once the cash register opens via this method you can select a patient using the “Select Patient” button to tie any charges to that patient. Or, if it’s a walk-in and you do not know their name you can skip this step. Charges will then be kept on record under a generic “Cash Register” patient account.

The screenshot shows the 'Cash Register' interface. At the top, it displays 'Chad Thompson' and 'Jun 30, 4:10 AM'. A blue button labeled 'Totals & Payments' is visible. Below this, there are three main selection areas: 'Select Patient' with 'Chad Thompson' selected, 'Select Provider' with 'None Selected', and 'Select Insurance' with 'Cash' selected.

Power Tip: We recommend always selecting a patient when you open the Cash Register app directly from the front desk. If the patient is not in your system, you can add them here. This way you have record of what product you sold the patient. If you do not do this products will be tied to a generic “Cash Register” record.



Cash Register

You can also select a provider from the Cash Register app. This is useful if the charges belong to a particular provider. For example, perhaps a provider in your practice is selling supplements. By selecting a provider, you will now know which provider gets credit for the sale of those supplements.

The Reports app has a very nice report called the “User Earnings Detail Report” which would reflect the selected provider in the example mentioned above.

NOTE: It is not mandatory to select a patient or a provider when using the Cash Register app. However, it is beneficial to at a minimum select a patient. This way you have a history on what your patient’s purchased. If no patient is selected a generic patient called “Cash Register” will be used. You can find a ledger for these “Generic” cash register transactions in Launcher/Cash Register Ledger.

Cash Register

Chad Thompson
Jun 30, 4:10 AM

Totals & Payments

Select Patient Chad Thompson Select Provider None Selected

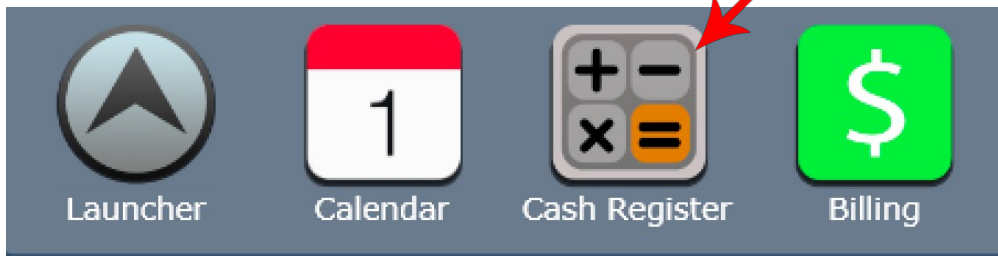
Select Insurance Cash



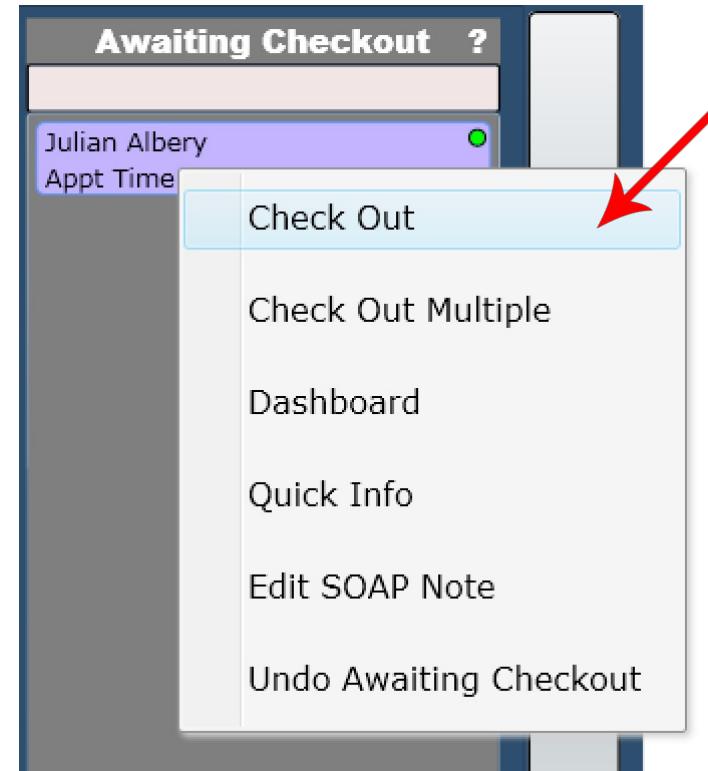
Cash Register

The cash register can be accessed in two ways

- Click the Cash Register app on the front desk. This is most useful when a patient does not have a visit and wants to purchase a product.



- Right Click on a patient name and select “Check Out”. Note you can also check out multiple patients (more on this later).





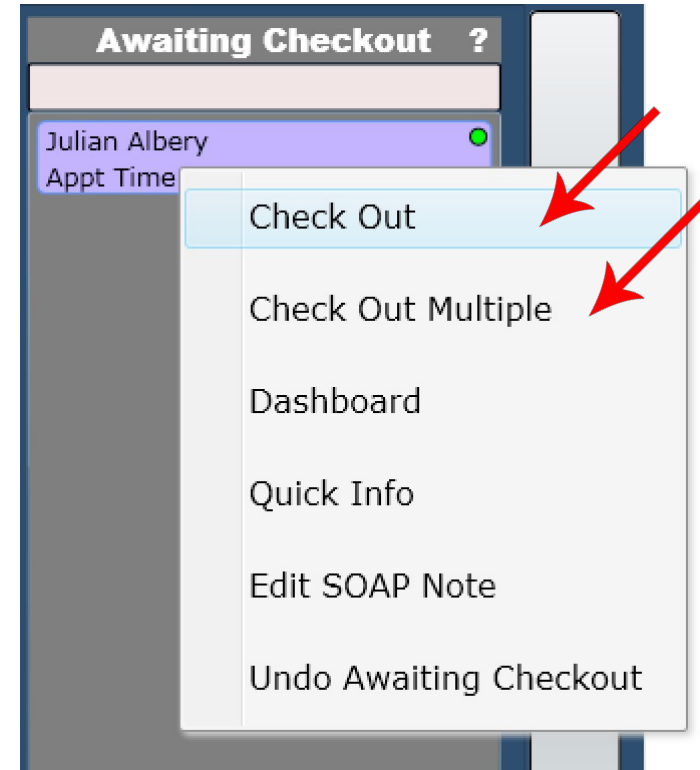
Cash Register

Check Out

To check out a patient at the cash register you can do so in two ways.

- The provider can check out a patient when they are in the “Checked In” list box by right clicking on the patient and selecting “Check Out.”
- Or, once a patient has been moved to the “Awaiting Checkout” list box, the provider or front desk employee can right click on the patient and select “Check Out.” To check out multiple patients select “Check Out Multiple”.

This will open up the cash register with the patient selected and any charges the provider has already added.



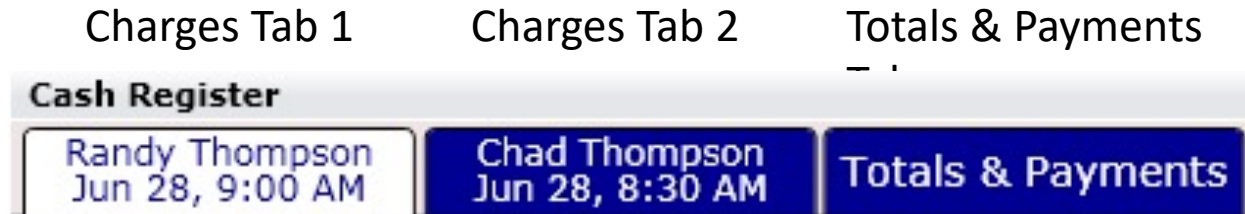


Cash Register - Tabs

Tabs

The Cash Register is composed of a Tab system at the top.

- The first tab or set of tabs are the charges tabs. There can be one charge tab or multiple charge tabs depending on if you check out one or multiple patients.
- The second tab is the Totals & Payments tab. This tab is used to display totals, collect payment, and assign payment to specific charges if you wish to do so.



Note: Each charge tab is specific to a single patient. This freely allows you to see each patient's specific charges as well as add, remove or edit their specific charges.



Cash Register – Charges Tab

This is the “Charges Tab” portion of the cash register.

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Julian Albery
Nov 30, 5:00 PM **Totals & Payments**

Select Patient Julian Albery Select Provider Dr. Brian Albery Scan Product

Select Insurance BCBS

Charges

Manipulation 3-4 Regions Code: 98941 Price: \$40.00 (Ins)	\$20.00 Tax: 0.00% Dis: \$0.00 Qty: 1	↑ 1 Units ↓
Therapy-Ultrasound Code: 97035 Price: \$25.00 (Ins)	\$0.00 Tax: 0.00% Dis: \$0.00 Qty: 1	↑ 1 Units ↓

Analgesics

Electrotherapy

Exercise/Rehab

Heat/Cold Therapy

Supplements

Orthopedics

Pillows

1000 Biofreeze Cryospray -8 Oz 18.00	1001 Sombra Pain Relieving Warming Gel - 4 Oz Jar 15.00	1002 Sombra Pain Relieving Warming Gel - 3 Oz Roll-On 14.00	1003 Sombra Pain Relieving Warming Gel - 8 Oz Jar 24.00
1004 Sombra Pain Relieving Warming Gel - 4 Oz Tube 16.00	1005 Biofreeze Gel Tube with Touch Free Applicator - 4 Oz 18.00	1006 Biofreeze Tube - 4 Oz 16.00	1007 Biofreeze Roll-On - 3 Oz 15.00
1008 Cryoderm Roll-On - 3 Oz 17.00	1009 Cryoderm Spray - 4 Oz 19.00	1010 Cryoderm Gel - 4 Oz 17.00	1011 Sombra Cool Therapy Gel - 2 Oz Jar 8.00
1012 Sombra Cool Therapy Gel - 8 Oz Jar 24.00	1013 Sombra Cool Therapy Roll-On - 3 Oz 16.00	1014 Sombra Cool Therapy - 4 Oz Jar 14.00	1015 Sombra Cool Therapy - 4 Oz Tube 15.00

Remove Charge

Change Price

Discount Amount

Add Refund

Discount Percent

Tax Charge

Note to Front Desk

Discount	Tax	Copay	Co-ins.	Deductible	Care Plan Total	Non Care Plan Total
\$0.00	\$0.00	\$20.00	\$0.00	\$0.00	\$0.00	\$20.00

Edit Service Charges

Cancel Clinical Summary Didn't ask

New Appointment Calendar

Next Appointment Tuesday, Dec 1, 2020 9:00 PM

No Receipt Receipt Receipt + Clinical Summary

Front Desk Provider View Patient Flow

Tuesday, Dec 1, 2020 10:17 PM Dr. Brian Albery Log Out KB



Cash Register – Payments Tab

This is the “Payments Tab” portion of the cash register.

Power Tip: Click the Ledger icon to access the patient’s ledger (readable format only).

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Julian Albery
Nov 30, 5:00 PM Totals & Payments

Amount Owed

Patient	Note to Front Desk	Previously Owed	Charge Total	Total Owed	Payment	Amount Remaining
Julian Albery		-244.50	20.00	-224.50	0.00	-224.50

Payments

Payer	Method	Card or Check No.	Amount	Patient	Amount	Unapplied
-------	--------	-------------------	--------	---------	--------	-----------

Remove PaymentEdit PaymentAdd Cash PaymentAdd CC PaymentAdd Check PaymentAdd Return PaymentAdd CC Payment (OpenEdge)Add ACH Payment (OpenEdge)Apply Payment

Discount	Tax	Copy	Co-ins.	Deductible
\$0.00	\$0.00	\$20.00	\$0.00	\$0.00

Care Plan Details

New Charges	Total Owed	Payment	Amount Remaining
\$0.00	\$-244.50	\$0.00	\$-244.50

Non-Care Plan Details

New Charges	Total Owed	Payment	Amount Remaining
\$20.00	\$20.00	\$0.00	\$20.00

CancelCalendarNext Appointment
Tuesday, Dec 1, 2020 9:00 PMNo ReceiptReceiptReceipt + Clinical Summary

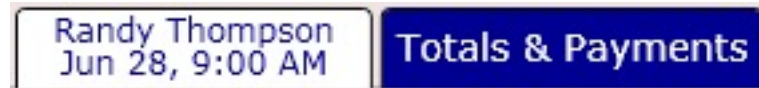
Front DeskProvider ViewPatient FlowTuesday, Dec 1, 2020 10:29 PMDr. Brian AlberyLog OutKB



Charges Tab Components

The cash register is made up of several components...

- Tabs – As previously mentioned there are tabs along the top. The first tab is your patient's Charges. The last tab is the Payments section of the cash register.



- There is a button to change the patient's Insurance Case directly at the cash register. Just click "Select Insurance".



- Charges – All of the patient's charges are in this column. Use the Charges Grid (to the right of 'Charges') to add new charges.

Charges	
X-ray Thocacolumbar Spine-AP/Lat	\$65.00
Code: 72080	Tax: 0.00%
Price: \$65.00 (Ins)	Dis: \$0.00
	Qty: 1
Manipulation 3-4 Regions	\$15.00
Code: 98941	Tax: 0.00%
Price: \$40.00 (Ins)	Dis: \$0.00
	Qty: 1
Therapy-Electrical Stimulation	\$0.00
Code: 97032	Tax: 0.00%
Price: \$20.00 (Ins)	Dis: \$0.00
	Qty: 1





Charges Tab Components

Power Tip: You can edit Service Charges by clicking the “Edit Service Charges” button below the Charges column.

Charges ?

Manipulation 3-4 Regions	\$20.00	↑
Code: 98941	Tax: 0.00%	1 Units
Price: \$40.00 (Ins)	Dis: \$0.00	↓
Qty: 1		
Therapy-Ultrasound	\$0.00	↑
Code: 97035	Tax: 0.00%	1 Units
Price: \$25.00 (Ins)	Dis: \$0.00	↓
Qty: 1		

Edit Service Charges

Cash Register

Julian Albery

Post Visit Charges and Diagnosis

Charges | Diagnosis | Condition

Charges ?

98941	Manipulation 3-4 Regions	↑
PRC: \$40.00	DISC: \$0.00	↓
97035	Therapy-Ultrasound	↑
PRC: \$25.00	DISC: \$0.00	↓

Care Plan Charges

500 New Patient Cash Visit	0000 Records Fee	99201-25 New Patient Problem Focused Examination	99202-25 New Patient Expanded Problem Focused Examination
99203-25 New Patient Detailed Examination	99204-25 New Patient Comprehensive Examination	99206-25 New Patient Comprehensive (High Complexity) Exam	99211-25 Established Patient Minimal Examination
99212-25 Established Patient Problem Focused Exam	99213-25 Established Patient Expanded Exam	99214-25 Established Patient Detailed Exam	99374 Phone Call-Brief
99372 Phone Call-Intermediate	99373 Phone Call-Lengthy	97750 Physical Performance test with Report	00001 No Charge Office Visit

Legend: Cash Charge (green), Claimable Charge (red), Care Plan (orange)

Buttons: Add From Charge Groups, Exam/Consult, Adjustment, Therapy, Radiography, Analgesics, Electrotherapy, Exercise/Rehab, Heat/Cold Therapy, Supplements, Orthopedics, Pillows, Diagnosis Pointers, Toggle Care Plan, Toggle Insurance Claimable, Change Price, Discount by Amount, Discount by Percent, Taxed, Save, Cancel

Tuesday, Dec 1, 2020 10:30 PM Dr. Brian Albery



Charges Tab Components

Power Tip: Double click on a charge to allow you to edit Charge Details. This can be done at the Cash Register and also in Edit SOAP on the Charges Grid.

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Julian Albery
Nov Post Visit Char

Edit Charge - Julian Albery ALBJU000

General

Date of Service	Code			
11/30/20	98941 - Manipulation 3-4 Regions			
Price	Units	Discount Amt	Is Taxed?	Tax Rate (%)
40.00	1	0.00	No	8.00
Is Claimable to Insurance?		Is Care Plan?		
BCBS <input type="button" value="Yes"/> <input checked="" type="button" value="No"/>		No		
Note				

Insurance Related

Amount Allowed* ?	Insurance Writeoff	Amount Forwarded	Amount Disputed
27.00	0.00	0.00	0.00
Estimate PMR?	Copay* ?	Co-insurance* ?	Deductible* ?
Yes <input checked="" type="button" value="Toggle Yes/No"/>	20.00	0.00	0.00
Place Of Service	Emergency (EMG)	EPSDT	

(*) Amount allowed, copay, co-insurance, and deductible cannot be edited when Estimate PMR? is Yes (enabled); this is because these amounts are calculated/estimated by ChiroSpring.

98941 Manipulation PRC: \$40.00
97035 Therapy-Ult PRC: \$25.00

Cash Charge

Taxed Total 0.00

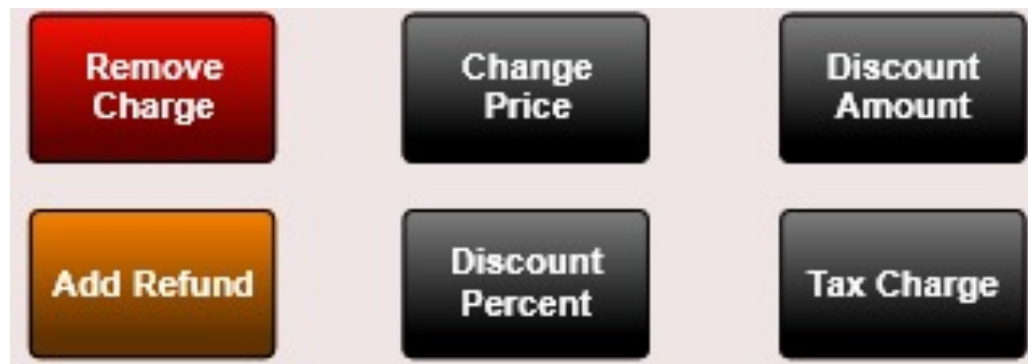
Front Desk Provider Tuesday, Dec 1, 2020 10:51 PM Dr. Brian Albery Log Out KB



Charges Tab Components

The cash register has several buttons as shown below. These buttons are used to do the following:

- **Remove Charge** – allows you to remove any non-service charge
- **Change Price** – allows you to change the price on any charge (both product and service)
- **Discount Amount** – allows you to discount any charge (both product and service)
- **Add Refund** – allows you to refund an amount back to the patient
- **Discount Percent** – allows you to discount any charge by a specific percent (both product and service)
- **Tax Charge** – allows you to tax or un-tax a charge (note you can specify if a charge has tax by default in Settings/Products or Settings/Services)



Power Tip: There is a setting option to allow price adjustments to copy over visit-to-visit. To enable go to Settings/Practice Info/General 2 and use the 'Copy Price Adjustments from previous visit' drop down.



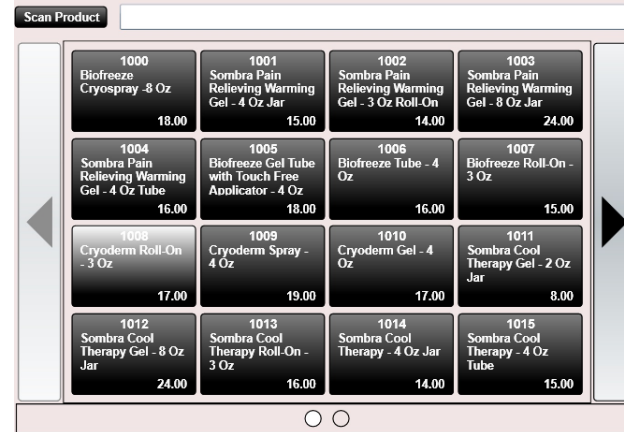
Charges Tab Components

Note to Front Desk – This note is populated inside the “Edit SOAP” in the Wrap Up Tab. This note is meant to be used by the provider to inform the front desk of things such as (but not limited to):

- Schedule Next appointment
- Get Patient’s Benefits information
- Tell Patient about our Orthotics



Charges Grid – All of your favorite charges can be found here. This grid is customizable in Settings/Pin Charges



Charges Search Bar – If you cannot find a charge on your grid simply search for it here by name or code.





Charges Tab Components

Charge information for the patient can be found at the bottom

- Discount
- Tax
- Copay
- Co-ins
- Deductible
- Care Plan Total
- Charge Total

Discount	Tax	Copay	Co-ins.	Deductible	Care Plan Total	Non Care Plan Total
\$0.00	\$0.00	\$20.00	\$0.00	\$0.00	\$0.00	\$20.00

NOTE: This information only applies to a single patient. If you are checking out multiple patients each patient will have their own charge information showing the information shown above.



Payments Tab Components

The cash register has several buttons as shown below. These are found in the “Payments” tab portion of the cash register. These buttons are used to do the following:

- **Remove Payment** – allows you to remove a payment (first select the payment then click “Remove Payment”)
- **Edit Payment** – allows you to edit the payment (first select the payment then click “Edit Payment”)
- **Add Cash Payment** – allows you to add a cash payment
- **Add CC Payment** - allows you to add a credit/debit payment WITHOUT our Integrated Payments option
- **Add Check Payment** – allows you to add a check
- **Add Return Payment** - allows you to return a payment (more on this later)
- **ChiroSpring Pay** – Allows you to swipe a card with the ChiroSpring Pay terminal or manually enter the CC. The payment post directly into the Patient Ledger.
- **ChiroSpring Pay - ACH** – allows you to enter a bank e-check (ACH) payment. You must be enrolled in ChiroSpring Pay for this option.
- **Apply Payment** - If auto apply is “On” in Settings you should not have to worry about this. However, this button allows you to specify EXACTLY what charge or charges the payment goes to. This can be EXTREMELY USEFUL in the event where a patient only pays part of their total and they have a product and a service. You would most likely WANT TO APPLY THE PAYMENT TO THE PRODUCT and this button allows you to do this.

Remove
Payment

Edit
Payment

Add Cash
Payment

Add CC
Payment

Add Check
Payment

Add Return
Payment

ChiroSpring
Pay

ChiroSpring
Pay - ACH

Apply
Payment



Payments Tab Components

Amount Owed – shows you details of what each patient being checked out owes you as well as their individual “Note to Front Desk”.

Amount Owed

Patient	Note to Front Desk	Previously Owed	Charge Total	Total Owed	Payment	Amount Remaining
Randy Thompson	X-Rays next visit	94.00	42.12	136.12	0.00	136.12
Jack Thompson		0.00	20.00	20.00	0.00	20.00

Payments – shows you details of each payment

Payments

Payor	Method	Card or Check No.	Amount	Patient	Amount	Unapplied
Randy Thompson	Cash		156.12	Randy Thompson	136.12	136.12
Randy Thompson	Cash		156.12	Jack Thompson	20.00	20.00

NOTE: If “Auto apply” is turned on in Settings ChiroSpring will auto apply the payment for you. However, if you have multiple patients, you will still need to manually ASSIGN the payment (see previous pages) to the patient(s) you want the payment to belong to.



Cash Register – Customize Grid

The charges and their respective folders (e.g. Analgesics, Electrotherapy) can be customized. You can create new folders and pin or un-pin charges to those folders. For example, I have Biofreeze Cryospray pinned to my Analgesic folder's grid.

You can customize your charges grid in Settings/Pin Charge Codes.

There is more information about this in this manual.



Settings



Pin Charge Codes

Dr. Brian Albery

Scan Product

Analgesics	1000 Biofreeze Cryospray - 8 Oz 18.00	1001 Sombra Pain Relieving Warming Gel - 4 Oz Jar 15.00	1002 Sombra Pain Relieving Warming Gel - 3 Oz Roll-On 14.00	1003 Sombra Pain Relieving Warming Gel - 8 Oz Jar 24.00
Electrotherapy	1004 Sombra Pain Relieving Warming Gel - 4 Oz Tube 16.00	1005 Biofreeze Gel Tube with Touch Free Applicator - 4 Oz 18.00	1006 Biofreeze Tube - 4 Oz 16.00	1007 Biofreeze Roll-On - 3 Oz 15.00
Exercise/Rehab	1008 Cryoderm Roll-On - 3 Oz 17.00	1009 Cryoderm Spray - 4 Oz 19.00	1010 Cryoderm Gel - 4 Oz 17.00	1011 Sombra Cool Therapy Gel - 2 Oz Jar 8.00
Heat/Cold Therapy	1012 Sombra Cool Therapy Gel - 8 Oz Jar 24.00	1013 Sombra Cool Therapy Roll-On - 3 Oz 16.00	1014 Sombra Cool Therapy - 4 Oz Jar 14.00	1015 Sombra Cool Therapy - 4 Oz Tube 15.00
Supplements				
Orthopedics				
Pillows				



Cash Register – Payments Tab

Clicking any of the Add Payment buttons will open the “Enter Payment” dialog (shown to the right).

There are TWO TABS in the Enter Payment process

1. Payment Info
2. Assign Payment

Payment Info - Here you can enter the payment date (defaults to today), select the Facility (defaults to your default location), select the Payer (defaults to your patient), enter the payment amount and any payment comments.

Assign Payment – This option is only necessary if you want a payment to go **TO MULTIPLE PATIENTS**. For example, perhaps Dad is making a payment and you want to assign some or all of that payment to other family members.

Enter Payment

Payment Info | **Assign Payment**

Cash
Credit Card
Check
Return
Writeoff
Transfer
Care Credit
Gift Card
Billing Dept.

Patient is paying by cash or debit card.
This date reflects payment date on reports

Payment Date
12-01-2020

Facility Location
Spinal Care Chiropractic

Payer
Julian Albery

Amount
20.00 Care Plan Payment

Comments

1 2 3
4 5 6
7 8 9
. 0 Cl

OK Cancel

Once a payment is entered it is strongly recommended that its payment amount be applied to charges it will pay for. This is for accurate book-keeping. If the Auto-Apply Payments setting is enabled in Practice Settings then ChiroSpring will do this for you when you save your changes. To manually apply a payment select the payment, then select "Apply Payment".

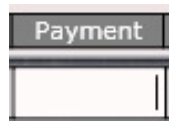


Cash Register – Assign Payments Tab

To assign a payment to an additional patient click the “Add Patient” button at the bottom (if they are not already populated in your list) and select another patient.



Once you have added a second (or even third, fourth, fifth, etc.) patient you will **NEED** to type the amount of the payment going to **THAT PATIENT** in the Payment box.



Enter Payment

Payment Info Assign Payment

Distribute payment to patient(s).

Remaining \$203.12

Patient	Owes	Payment	Applied
Randy Thompson	\$118.12	0.00	\$0.00
Jack Thompson	\$85.00	0.00	\$0.00

1 2 3
4 5 6
7 8 9
. 0 Cl

Once a payment is entered it is strongly recommended that its payment amount be applied to charges it will pay for. This is for accurate book-keeping. If the Auto-Apply Payments setting is enabled in Practice Settings then ChiroSpring will do this for you when you save your changes. To manually apply a payment select the payment, then select "Apply Payment".

Add Patient Remove Patient

OK Cancel



Cash Register – Assign Payments Tab

Here I have added two patients and entered a \$203.12 payment (the payment was entered on the Payment Info tab). The remaining amount to assign is still \$203.12.

Payment Info Assign Payment

Distribute payment to patient(s).

Remaining \$203.12

Patient	Owes	Payment	Applied
Randy Thompson	\$118.12	0.00	\$0.00
Jack Thompson	\$85.00	0.00	\$0.00

I have now entered two payments

- Randy Thompson - \$118.12
- Jack Thompson - \$85.00

The remaining amount is now \$0.00 so everything balances.

Payment Info Assign Payment

Distribute payment to patient(s).

Remaining \$0.00

Patient	Owes	Payment	Applied
Randy Thompson	\$118.12	118.12	\$0.00
Jack Thompson	\$85.00	85.00	\$0.00

Important Note: It is extremely important that you understand if you want a payment to GO TO MULTIPLE PATIENTS you MUST click the Assign Payment tab and follow the steps above. If you do not do this the payment will be assigned to the TOP patient who will ultimately end up with a large credit while the bottom patient(s) receive no payment.



Payments Tab – Apply Payment

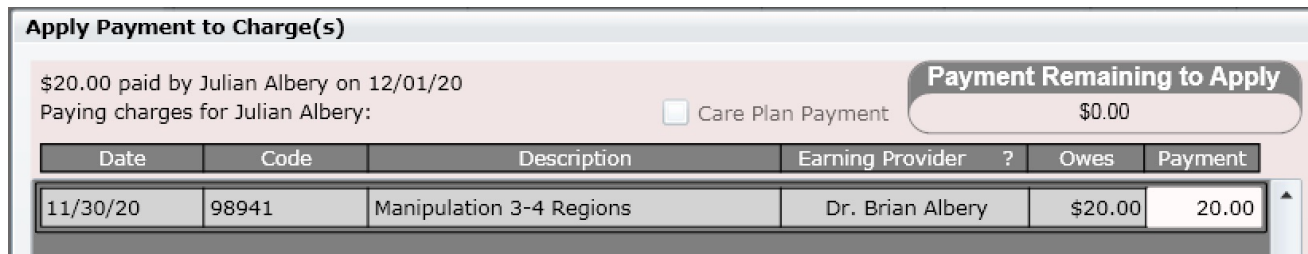
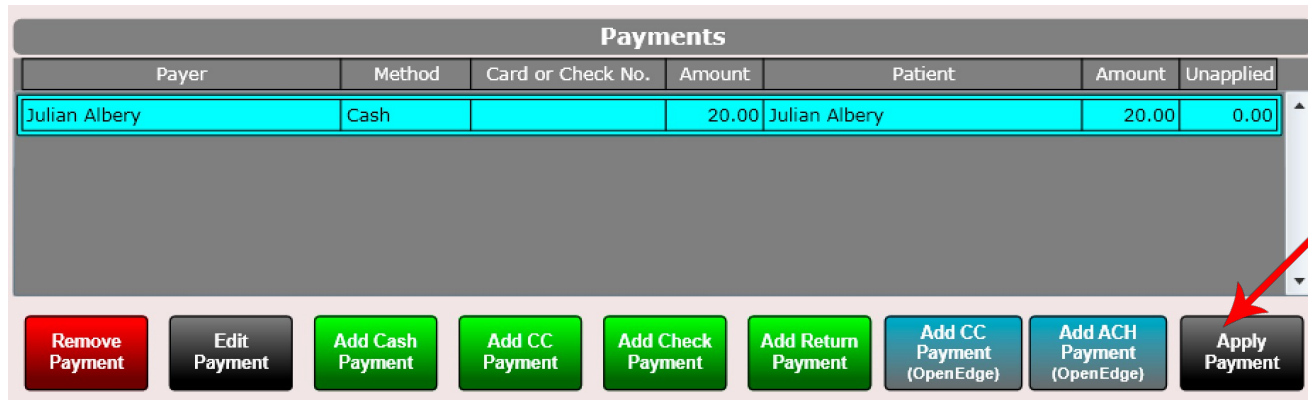
You will find an option in Settings/Practice Info/Charge Options to enable automatically applying payments.

- No
- Yes – Oldest Charges First
- Yes – Payment Date Only To Matching Visit Date, Remainder Unapplied



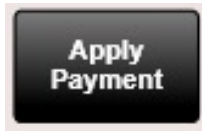
However, there may be instances where you would like to manually apply a payment, specifically if a patient doesn't pay the full amount. In this case it would be ideal to apply the payment to a product first and any remaining payment to a service.

To manually apply a payment, select the payment and click "Apply Payment". The dialog to the right will open.





Payments Tab – Apply Payment



In the example below I have entered a \$20 payment (you know this because “Payment Remaining to Apply” is \$20 in the top image).

\$20.00 paid by Randy Thompson on 05/07/14
Paying charges for Jack Thompson:

Payment Remaining to Apply
\$20.00

Date	Code	Description	Owes	Payment
05/07/14	98941-AT-M	3-4 Region Manipulation (Mcare)	\$20.00	0.00

Here you can see the \$20 has been fully applied to the 3-4 Region Manipulation (Mcare).

\$20.00 paid by Randy Thompson on 05/07/14
Paying charges for Jack Thompson:

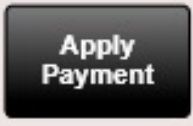
Payment Remaining to Apply
\$0.00

Date	Code	Description	Owes	Payment
05/07/14	98941-AT-M	3-4 Region Manipulation (Mcare)	\$20.00	20.00

Note: If “Auto apply” is turned on in Settings, you will not need to manually apply a payment. The only reason you might want to manually apply a payment if “Auto apply” is turned on is if the patient didn’t pay the full amount of the charge total and you wanted to specify where that payment went. For example, the patient may have a product and a service and is only making a partial payment. You would most likely want the payment to go toward the product.



Payments Tab – Apply Payment



Here is an example of applying \$118.12 to several charges the patient Randy Thompson still owes.

Apply Payment to Charge(s)

\$118.12 paid by Randy Thompson on 05/08/14
Paying charges for Randy Thompson:

Payment Remaining to Apply
\$118.12

Date	Code	Description	Owes	Payment
05/08/14	98941-AT-M	3-4 Region Manipulation (Mcare)	\$22.00	0.00
05/08/14	97010	Therapy-Hot/Cold Therapy	\$3.00	0.00
04/21/14	98941	Manipulation 3-4 Regions	\$21.12	0.00
04/21/14	97010	Therapy-Hot/Cold Therapy	\$3.00	0.00
05/07/14	98941	Manipulation 3-4 Regions	\$22.00	0.00
05/07/14	98941	Manipulation 3-4 Regions	\$22.00	0.00
05/08/14	98941-AT-M	3-4 Region Manipulation (Mcare)	\$22.00	0.00
05/08/14	97010	Therapy-Hot/Cold Therapy	\$3.00	0.00

OK Cancel

Apply Payment to Charge(s)

\$118.12 paid by Randy Thompson on 05/08/14
Paying charges for Randy Thompson:

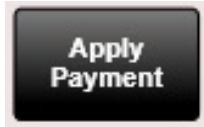
Payment Remaining to Apply
\$0.00

Date	Code	Description	Owes	Payment
05/08/14	98941-AT-M	3-4 Region Manipulation (Mcare)	\$22.00	22.00
05/08/14	97010	Therapy-Hot/Cold Therapy	\$3.00	3.00
04/21/14	98941	Manipulation 3-4 Regions	\$21.12	21.12
04/21/14	97010	Therapy-Hot/Cold Therapy	\$3.00	3.00
05/07/14	98941	Manipulation 3-4 Regions	\$22.00	22.00
05/07/14	98941	Manipulation 3-4 Regions	\$22.00	22.00
05/08/14	98941-AT-M	3-4 Region Manipulation (Mcare)	\$22.00	22.00
05/08/14	97010	Therapy-Hot/Cold Therapy	\$3.00	3.00

OK Cancel



Payments Tab – Apply Payment



If “Auto apply Payments” is turned on, then you can ignore the “Unapplied” portion (see below). This is because the software will automatically apply the payment AFTER you finish the check out process. Therefore, you will see a positive unapplied balance, but you can just ignore this.

Ledger - Randy Thompson THORA000 DOB: Age: INS: Cash CPT copyright 2013 American Medical Association. All rights reserved

Pt. Charges **Pt. Payments**

Date	Facility	Payer	Method	Card/Check Number	Paid	Note	Assigned	Unapplied
03/25/16	Main	Randy Thompson	Cash		203.12		118.12	118.12

Ledger - Jack Thompson THOJA000 DOB: Age: INS: Cash CPT copyright 2013 American Medical Association. All rights reserved

Pt. Charges **Pt. Payments**

Date	Facility	Payer	Method	Card/Check Number	Paid	Note	Assigned	Unapplied
03/25/16	Main	Randy Thompson	Cash		203.12		85.00	85.00

If “Auto apply Payments” is turned OFF then you must manually apply the payment. After manually applying the payment the “unapplied” amount will be \$0.00 assuming the payment has been fully applied correctly (see below).

Ledger - Randy Thompson THORA000 DOB: Age: INS: Cash CPT copyright 2013 American Medical Association. All rights reserved

Pt. Charges **Pt. Payments**

Date	Facility	Payer	Method	Card/Check Number	Paid	Note	Assigned	Unapplied
03/25/16	Main	Randy Thompson	Cash		203.12		118.12	0.00

Ledger - Jack Thompson THOJA000 DOB: Age: INS: Cash CPT copyright 2013 American Medical Association. All rights reserved

Pt. Charges **Pt. Payments**

Date	Facility	Payer	Method	Card/Check Number	Paid	Note	Assigned	Unapplied
03/25/16	Main	Randy Thompson	Cash		203.12		85.00	0.00



Cash Register – Cash Payment

Cash Payment

Enter Payment

Payment Info | **Assign Payment**

Cash | **Credit Card** | **Check** | **Return** | **Writeoff** | **Transfer** | **Care Credit** | **Gift Card** | **Billing Dept.**

Patient is paying by cash or debit card.
This date reflects payment date on reports

Payment Date
12-01-2020 15

Facility Location
Spinal Care Chiropractic

Payer
Julian Albery

Amount
20 | Care Plan Payment

Comments

1 2 3
4 5 6
7 8 9
. 0 CI

Once a payment is entered it is strongly recommended that its payment amount be applied to charges it will pay for. This is for accurate book-keeping. If the Auto-Apply Payments setting is enabled in Practice Settings then ChiroSpring will do this for you when you save your changes. To manually apply a payment select the payment, then select "Apply Payment".

OK Cancel

Cash Register – Credit Payment



Not Enrolled in Integrated Payments

Credit Payment – Here you can manually enter the credit card number. It is recommended you only enter the last 4 digits of the credit card (to save time) as ONLY the last 4 digits will be reported on the patient's receipt. Credit card payments must be run through a third-party application such as Square or a credit card reader. Here we are only recording in ChiroSpring that a credit payment was taken.

Enter Payment

Payment Info **Assign Payment**

Cash

Credit Card

Check

Return

Writeoff

Transfer

Care Credit

Gift Card

Billing Dept.

Patient is paying by credit card.
This date reflects payment date on reports

Payment Date
12-01-2020 15

Facility Location
Spinal Care Chiropractic

Payer
Julian Albery

Amount
20.00 Care Plan Payment

Card Number
7654

Comments

1 2 3

4 5 6

7 8 9

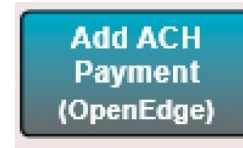
. 0 Cl

Once a payment is entered it is strongly recommended that its payment amount be applied to charges it will pay for. This is for accurate book-keeping. If the Auto-Apply Payments setting is enabled in Practice Settings then ChiroSpring will do this for you when you save your changes. To manually apply a payment select the payment, then select "Apply Payment".

OK Cancel

Cash Register – ACH Payment

(ChiroSpring Pay)



If enrolled in ChiroSpring Pay you can use the Add ACH Payment option.

An ACH payment is a bank transfer directly from the patient's account.

After clicking 'Ok' a window will open allowing you to enter the patient's routing number and checking account number.

Enter Payment

Payment Info

This date reflects payment date on reports:

Payment Date
12-15-2020

Facility Location ?
Spinal Care Chiropractic ▼

Amount
 Care Plan Payment

Select Card Type
 Credit Debit
 Keep this card on file

Comments

Use Stored Payment Method

1 **2** **3**
4 **5** **6**
7 **8** **9**
. **0** **Cl**

Pt. Visit Total Amount Due

Pt. Ledger Amount Due

Once a payment is entered it is strongly recommended that its payment amount be applied to charges it will pay for. This is for accurate book-keeping. If the Auto-Apply Payments setting is enabled in Practice Settings then ChiroSpring will do this for you when you save your changes. To manually apply a payment select the payment, then select "Apply Payment".

OK **Cancel**



Cash Register – Check Payment

Check Payment – Here you can enter a check payment and record the check number

Enter Payment

Payment Info | **Assign Payment**

Cash
Credit Card
Check
Return
Writeoff
Transfer
Care Credit
Gift Card
Billing Dept.

Patient is paying by check.
This date reflects payment date on reports

Payment Date
12-01-2020 15

Facility Location
Spinal Care Chiropractic

Payer
Julian Albery

Amount
20.00 Care Plan Payment

Check Number
301

Comments
|

1 2 3
4 5 6
7 8 9
. 0 Cl

OK Cancel

Once a payment is entered it is strongly recommended that its payment amount be applied to charges it will pay for. This is for accurate book-keeping. If the Auto-Apply Payments setting is enabled in Practice Settings then ChiroSpring will do this for you when you save your changes. To manually apply a payment select the payment, then select "Apply Payment".



Cash Register – Return Payment

Return Payment – Use this option if the patient is RETURNING a product (e.g. Biofreeze). To return a product, click the “Add Return Payment” button, type the amount of the product and enter the product name in “comments”. This will apply a credit on the patient’s account. If you wish to give this money back to the patient, you will then need to issue a “Refund” (shown on next page).



In this example I am returning a Biofreeze for \$14.00. The next step will be to issue the patient a refund (see next page).

Enter Payment

Payment Info | **Assign Payment**

Cash
Credit Card
Check
Return
Writeoff
Transfer
Care Credit
Gift Card
Billing Dept.

Patient is returning item(s). Enter value of item (s) in Amount box and item(s) description in Comments box. This will apply a credit to the patient's account of the specified amount. Create a Refund to issue the amount back to the patient, if desired (must be done at Cash Register).

This date reflects payment date on reports

Payment Date
12-01-2020 15

Facility Location
Spinal Care Chiropractic

Payer
Julian Albery

Amount
14.00 Care Plan Payment

Comments
Biofreeze|

1 2 3
4 5 6
7 8 9
. 0 Cl

Once a payment is entered it is strongly recommended that its payment amount be applied to charges it will pay for. This is for accurate book-keeping. If the Auto-Apply Payments setting is enabled in Practice Settings then ChiroSpring will do this for you when you save your changes. To manually apply a payment select the payment, then select "Apply Payment".

OK Cancel



Cash Register – Refund

1. Open the cash register
2. Select your patient

Select Patient Chad Thompson
Select Insurance Cash

1. Click the “Add Refund” button



2. Type a refund “note” and enter the amount of cash you are refunding the patient. In my example I am refunding \$14.00 for a returned Biofreeze.

3. Note the refund is now shown in the “Charges” column.

Charges ?		
Cash	\$20.00	1 Units
Price: \$20.00 (Cash)	Tax: 0.00%	
	Dis: \$0.00	
	Qty: 1	

4. Give the refund amount to your patient (hand them cash).

Edit Refund

Issues a refund to the patient. The specified amount will be debited from the patient's account. This amount should be handed to the patient.

Note
Patient returned Biofreeze

Amount
20.00

1 2 3
4 5 6
7 8 9
. 0 Cl

OK Cancel



Cash Register – Write Off

Write Off – Use this option if a patient has a balance they will not pay, and you wish to write off that balance or a portion of that balance. This is essentially providing the patient “fake money” to which you will use to write off one or multiple charges.

Enter Payment

Payment Info | **Assign Payment**

Cash

Credit Card

Check

Return

Writeoff

Transfer

Care Credit

Gift Card

Billing Dept.

Provider is writing off amount.
This date reflects payment date on reports

Payment Date
12-01-2020

Facility Location
Spinal Care Chiropractic

Payer
Julian Albery

Amount
20.00 Care Plan Payment

Comments

1 2 3

4 5 6

7 8 9

. 0 CI

Once a payment is entered it is strongly recommended that its payment amount be applied to charges it will pay for. This is for accurate book-keeping. If the Auto-Apply Payments setting is enabled in Practice Settings then ChiroSpring will do this for you when you save your changes. To manually apply a payment select the payment, then select "Apply Payment".

OK Cancel



Cash Register – Transfer

Transfer – Use this option to give a patient a credit. This is useful when transferring a patient credit (positive balance) from a previous software into ChiroSpring.

Enter Payment

Payment Info **Assign Payment**

Cash

Credit Card

Check

Return

Writeoff

Transfer

Care Credit

Gift Card

Billing Dept.

Provider is adding a credit to the patient's account. Useful for transferring a patient credit from an existing system into ChiroSpring.

This date reflects payment date on reports

Payment Date

12-01-2020

Facility Location

Spinal Care Chiropractic ▼

Payer

Julian Albery

Amount

10.00 Care Plan Payment

Comments

1 2 3

4 5 6

7 8 9

. 0 Cl

Once a payment is entered it is strongly recommended that its payment amount be applied to charges it will pay for. This is for accurate book-keeping. If the Auto-Apply Payments setting is enabled in Practice Settings then ChiroSpring will do this for you when you save your changes. To manually apply a payment select the payment, then select "Apply Payment".

OK Cancel



Refund Example - 1 of 11

Here we have entered two charges at \$100 each.

Cash Register CPT copyright 2013 American Medical Association. All rights reserved.

Jack Refund
Apr 18, 2:35 PM

Totals & Payments

Select Patient: Jack Refund Select Provider: Dr. Brian

Select Insurance: Blue Cross

Charges

Therapy-Traction/ Mechanical Code: 97012 Price: \$100.00 (Ins)	\$100.00 Tax: 0.00% Dis: \$0.00 Qty: 1	↑ 1 Units ↓
Manipulation 5 Regions Code: 98942 Price: \$100.00 (Ins)	\$100.00 Tax: 0.00% Dis: \$0.00 Qty: 1	↑ 1 Units ↓

Analgesics
Electrotherapy
Exercise/Rehab
Heat/Cold Therapy
Supplements
Orthopedics
Pillows

1000 Biofreeze Cryospray - 4 Oz	1001 Sombra Pain Relieving Warming Gel - 4 Oz Jar	1002 Sombra Pain Relieving Warming Gel - 3 Oz Roll-On	1003 Sombra Pain Relieving Warming Gel - 8 Oz Jar
1004 Sombra Pain Relieving Warming Gel - 4 Oz Tube	1005 Biofreeze Gel Tube with Touch Free Applicator - 4 Oz	1006 Biofreeze Tube - 4 Oz	1007 Biofreeze Roll-On - 3 Oz
1008 Cryoderm Roll-On - 3 Oz	1009 Cryoderm Spray - 4 Oz	1010 Cryoderm Gel - 4 Oz	1011 Sombra Cool Therapy Gel - 2 Oz Jar
1012 Sombra Cool Therapy Gel - 8 Oz Jar	1013 Sombra Cool Therapy Roll-On - 3 Oz	1014 Sombra Cool Therapy - 4 Oz Jar	1015 Sombra Cool Therapy - 4 Oz Tube

Remove Charge **Change Price** **Discount Amount**

Add Refund **Discount Percent** **Tax Charge**

Note to Front Desk

Discount	Tax	Copay	Co-ins.	Deductible	Charge Total
\$0.00	\$0.00	\$0.00	\$0.00	\$200.00	\$200.00

Edit Service Charges

Cancel **Clinical Summary** Didn't ask **New Appointment** **Calendar** **No Receipt** **Receipt** **Receipt + Clinical Summary**



Refund Example - 2 of 11

I have entered a \$200 payment (paid in full).

Cash Register CPT copyright 2013 American Medical Association. All rights reserved.

Jack Refund Apr 18, 2:35 PM Totals & Payments

Amount Owed

Enter Payment

Payment Info	Assign Payment													
<input type="button" value="Cash"/>	Patient is paying by cash or debit card. This date reflects payment date on reports	<table border="1" style="width: 100%;"><tr><td>1</td><td>2</td><td>3</td></tr><tr><td>4</td><td>5</td><td>6</td></tr><tr><td>7</td><td>8</td><td>9</td></tr><tr><td>.</td><td>0</td><td>Cl</td></tr></table>	1	2	3	4	5	6	7	8	9	.	0	Cl
1	2		3											
4	5		6											
7	8		9											
.	0		Cl											
<input type="button" value="Credit"/>	Payment Date 04-18-2017 <input type="button" value="15"/>													
<input type="button" value="Check"/>	Facility Location Main ▼													
<input type="button" value="Return"/>	Payer Jack Refund													
<input type="button" value="Writeoff"/>	Amount 200													
<input type="button" value="Transfer"/>	Comments <div style="border: 1px solid gray; height: 20px;"></div>													
<input type="button" value="Other"/>														

Once a payment is entered it is strongly recommended that its payment amount be applied to charges it will pay for. This is for accurate book-keeping. If the Auto-Apply Payments setting is enabled in Practice Settings then ChiroSpring will do this for you when you save your changes. To manually apply a payment select the payment, then select "Apply Payment".



Refund Example - 3 of 11

The patient's balance is now zero as they have paid in full.

Visit Receipt - Jack Refund DOB: 04/18/1978 Age: 39 Ins: Blue Cross CPT copyright 2013 American Medical Association. All rights reserved.

Spinal Care Chiropractic
1234 Brady St.
Davenport, IA 45342
555-555-4323
spinalcarechiropractic4health@gmail.com

Visit Receipt

Jack Refund

Created: 4/18/17 at 6:59 PM
Appointment: 4/18/17 at 2:35 PM
Account: REFJA000
DOB: 4/18/1978 - Age 39
Provider: Dr. Brian
Provider NPI: 768768768
Provider EIN: BrianEIN

BALANCE FORWARD AS OF 4/18/17: \$0.00										
DATE	DESCRIPTION	UNITS	CHARGED AMOUNT	INS. SAVINGS	INS. PAID	COPAY	CO-INS	DEDUCT.	PATIENT PAID	PATIENT OWES
04/18/17	97012 Therapy-Traction/Mechanical	1	100.00	0.00	0.00	0.00	0.00	100.00	100.00	0.00
04/18/17	98942 Manipulation 5 Regions	1	100.00	0.00	0.00	0.00	0.00	100.00	100.00	0.00
04/18/17	Payment, Cash								200.00	
CHARGES							PAYMENTS		NEW BALANCE	
\$200.00							\$200.00		\$0.00	

Diagnosis
(E23) Hypofunction and other disorders of the pituitary gland

Treatment Plan
As needed

Discharge Instructions

Close

Receipt ◀ 1 ▶ of 1

Print Receipt(s) Print Settings Save Default



Refund Example - 4 of 11

Now we are entering a \$100 remittance.

Reconcile

Claim Remittance

Click Select to enter a new remittance or edit an existing

Selected Patient

Recent Patients

Anee	00AN001	DOB
Daniel Abraham	ABRDA000	DOB
John Abraham	ABRJC000	10/10/200
Eleanor Abram	ABREI000	03/10/198

Reconciled Patient

Insurance Payer

Blue Cross & Blue Shield

Add Payer Edit Payer List

Issue Number

Issue Date

4/18/2017

Check Number

Issue Amount

100.00

Payment Type

Check

Payment Date

4/18/2017

Notes

Remittance with only Jack Refund on it

PI Case

No

Is Bonus Payment

No

Bonus Start Date

Bonus End Date

Reconcile To Charges

Yes

Created By

Dr. Brian

Updated By

Selected Carriers

Blue Cross/Blue Shield
1234 Main St
Davenport, IA 87878

Remove Selected Copy From Previous

Available Carriers

*** Medicare is Primary**

*** Medicare with Medigap

Aetna **
334343
Madison Ave, IA 76775

AIS

Add Selected

OK Cancel

Financial Association: All rights reserved.

Product	Amt Charged	Amt to Sec/Ter	Ins. Owes

Issue Amount Remaining

\$0.00

Finish Remittance ?

Log Out



Refund Example - 5 of 11

The insurance paid \$100 on this charge, and I removed the \$100 deductible. Now the patient will have a CREDIT of \$100. Because of this credit the patient will now ask me for a refund of \$100.

Reconcile CPT copyright 2013 American Medical Association. All rights reserved.

Claim Remittance

Payer: Blue Cross & Blue Shield
Payment Date: 04/18/2017
Issued Date: 04/18/2017
Check Amount: \$100.00

Selected Patient
Jack Refund

Date	Code - Description	Units	Billing State (Ins. Carrier)	Amt Charged
04/18/17	97012 - Therapy-Traction/Mechanical	1	Bill Pri. (Blue Cross/Blue Shield)	100.00
100.00		No	0.00	0.00
0.00		100.00	0.00	0.00
		0.00	0.00	0.00

Notes
Ins Paid \$100. Removed \$100 deductible owed

Reconcile Charge

Charge Info
Billing State: Bill Pri.
Deductible: Not Met

Primary Insurance
Blue Cross/Blue Shield
ID No. 98797

Secondary Insurance

Tertiary Insurance

Date	Code	Units	Plc of Svc	Amt Charged
04/18/17	97012 - Therapy-Traction/Mechanical	1	11	100.00

Allowed	Pri. Payment	Sec. Payment	Ter. Payment	Copay	Coinsurance	Deductible	Denied Amt	Writeoff	Amt to Sec/Ter	Amt Disputed	Disputed?
100.00	100.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	No ▼

Ins. Savings	Pri. Paid	Sec. Paid	Ter. Paid	Ins. Owes	Amount Not Covered	Pt. Owes	Pt. Paid	Amt Remaining
0.00	100.00	0.00	0.00	0.00	0.00	-100.00	100.00	0.00

Notes
Ins Paid \$100. Removed \$100 deductible owed

Only Show Charges on Remittance **Issue Amount Remaining**
\$100.00

?



Refund Example - 6 of 11

Under Pt. Owes we see a credit of \$100. The orange charge is reconciled by the insurance. The patient is now asking us for a refund of \$100.

Ledger - Jack Refund REFJA000 DOB: 04/18/1978 Age: 39 INS: Blue Cross CPT copyright 2013 American Medical Association. All rights reserved.

Pt. Charges | Pt. Payments | Scheduled Credit Card Payments

Date	Description	Units	Amount	Hold	Claim	Allowed	Pri. Paid	Sec. Paid	Ter. Paid	Copay	Co-ins.	Deduct.	Pt. Paid	Pt. Owes
04/18/17	97012 Therapy-Traction/Mechanical	1	100.00	No	Yes	100.00	100.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
04/18/17	98942 Manipulation 5 Regions	1	100.00	No	Yes	100.00	0.00	0.00	0.00	0.00	0.00	100.00	100.00	0.00

Charge Details

DOS 04/18/17	EMG	Price \$100.00	Ins. Charged \$100.00	PMR Estimated No
Code 97012	POS	Discount \$0.00	Ins. Allowed \$100.00	Copay \$0.00
Description Therapy-Traction/Mechanical	EPSDT	Is Taxed No	Ins. Savings \$0.00	Co-insurance \$0.00
Units 1	Claimable Yes	Tax Rate 7.00%	Pri. Paid \$100.00	Deductible \$0.00
Is Refund No	Hold No	Amt Charged \$100.00	Sec. Paid \$0.00	Denied Amt \$0.00
Is Estimate No	Billing State Reconciled	Is Disputed No	Ter. Paid \$0.00	Amt. Not Covered \$0.00
Ins. Case Blue Cross	Billing Ins.	Amt Disputed \$0.00	Ins. Writeoff \$0.00	Pt. Charged \$0.00
Updated 04/18/17 by Dr. Brian	Last Billed	Amt Forwarded \$0.00	Ins. Owes \$0.00	Pt. Paid \$0.00
Note Ins Paid \$100. Removed \$100 deductible owed				Pt. Owes \$0.00

Pt. Charges \$100.00	Pt. Payments \$200.00	Unapplied \$100.00	Pt. Owes \$-100.00	Ins. Owes \$0.00
--------------------------------	---------------------------------	------------------------------	------------------------------	----------------------------



Refund Example - 7 of 11

Under the payments tab we can see the \$200 payment is now under applied (as indicated by the yellow box).

Ledger - Jack Refund REFJA000 DOB: 04/18/1978 Age: 39 INS: Blue Cross CPT copyright 2013 American Medical Association, All rights reserved.

Pt. Charges Pt. Payments Scheduled Credit Card Payments

Date	Facility	Payer	Method	Card/Check Number	Paid	Note	Status	Assigned	Unapplied
04/18/17	Main	Jack Refund	Cash		200.00		Paid	200.00	100.00

■ Fully Applied Payment ■ Under Applied Payment ■ Over Applied Payment

Show: All Payments ▼

Add Payment Delete Edit Apply to Charges

Pt. Charges	Pt. Payments	Unapplied	Pt. Owes	Ins. Owes
\$100.00	\$200.00	\$100.00	\$-100.00	\$0.00

Close Dock Print Ledger Load More



Refund Example - 8 of 11

Now I have opened the Cash Register app and clicked the Add Refund button. I entered \$100 with a comment “Giving patient \$100 cash back for OVERPAID deductible”.

Cash Register Jack Refund Apr 18, 7:06 PM **Totals & Payments**

Select Patient: Jack Refund Select Provider: Cash Register Select Insurance: Cash

Charges

Refund	\$0.00
Price: \$0.00 (Cash)	Tax: 0.00%
	Dis: \$0.00
	Qty: 1

Edit Refund

Issues a refund to the patient. The specified amount will be debited from the patient's account. This amount should be handed to the patient.

Note

Giving patient \$100 cash back for OVERPAID deductible

Amount

100

1 2 3
4 5 6
7 8 9
. 0 Cl

OK Cancel

nt Desk

Deductible	Charge Total
\$0.00	\$0.00

Cancel Calendar No Receipt Receipt Receipt + Clinical Summary



Refund Example - 9 of 11

Now when we open the Patient Ledger, we see the Pt. Owes is now \$0.00 as we have GIVEN the patient \$100 in cash. Therefore the \$100 credit is now balanced. We also see a white charge called "Refund". Refunds are created as charges as MONEY needs to be TIED (associated) to charges.

Ledger - Jack Refund REFJA000 DOB: 04/18/1978 Age: 39 INS: Blue Cross CPT copyright 2013 American Medical Association. All rights reserved.

Pt. Charges Pt. Payments Scheduled Credit Card Payments

Date	Description	Units	Amount	Hold	Claim	Allowed	Pri. Paid	Sec. Paid	Ter. Paid	Copay	Co-ins.	Deduct.	Pt. Paid	Pt. Owes
04/18/17	REFUND Refund	1	100.00	No	No	0.00	0.00	0.00	0.00	0.00	0.00	0.00	100.00	0.00
04/18/17	97012 Therapy-Traction/Mechanical	1	100.00	No	Yes	100.00	100.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
04/18/17	98942 Manipulation 5 Regions	1	100.00	No	Yes	100.00	0.00	0.00	0.00	0.00	0.00	100.00	100.00	0.00

Charge Details

DOS	04/18/17 (Cash Register)	EMG	Price	\$100.00	Ins. Charged	\$0.00	PMR Estimated	Yes	
Code	REFUND	POS	Discount	\$0.00	Ins. Allowed	\$0.00	Copay	\$0.00	
Description	Refund	EPSDT	Is Taxed	No	Ins. Savings	\$0.00	Co-insurance	\$0.00	
Units	1	Claimable	No	Tax Rate	0.00%	Pri. Paid	\$0.00	Deductible	\$0.00
Is Refund	Yes	Hold	No	Amt Charged	\$100.00	Sec. Paid	\$0.00	Denied Amt	\$0.00
Is Estimate	No	Billing State	Not Signed	Is Disputed	No	Ter. Paid	\$0.00	Amt. Not Covered	\$0.00
Ins. Case	Cash	Billing Ins.		Amt Disputed	\$0.00	Ins. Writeoff	\$0.00	Pt. Charged	\$100.00
Updated	04/18/17 by Dr. Brian	Last Billed		Amt Forwarded	\$0.00	Ins. Owes	\$0.00	Pt. Paid	\$100.00
Note	Giving patient \$100 cash back for OVERPAID deductible							Pt. Owes	\$0.00

Show All Charges ▼

Edit Charge Visit Charges View Payments View Remittances Edit Transaction

Pt. Charges \$200.00 Pt. Payments \$200.00 Unapplied \$0.00 Pt. Owes \$0.00 Ins. Owes \$0.00

Close Dock Print Ledger Load More



Refund Example - 10 of 11

Here you can see under the Pt. Payments tab the unapplied column is now \$0.00 and has a green box. Everything balances. \$100 of this payment has been applied to the \$100 REFUND charge.

Ledger - Jack Refund REFJA000 DOB: 04/18/1978 Age: 39 INS: Blue Cross CPT copyright 2013 American Medical Association. All rights reserved.

Pt. Charges Pt. Payments Scheduled Credit Card Payments

Date	Facility	Payer	Method	Card/Check Number	Paid	Note	Status	Assigned	Unapplied
04/18/17	Main	Jack Refund	Cash		200.00		Paid	200.00	0.00

■ Fully Applied Payment ■ Under Applied Payment ■ Over Applied Payment

Show: All Payments ▼

Add Payment Delete Edit Apply to Charges

Pt. Charges	Pt. Payments	Unapplied	Pt. Owes	Ins. Owes
\$200.00	\$200.00	\$0.00	\$0.00	\$0.00

Close Dock Print Ledger Load More



Refund Example - 11 of 11

Here we can see from our \$200 payment \$100 is now applied to the refund charge. Everything balances. 😊

Ledger - Jack Refund REFJA000 DOB: 04/18/1978 Age: 39 INS: Blue Cross CPT copyright 2013 American Medical Association. All rights reserved.

Pt. Charges Pt. Payments Scheduled Credit Card Payments

Date	Facility	Payer	Method	Card/Check Number	Paid	Note	Status	Assigned	Unapplied
04/18/17									0.00

Apply Payment to Charge(s)

\$200.00 paid by Jack Refund on 04/18/17
Paying charges for Jack Refund:

Payment Remaining to Apply
\$0.00

Date	Code	Description	Owes	Payment
04/18/17	REFUND	Refund	\$100.00	100.00
04/18/17	98942	Manipulation 5 Regions	\$100.00	100.00

1 2 3
4 5 6
7 8 9
. 0 Cl

OK Cancel

Fully Applied

Show All Payments

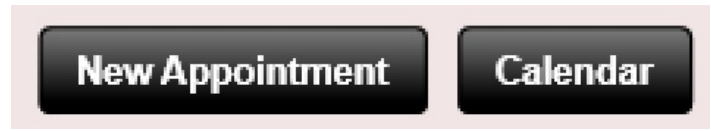
Close Dock Print Ledger Load More

Ins. Owes 50.00



Cash Register - Calendar

Part of the check out process may involve re-scheduling the patient for an appointment. ChiroSpring makes this easy. Simply click the “Calendar” or “New Appointment” button at the bottom of the cash register. This will open the calendar or the new appointment dialog. Schedule their appointment(s), then close the calendar. You can then complete the checkout process.



Cash Register CPT copyright 2020 American Medical Association. All rights reserved.

Julian Albery
Nov 30, 5:00 PM

Select Patient Julian Albery Select Provider Dr. Brian Albery Scan Product

Select Insurance BCBS

Charges

Manipulation 3-4 Regions Code: 98941 Price: \$40.00 (Ins) Tax: 0.00% Dis: \$0.00 Qty: 1	\$20.00
Therapy-Ultrasound Code: 97035 Price: \$25.00 (Ins) Tax: 0.00% Dis: \$0.00 Qty: 1	\$0.00

Charges

1000 Biofreeze Cryospray - 8 Oz	18.00	1001 Sombra Pain Relieving Warming Gel - 4 Oz Jar	15.00	1002 Sombra Pain Relieving Warming Gel - 3 Oz Roll-On	14.00	1003 Sombra Pain Relieving Warming Gel - 8 Oz Jar	24.00
1004 Sombra Pain Relieving Warming Gel - 4 Oz Tube	16.00	1005 Biofreeze Gel Tube with Touch Free Applicator - 4 Oz	18.00	1008 Biofreeze Tube - 4 Oz	16.00	1007 Biofreeze Roll-On - 3 Oz	15.00
1008 Cryoderm Roll-On - 3 Oz	17.00	1009 Cryoderm Spray - 4 Oz	19.00	1010 Cryoderm Gel - 4 Oz	17.00	1011 Sombra Cool Therapy Gel - 2 Oz Jar	8.00
1012 Sombra Cool Therapy Roll-On - 3 Oz	24.00	1013 Sombra Cool Therapy Roll-On - 3 Oz	16.00	1014 Sombra Cool Therapy - 4 Oz Jar	14.00	1015 Sombra Cool Therapy - 4 Oz Tube	15.00

Remove Charge Change Price Discount Amount Add Refund Discount Percent Tax Charge

Discount \$0.00 Copay \$0.00 Co-ins. \$20.00 Deductible \$0.00 Care Plan Total \$0.00 Non Care Plan Total \$20.00

Next Appointment Tuesday, Dec 1, 2020 9:00 PM

Calendar

Calendar CPT copyright 2020 American Medical Association. All rights reserved.

Recent Patients

Shiny Abraham ABRSH000	01/08/1990
Ms Braxton Adams ADABA000	04/15/1979
Brady E Albery ALBR000	12/16/1979
Brian Albery ALBR001	12/16/1972
Julian Albery ALBU000	12/16/1979

Add New Patient

Apts in View Filter

Dr. Brian Albery
Tuesday, Dec 1

12:45		
1:15		
1:30		
1:45		
2:15		
2:30		
2:45		
3:00		
3:15		
3:30		
3:45		
4:15		
4:30		
4:45		

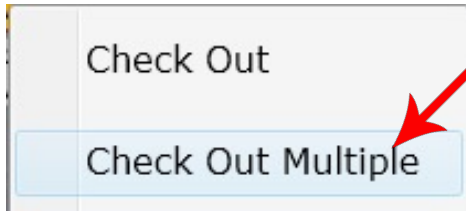
Total: 6 New: 0

Close Dock New Edit Reschedule Cancel Delete Refresh Today Jump To

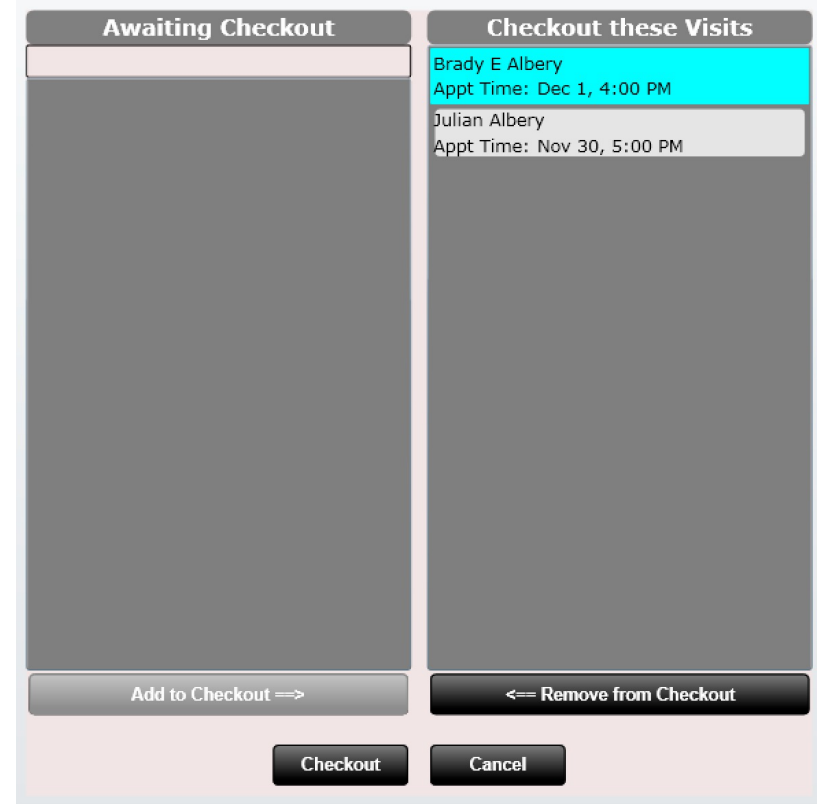
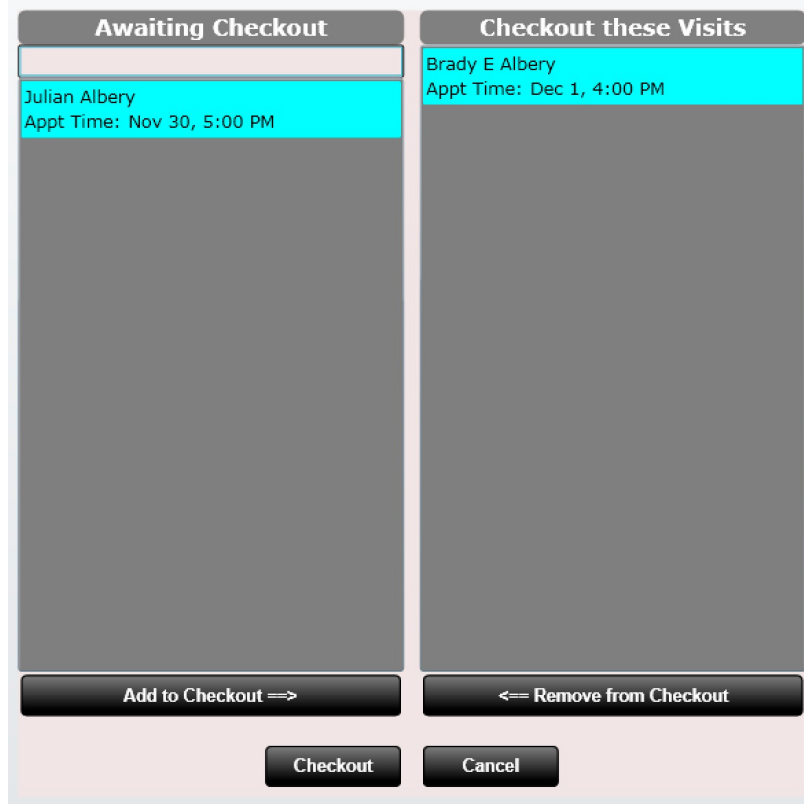
Front Desk Provider View Patient Flow Tuesday, Dec 1, 2020 11:14 PM Dr. Brian Albery Log Out KB



Cash Register – Check Out Multiple



After selecting “Check Out Multiple” on the front desk the following dialog will open. Use the “Add to Checkout” button to move your patient(s) to the right list box. Once all of your patients have moved to the right list box click “Checkout” at the bottom. This will open the cash register (see next page).





Cash Register – Check Out Multiple

When you check out multiple patients you will see each patient in a separate TAB at the top.

Checking out multiple patients is the same as checking out a single patient. The only difference is that you will need to MANUALLY assign the payment to all patients. This process was previously described under “Cash Register – Assign Payments Tab”.

The screenshot shows the 'Cash Register' software interface. At the top, there are two patient tabs: 'Julian Albery Nov 30, 5:00 PM' and 'Brady E Albery Dec 1, 4:00 PM'. A 'Totals & Payments' tab is also visible. Red arrows point to these tabs. Below the tabs are buttons for 'Select Patient', 'Select Provider', and 'Scan Product'. The 'Charges' section on the left lists two items: 'Manipulation 3-4 Regions' for \$20.00 and 'Therapy-Ultrasound' for \$0.00. The 'Therapy-Ultrasound' item is highlighted with a red box. To the right of the charges is a grid of product buttons, each with a code, name, and price. At the bottom, there are buttons for 'Remove Charge', 'Add Refund', 'Change Price', 'Discount Amount', 'Discount Percent', and 'Tax Charge'. A summary table at the bottom right shows the following values: Discount: \$0.00, Tax: \$0.00, Copay: \$20.00, Co-ins.: \$0.00, Deductible: \$0.00, Care Plan Total: \$0.00, Non Care Plan Total: \$20.00. The bottom status bar shows the date 'Tuesday, Dec 1, 2020', time '11:17 PM', and provider 'Dr. Brian Albery'.



Cash Register - Charges

The charges list box contains all the charges and shows you detailed information about each charge such as:

- Charge Name
- Code (CPT Code)
- Price (the charge amount)
- Cash or Insurance – denoted by (Ins) or (Cash)
- Total (the amount the patient is being charged)
- Tax (tax percentage)
- Dis (discount) – the amount of discount being applied on that charge
- Qty (quantity) – the number of units for that charge

Charges	
Manipulation 3-4 Regions	\$20.00
Code: 98941	Tax: 0.00%
Price: \$40.00 (Ins)	Dis: \$0.00
	Qty: 1

Power Tip: There is a setting option to allow price adjustments to copy over visit-to-visit. To enable go to Settings/Practice Info/General 2 and use the 'Copy Price Adjustments from previous visit' drop down.

Copy Price Adjustments from previous visit ?

Yes ▼



Cash Register – Change Price

To change the price on a charge, select the charge (it will highlight orange) and click the “Change Price” button. The “Change Price” dialog box will open. The current price is displayed at the bottom. Enter the new price in the “New Price” text box and press Ok. You have now successfully changed the price.

In the example below the price was changed from \$16.00 to \$10.00.

Change Price

New Price
10.00

Current Price
\$16.00

1	2	3
4	5	6
7	8	9
.	0	Cl

OK **Cancel**

Charges	
Biofreeze Cryospray - 4 Oz	\$16.00
SKU: 1000	Tax: 0.00%
Price: \$16.00 (Cash)	Dis: \$0.00
	Qty: 1

Change Price

Charges	
Biofreeze Cryospray - 4 Oz	\$10.00
SKU: 1000	Tax: 0.00%
Price: \$10.00 (Cash)	Dis: \$0.00
	Qty: 1



Cash Register – Discount Amount

To discount a charge by a specific amount, select the charge (it will highlight orange) and click the “Discount Amount” button. It will open a window asking you to input the amount of the discount. Here I entered \$1.00.

As you can see the charge was discounted by \$1.00. Also, in the “Dis:” field there is a \$1.00 discount displayed there as well to show the charge was discounted by \$1.00.

Apply Discount

Discount by Amount
1

Current Price
\$16.00

New Price
\$15.00

1	2	3
4	5	6
7	8	9
.	0	Cl

OK Cancel

Charges	
Biofreeze Cryospray - 4 Oz	\$16.00
	Tax: 0.00%
SKU: 1000	Dis: \$0.00
Price: \$16.00 (Cash)	Qty: 1

Discount Amount

Charges	
Biofreeze Cryospray - 4 Oz	\$15.00
	Tax: 0.00%
SKU: 1000	Dis: \$1.00
Price: \$16.00 (Cash)	Qty: 1



Cash Register – Discount Percent

To discount a charge by a specific percent, select the charge (it will highlight orange) and click the “Discount Percent” button. It will open a window asking you to input the amount of the discount percent. Here I entered 10 to give the patient a 10 percent discount.

As you can see the charge was discounted by 10 percent and saved the patient \$1.60 as notated by the Disc: \$1.60 on the charge.

Apply Discount

Discount by Percent:

Current Price: \$16.00

New Price: \$14.40

1	2	3
4	5	6
7	8	9
.	0	Cl

OK Cancel

Charges	
Biofreeze Cryospray - 4 Oz	\$16.00
SKU: 1000	Tax: 0.00%
Price: \$16.00 (Cash)	Dis: \$0.00
	Qty: 1

Discount Percent

Charges	
Biofreeze Cryospray - 4 Oz	\$14.40
SKU: 1000	Tax: 0.00%
Price: \$16.00 (Cash)	Dis: \$1.60
	Qty: 1



Cash Register – Tax Charge

Charges can either Have or Not-Have tax associated with them. The default tax status of a charge is set in settings/products and is notated by the “Is Taxed” drop down box.

You can tax a charge or un-tax a charge on the fly at the cash register. Simply select the charge, it will highlight orange. Then tap the “Tax Charge” button.

- If a charge had tax on it the tax will be removed.
- If a charge did not have tax on it, tax will be added.

In the example to the right, the top charge has no tax. After clicking the “Tax Charge” button the tax is now at 7.00% (the default tax rate of my practice set in Settings/Practice Info). The product now shows Tax: 7.00% and the price has increased from \$16.00 to \$17.12.

Charges	
Biofreeze Cryospray - 4 Oz	\$16.00
SKU: 1000	Tax: 0.00%
Price: \$16.00 (Cash)	Dis: \$0.00
	Qty: 1



Charges	
Biofreeze Cryospray - 4 Oz	\$17.12
SKU: 1000	Tax: 7.00%
Price: \$16.00 (Cash)	Dis: \$0.00
	Qty: 1



Cash Register - Receipt

At the bottom of the cash register are three buttons. Select if you want a receipt, receipt + clinical summary or No Receipt (NONE).



After clicking "Finish" the Cash Register will generate a receipt. If you checked out multiple patients there will be multiple receipts. You can use the left and right green arrows at the bottom to toggle between receipts (if multiple receipts are present).



To print your receipt(s) click the "Print Receipt(s) button at the bottom.

Visit Receipt - Brady E Albery DOB: 12/16/1979 Age: 40 Ins: BCBS CPT copyright: 2020 American Medical Association. All rights reserved.

Dr's Chiropractic
234 Western
Davenport, IA 52722-1234
563-545-4565
info@gmail.com

Brady E Albery
1234 Main St.
Bettendorf, IA 52722

Created: 12/1/20 at 11:19 PM
Appointment: 12/1/20 at 4:00 PM
Account: ALBBR000
DOB: 12/16/1979 - Age 40
Provider: Dr. Brian Albery
Provider NPI: 5635059372
Provider EIN:

BALANCE FORWARD AS OF 12/1/20: \$57.80

DATE	DESCRIPTION	UNITS	CHARGED AMOUNT	TAX	SAVINGS	INS. PAID	COPY	CO-INS	DEDUCT.	PATIENT PAID	PATIENT OWES
12/01/20	97012 Therapy-Traction/Mechanical*	1	20.00	0.00	0.00	0.00	0.00	0.00	0.00	20.00	0.00
12/01/20	1009 Cryoderm Spray - 4 Oz	1	20.52	1.52	0.00	0.00	0.00	0.00	0.00	20.52	0.00
12/01/20	1004 Sombra Pain Relieving Warming Gel - 4 Oz Tube	1	17.28	1.28	0.00	0.00	0.00	0.00	0.00	17.28	0.00
12/01/20	Payment, Cash									115.60	
			TOTAL TAX	TOTAL SAVINGS	CHARGES	PAYMENTS	NEW BALANCE				
			\$2.80	\$0.00	\$57.80	\$115.60	\$0.00				

Product Orders

Products	Details
Cataplex A - 180T	Breakfast-1, Bedtime-2, Lunch-1
Take with food.	
Vitamin C	Breakfast-2
B6-Niacinamide - 330T	Breakfast-1, Bedtime-3

Close Receipt 1 of 1 Print Receipt(s) Print Settings Save Default

Front Desk Provider View Patient Flow Tuesday, Dec 1, 2020 11:19 PM Dr. Brian Albery Log Out KB

Note: Provider NPI number and Diagnosis populate on the receipt. This means your patients can use the receipt if they want to submit to their insurance on their own.



Cash Register – Receipt – Print Settings

Here you can see we are modifying which components of the receipt we want displayed. Remember to click “Save Default” if you want to make these options your default.



Visit Receipt - Brady E Albery DOB: 12/16/1979 Age: 40 Ins: BCBS CPT copyright 2020 American Medical Association. All rights reserved.

Dr's Chiropractic
234 Western
Davenport, IA 52722-1234
563-545-4565
info@gmail.com

Brady E Albery
1234 Main St.
Bettendorf, IA 52722

Created: 12/1/20 at 11:19 PM
Appointment: 12/1/20 at 4:00 PM
Account: ALBBR000
DOB: 12/16/1979 - Age 40
Provider: Dr. Brian Albery
Provider NPI: 5635059372
Provider EIN:

FORWARD AS OF 12/1/20: \$57.80

CO-INS	DEDUCT.	PATIENT PAID	PATIENT OWES
0.00	0.00	20.00	0.00
0.00	0.00	20.52	0.00
0.00	0.00	17.28	0.00
		115.60	
PAYMENTS		NEW BALANCE	
	\$115.60		\$0.00

Product Orders

Products	
Cataplex A - 180T	Breakfas
Take with food.	
Vitamin C	Breakfas
R6-Niacinamide - 330T	Breakfas

Visit Receipt

Select Optional Report Columns

- Provider NPI
- Provider EIN
- Charges
- Product Orders
- Diagnosis
- Treatment Plan
- Discharge Instructions
- Future Appointments
- Balance and Payments

Select All Clear All OK Cancel

Close Receipt of 1 Print Receipt(s) Print Settings Save Default

Front Desk Provider View Patient Flow Tuesday, Dec 1, 2020 11:19 PM Dr. Brian Albery Log Out KB



Cash Register – Clinical Summary

The clinical summary is a summary of your patient's visit.

Clinical Summaries are not required to be given to your patient.

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Spinal Care Chiropractic
234 Western Ave
Davenport, IA 52806
563-545-4565
spinalcarechiropractic4health@gmail.com

Tom Andresen
1234 Main St.
Davenport, IA 56545

Clinical Summary

Created: 9/13/15 at 8:43 PM
Appointment: 9/9/15 at 9:00 AM
Account: ANDTO000
DOB: 8/6/1984 - Age 31
Provider: Miranda Hansen
Provider NPI: 123456

Reason(s) for Visit
2 - Adjustment

Diagnosis
(723.1) Cervicalgia
(346.8) Other forms of migraine without intractable migraine
(351.0) Bells' Palsy
(346.81) Other forms of migraine with intractable migraine
(716.65) Unspecified monoarthritis, pelvic region and thigh
(715.97) Osteoarthritis, unspecified whether generalized or localized ankle and foot

Problems

Description	Last Reviewed Date
Diabetes Mellitus, type 1	Nov 24, 2014
Malignant tumor of nasopharynx (disorder)	Sep 7, 2015

Close Receipt ◀ 1 ▶ of 1 Print Clinical Summary



Power Tip: The cash register receipt or clinical summary can also be accessed by going to the Dashboard/Visit Tile. Then click the "Receipt" button or "Clinical Summary" button at the bottom.

Cash Charge Claims Charge

◀

Delete SOAPEdit SOAPView SOAPReceiptClinical Summary

▶



Cash Register - Receipt

The cash register receipt shows:

- Diagnosis
- Discharge Instructions
- Treatment Plan
- Upcoming appointments

Use the “**Print Settings**” button to customize which options you want shown on the receipt.

The receipt footer is customizable in Settings/Practice Info or customize an individual patient receipt footer in Dashboard/Profile.

Diagnosis

(723.1) Cervicalgia
(724.2) Lumbalgia
(346.21) Variants of migraine with intractable migraine
(346.01) Classical migraine with intractable migraine
(346.8) Other forms of migraine without intractable migraine
(346.81) Other forms of migraine with intractable migraine

Discharge Instructions

I recommend you apply ice or an ice pack to the affected area to help decrease pain, inflammation and muscle spasms caused by acute injury. For the next 48-72 hours, I recommend you apply cold to the area for no longer than 15 minutes on, 45 min-1 hour off. If cold is applied for longer than 15 minutes tissue damage could occur, including frostbite.

Treatment Plan

4x per week for 4 week(s)
3x per week for 4 week(s)
2x per week for 4 week(s)
1x per week for 4 week(s)

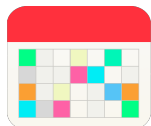
Upcoming Appointments

1/24/2014 - 16:30 PM
1/27/2014 - 10:45 AM

Receipt Footer



Thank you for your business! www.spinalcarechiropractic.com



Power Tip: The cash register receipt or clinical summary can also be accessed by going to the Dashboard/Visit Tile. Then click the “Receipt” button or “Clinical Summary” button at the bottom.

— Cash Register — Clinical Summary

Navigation bar with buttons: Delete SOAP, Edit SOAP, View SOAP, Receipt, Clinical Summary

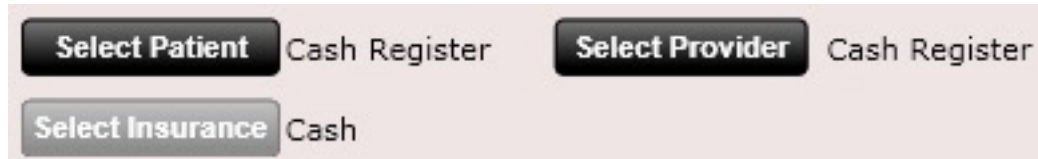


Cash Register

Non-Appointment Use

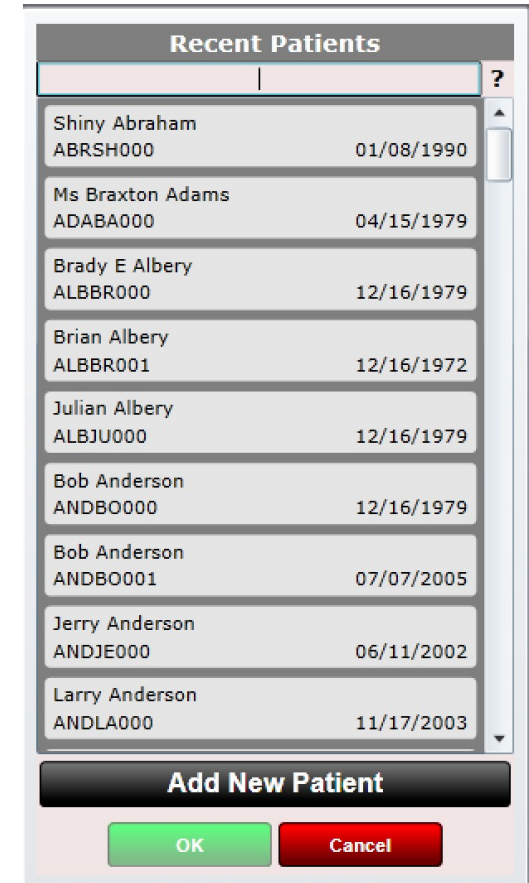
If the patient did not have an appointment but you need to access the cash register, you can click the Cash Register app on the front desk.

If you wish to tie a charge to a patient, click the black “Select” button. This will open a dialog box letting you select your patient. Now any charges you add will be tied to that patient’s account.



Use the “Select Provider” button if you wish to tie the cash register transaction to a provider. For example, if you are selling a massage gift certificate and you want the sale to go to that therapist select that therapist.

NOTE: If you wish to see a record of these cash register sales, you can view them in the patient’s ledger. However, a cash register receipt is not saved as there is no patient visit to tie it to.



Power Tip: You can even add a new patient at the cash register. After clicking “Select” click the “Add New Patient” button.

#Billing





Billing

The billing app provides the primary place for managing your practice's billing. It is a powerful way to keep track of every insurance charge where money is still owed.

The billing app allows user to perform the following actions:

- View charges that have unsigned SOAP notes
 - Unsigned SOAP notes cannot be billed
- View charges that have not been submitted
- View charges that have been submitted (but are not yet paid by insurance)
 - Reconciled charges will not appear here
- View charges that are on hold
- View charges that are disputed
- View charges that are waiting to print
 - Includes both Export and Print charges
- View non-submitted charges separated into Export or Print
 - Export = Electronic
 - Print = Printing onto a HCFA form



Categories	
Not Signed	
3	\$40.00
Not Submitted	
2	\$160.00
Submitted	
55	\$2,553.00
Hold	
0	\$0.00
Disputed	
0	\$0.00
Waiting to Print	
0	\$0.00
Waiting to Export	
2	\$160.00

Billing



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Categories

Not Signed
1002 of 1260
\$57,169.85

Not Submitted
160 of 160
\$4,191.25

Submitted
0 of 3036
\$79,532.60

Hold
0 of 8
\$375.00

Disputed
0 of 30
\$644.50

Waiting to Print
0 of 60
\$1,512.50

Waiting to Export
0 of 103
\$2,813.75

Smart Search ?

Filter by Insurance Carrier ▼ X

Sort Charges by ▼

Visit Date

More Filters

Date	Patient	Code	Units	Hold	Disputed	
Claim Type	Billing State	Last Billed	Pri. Paid	Sec. Paid	Ter. Paid	Ins. Owes
Notes						
<input type="checkbox"/>	11/23/20 ALBRR000 (Albery, Brady, E) Export Bill Pri. (3456 WECOME WAY)	99204-25 New Patient Comprehensive Exz	1	No	No	110.00
<input type="checkbox"/>	11/23/20 ALBRR000 (Albery, Brady, E) Export Bill Pri. (3456 WECOME WAY)	98941 Manipulation 3-4 Regions	1	No	No	40.00
<input type="checkbox"/>	11/23/20 ALBRR000 (Albery, Brady, E) Export Bill Pri. (3456 WECOME WAY)	97035 Therapy-Ultrasound	2	No	No	50.00
<input type="checkbox"/>	11/23/20 ALBRR000 (Albery, Brady, E) Export Bill Pri. (3456 WECOME WAY)	98941 Manipulation 3-4 Regions	1	No	No	20.00
<input type="checkbox"/>	11/20/20 ALBRR000 (Albery, Brady, E) Export Bill Pri. (3456 WECOME WAY)	97035 Therapy-Ultrasound	1	No	No	25.00
<input type="checkbox"/>	11/20/20 ALBRR000 (Albery, Brady, E) Export Bill Pri. (3456 WECOME WAY)	98941 Manipulation 3-4 Regions	1	No	No	20.00
<input type="checkbox"/>	11/20/20 ALBRR000 (Albery, Brady, E) Export Bill Pri. (Aetna)	98941 Manipulation 3-4 Regions	1	No	No	27.00
<input type="checkbox"/>	11/20/20 ALBRR000 (Albery, Brady, E) Export Bill Pri. (Aetna)	97035 Therapy-Ultrasound	1	No	No	4.50
<input type="checkbox"/>	11/20/20 ALBRR000 (Albery, Brady, E) Export Bill Pri. (Aetna)	97035 Therapy-Ultrasound	1	No	No	4.50
<input type="checkbox"/>	11/20/20 ALBRR000 (Albery, Brady, E) Export Bill Pri. (Aetna)	98941 Manipulation 3-4 Regions	1	No	No	27.00
<input type="checkbox"/>	11/18/20 ALBRR000 (Albery, Brady, E) Export Bill Pri. (Aetna)	72080 X-ray Thocacolumbar Spine-AP/Lat	1	No	No	40.50
<input type="checkbox"/>	11/18/20 ALBRR000 (Albery, Brady, E)	98941 Manipulation 3-4 Regions	1	No	No	

Re-Bill Charge(s)

Front Desk

Provider View

Patient Flow

Tuesday, Dec 1, 2020

11:21 PM

Dr. Brian Albery

Log Out



Billing

The left side of the screen provides seven billing categories that filter your practice charges into neatly organized folders, as well as provides the number of and total dollar amount of all the charges in that folder.

Categories	
Not Signed	
3	\$40.00
Not Submitted	
2	\$160.00
Submitted	
55	\$2,553.00
Hold	
0	\$0.00
Disputed	
0	\$0.00
Waiting to Print	
0	\$0.00
Waiting to Export	
2	\$160.00



Billing

Use filters at the top within a section to find a specific charge. You can search by name, CPT code, visit date, or even insurance carrier.

Smart Search



Filter by Insurance Carrier



Sort Charges by

Visit Date



More Filters

Clicking the More Filters button will reveal additional filter options including checkboxes for aging.

Aging

- 0 to 30
- 31 to 60
- 61 to 90
- 91 to 120
- 121+

Location

▼ X

Provider

▼ X

Ok



Billing

The third pane in the Billing app are the Visit Charges. If all patients are checked you will see all patient charges here corresponding to the folder on the left you are currently selected on.

Depending on how many outstanding charges you have, older ones may not load. To load more charges click the "Load More" button. If this button is greyed out then all charges for the selected folder have been loaded.

CPT copyright 2020 American Medical Association. All rights reserved.

Smart Search ? Filter by Insurance Carrier [X] Sort Charges by Visit Date [v] More Filters

Date	Patient	Code	Units	Hold	Disputed	Ins. Owes
Claim Type	Billing State	Last Billed	Pri. Paid	Sec. Paid	Ter. Paid	
<input type="checkbox"/>	12/04/20 ALBBR000 (Albery, Brady, E) Export Pri. Billed (3456 WECOME WAY)	98941 Manipulation 3-4 Regions Notes	1 12/09/20	No 0.00	No 0.00	20.00
<input type="checkbox"/>	12/04/20 ALBBR000 (Albery, Brady, E) Export Pri. Billed (3456 WECOME WAY)	97110 Therapy-Therapeutic Exercise	1 12/09/20	No 0.00	No 0.00	40.00
<input type="checkbox"/>	12/04/20 ALBBR000 (Albery, Brady, E) Export Pri. Billed (3456 WECOME WAY)	72080 X-ray Thocacolumbar Spine-AP/Lat	1 12/09/20	No 0.00	No 0.00	65.00
<input type="checkbox"/>	11/23/20 ALBBR000 (Albery, Brady, E) Export Pri. Billed (3456 WECOME WAY)	98941 Manipulation 3-4 Regions	1 12/03/20	No 0.00	No 0.00	40.00
<input type="checkbox"/>	11/23/20 ALBBR000 (Albery, Brady, E) Export Pri. Billed (3456 WECOME WAY)	98941 Manipulation 3-4 Regions	1 12/03/20	No 0.00	No 0.00	20.00
<input type="checkbox"/>	11/23/20 ALBBR000 (Albery, Brady, E) Export Pri. Billed (3456 WECOME WAY)	99204-25 New Patient Comprehensive Exa	1 12/03/20	No 0.00	No 0.00	110.00
<input type="checkbox"/>	11/23/20 ALBBR000 (Albery, Brady, E) Export Pri. Billed (3456 WECOME WAY)	97035 Therapy-Ultrasound	2 12/03/20	No 0.00	No 0.00	50.00
<input type="checkbox"/>	11/20/20 ALBBR000 (Albery, Brady, E) Export Pri. Billed (3456 WECOME WAY)	97035 Therapy-Ultrasound	1 12/02/20	No 0.00	No 0.00	25.00
<input type="checkbox"/>	11/20/20 ALBBR000 (Albery, Brady, E) Export Pri. Billed (3456 WECOME WAY)	98941 Manipulation 3-4 Regions	1 12/02/20	No 0.00	No 0.00	20.00
<input type="checkbox"/>	11/18/20 ALBBR000 (Albery, Brady, E) Export Pri. Billed (Aetna)	72080 X-ray Thocacolumbar Spine-AP/Lat	1 12/04/20	No 0.00	No 0.00	40.50
<input type="checkbox"/>	11/18/20 ALBBR000 (Albery, Brady, E) Export Pri. Billed (Aetna)	98941 Manipulation 3-4 Regions	1 12/04/20	No 0.00	No 0.00	20.00
<input type="checkbox"/>	11/11/20 CONLI000 (Conner, Lisa)	98941 Manipulation 3-4 Regions	1	No	No	

Check All Clear All 1/10 Load More

Bill Pri. Bill Sec. Bill Ter. Dispute Clear Dispute Remove Hold Print / Export Remittances

Refresh With New Charge Cancel Changes Save Changes Process Claims Go to Settings

◀ 1/10 ▶ Load More



Billing – Visit Charges

Each charge includes the following information shown below

- Date
- Patient
- Code (CPT)
- Units
- Hold Status
- Disputed
- Claim Type (Print or Export)
- Billing State
- Last Billed Date
- Pri. Paid
- Sec. Paid
- Ter. Paid
- Ins. Owes
- Notes

Date	Patient	Code	Units	Hold	Disputed		
Claim Type	Billing State	Last Billed	Pri. Paid	Sec. Paid	Ter. Paid	Ins. Owes	
Notes							
<input type="checkbox"/>	12/04/20	ALBBR000 (Albery, Brady, E)	98941 Manipulation 3-4 Regions	1	No	No	
Export	Pri. Billed (3456 WECOME WAY)	12/09/20	0.00	0.00	0.00	20.00	
<input type="checkbox"/>	12/04/20	ALBBR000 (Albery, Brady, E)	97110 Therapy-Therapeutic Exercise	1	No	No	
Export	Pri. Billed (3456 WECOME WAY)	12/09/20	0.00	0.00	0.00	40.00	

Along the bottom are several buttons that let you “act on” a specific charge. Once you select a charge by clicking the checkbox, the appropriate buttons corresponding to that charge will be displayed in black (greyed out if not appropriate to the selected charge)

\$3,008.75

Check All Clear All

1/10 Load More

Re-Bill Charge(s) Bill Pri. Bill Sec. Bill Ter. Dispute Clear Dispute Remove Hold Print / Export Remittances

Close Dock Refresh With New Charge Cancel Changes Save Changes

Activate Process Claims Go to Settings

These buttons give you MAXIMUM control over what you want to do with the selected charge.



Billing – Billing Status

Pay very close attention to the “Billing Status” section. Here it will show you the current billing status of the charge as well as the insurance case name.

Bill Pri. (Wellmark Blue Cross & Blue Shield)

Charges go through this series of billing until reconciled. Once reconciled they will not appear in the Billing app.

1. **Not Signed** – Charges with “unfinished SOAP notes” cannot be billed to insurance
2. **Bill Primary** – Once signed claimable charges are set to Bill Primary
3. **Primary Billed** – Once submitted (with Claims app) the Bill Primary is then marked Primary Billed
4. **Bill Secondary** – etc...
5. **Secondary Billed** – etc...
6. **Bill Tertiary** – etc...
7. **Tertiary Billed** – etc...
8. **Reconciled** – Once the charge is reconciled it will be marked as such and no longer appear in the Billing app

You can update the Billing Status by selecting a charge, clicking the billing state you wish to change to, followed by clicking Save Changes.

Bill Pri.

Bill Sec.

Bill Ter.

You can also select one (or multiple charges) and select “Re-Bill Charge(s)” followed by clicking Save Changes.

Re-Bill Charge(s)

Save Changes



Billing – Print/Export

Also pay very close attention to the Claim Type which is either Export or Print. Export indicates the charge will appear in the Export Tab in the claims app and when processed will be in a file ready to submit electronically to your clearinghouse. Print indicates the charge will appear in the Print Tab in the Claims app and when processed will print onto an actual blank HCFA form. You will of course need to load your printer with blank HCFA forms.



The charges claim type is set by the default setting you selected when you created the insurance case.



If you wish to change the claim type of a charge you can either change the claim type inside the insurance case for that patient or use the “Print/Export” button in the billing app to toggle back and forth between Print and Export. Once you have changed the claim type click “Save Changes” and the charge will move into the appropriate folder.

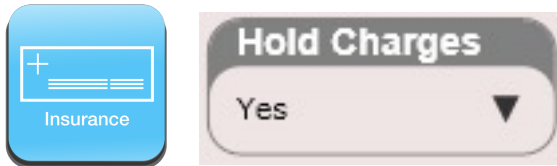




Billing – Hold Charges

There may be instances where you want to hold a charge (not bill it). This is often the case with auto accident cases or personal injury cases where the insurance tells you not to bill anything until the entire case is closed.

It's easy to put charges on hold. This is done by selecting "Yes" in the "Hold Charges" option found in the patient's insurance case.



Removing the hold and subsequently make the charges billable can be accomplished in two ways

- Go to the patient's dashboard/Insurance Tile and change the "Hold Charges" option to "No" and save changes.
- Find one of the patient's held charges in the Billing app. Select the charge and click "Remove Hold" at the bottom and "Save Changes". This will remove the hold on every charge for that entire insurance case and the charges will then be billable.

Remove Hold

Save Changes



Billing – Disputed Charges

ChiroSpring allows you to easily dispute charges. The most common reason to dispute a charge is due to underpayment by an insurance carrier.

You can dispute a charge in three ways

1. When reconciling a charge using the Reconcile app there is an option to dispute a charge. This is accomplished by entering the “Amt. Disputed” and making “Disputed?” = “Yes”. See the below “Reconcile Charge” dialog.

Reconcile Charge

Charge Info		Primary Insurance	Secondary Insurance	Tertiary Insurance
Billing State	Reconciled	Aetna		
Deductible	None	ID No. 0		

Date	Code	Units	Plc of Svc	Amt Charged
11/11/20	99201-25 - New Patient Problem Focused Examination	1	11	45.00

Allowed	Pri. Payment	Sec. Payment	Ter. Payment	Copay	Coinsurance	Deductible	Denied Amt	Writeoff	Amt to Sec/Ter	Amt Disputed	Disputed?
45.00	0.00	0.00	0.00	20.00	10.00	0.00	0.00	5.00	0.00	10.00	Yes

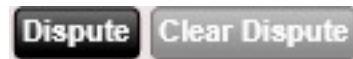
Ins. Savings	Pri. Paid	Sec. Paid	Ter. Paid	Ins. Owes	Amount Not Covered	Adj. Amount	Pt. Owes	Pt. Paid	Amt Remaining
0.00	0.00	0.00	0.00	10.00	0.00	0.00	10.00	20.00	0.00

Notes
Call ins find out why not paid

Statement Note

Buttons: Don't Claim Charge, Mark Deductible Met, Finish Charge, Cancel, Help, Unreconcile

1. In the Billing app select a charge and then click the “Dispute” button followed by “Save Changes”.



Removing a dispute is done the exact same way only the opposite selections should be made.



Billing – Disputed Charges

To change the disputed status of a charge is simple. From the “Edit Charge” dialog you will see a Disputed box.



This means the charge is not disputed. You know this because the Dispute button is SELECTABLE. Clicking “Dispute” followed by saving changes will dispute the charge.

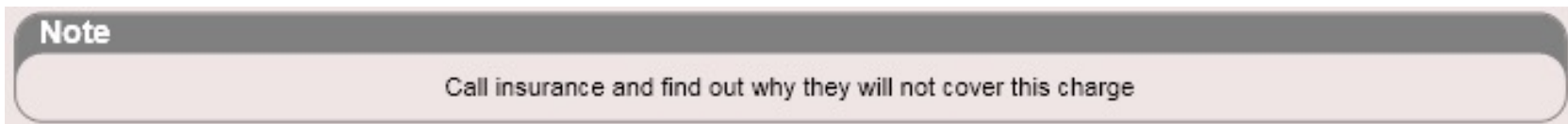


This means the charge is disputed. You know this because the clear button is SELECTABLE. Clicking “Clear” followed by saving changes will clear the dispute.



As a reminder, the Billing app keeps track of disputed charges in the Disputed folder.

The notes field can be very useful when tracking the status of a disputed charge.





Billing – Edit Charge

ChiroSpring gives you the ability to easily edit almost any aspect of a charge. To edit a charge, select the charge in the Billing app (or patient ledger). Then right click and select Edit Charge or Edit Visit Charges.

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Categories: Not Signed (1002 of 1274, \$57,855.85), Not Submitted (0 of 173, \$4,386.25), Submitted (1000 of 3039, \$79,782.60), Hold (0 of 10, \$480.00), Disputed (0 of 30, \$644.50), Waiting to Print (0 of 60, \$1,512.50), Waiting to Export (0 of 116, \$3,008.75)

Smart Search: ? Filter by Insurance Carrier: [X] Sort Charges by: Visit Date [More Filters]

Claim Type	Date	Patient	Code	Units	Hold	Disputed	Ins. Owes
<input type="checkbox"/>	12/04/20	ALBBR000 (Albery, Brady, E)	98941 Manipulation 3-4 Regions	1	No	No	
<input type="checkbox"/>	12/04/20	ALBBR000 (Albery, Brady, E)	97110 Therapy-Therapeutic Exercise	1	No	No	
<input type="checkbox"/>	12/04/20	ALBBR000 (Albery, Brady, E)	72080 X-ray Thocacolumbar Spine-AP/Lat	1	No	No	
<input type="checkbox"/>	11/23/20	ALBBR000 (Albery, Brady, E)	98941 Manipulation 3-4 Regions	1	No	No	
<input type="checkbox"/>	11/23/20	ALBBR000 (Albery, Brady, E)	98941 Manipulation 3-4 Regions	1	No	No	
<input type="checkbox"/>	11/23/20	ALBBR000 (Albery, Brady, E)	99204-25 New Patient Comprehensive Exa	1	No	No	
<input type="checkbox"/>	11/23/20	ALBBR000 (Albery, Brady, E)	99204-25 New Patient Comprehensive Exa	2	No	No	
<input type="checkbox"/>	11/20/20	ALBBR000 (Albery, Brady, E)	98941 Manipulation 3-4 Regions	1	No	No	
<input type="checkbox"/>	11/20/20	ALBBR000 (Albery, Brady, E)	98941 Manipulation 3-4 Regions	1	No	No	
<input type="checkbox"/>	11/18/20	ALBBR000 (Albery, Brady, E)	98941 Manipulation 3-4 Regions	1	No	No	
<input type="checkbox"/>	11/18/20	ALBBR000 (Albery, Brady, E)	98941 Manipulation 3-4 Regions	1	No	No	
<input type="checkbox"/>	11/11/20	CONLI000 (Conner, Lisa)	98941 Manipulation 3-4 Regions	1	No	No	

Right-click context menu: Edit Visit Charges, Edit Charge, Dashboard

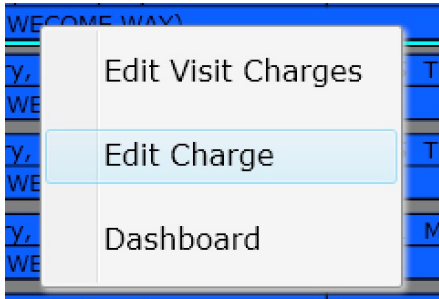
Buttons: Check All, Clear All, Re-Bill Charge(s), Bill Pri., Bill Sec., Bill Ter., Dispute, Clear Dispute, Remove Hold, Print / Export, Remittances, Close, Dock, Refresh With New Charge, Cancel Changes, Save Changes, Activate Process Claims, Go to Settings

Front Desk, Provider View, Patient Flow, Tuesday, Dec 15, 2020 10:58 PM, Dr. Brian Albery, Log Out, KB



Billing – Edit Charge

Here is the Edit Charge Dialog.



Edit Charge

General

Date of Service 03/18/14	Code 5306 - Orthotic - Right Foot Change			
Price 150.00	Units 1	Discount Amt 0.00	Is Taxed? No ▼	Tax Rate (%) 0.00
Is Estimate No ▼	Is Claimable to Insurance? Blue Cross and Blue Shield Yes No			

Note

Insurance Related

Billing State Bill Pri. Change	Disputed Dispute Clear		
Amount Allowed* 150.00	Insurance Writeoff 0.00	Amount Forwarded 0.00	Amount Disputed 0.00
Estimate PMR? No Toggle Yes/No	Copay* 0.00	Co-insurance* 0.00	Deductible* 0.00
Place Of Service	Emergency (EMG)	EPSDT	

(*) Amount allowed, copay, co-insurance, and deductible cannot be edited when Estimate PMR? is Yes (enabled); this is because these amounts are calculated/estimated by ChiroSpring.

Save Cancel

Note: The following fields are NOT EDITABLE unless Estimate PMR? Is turned to YES

- Amount Allowed
- Copay
- Co-Insurance
- Deductible

(*) Amount allowed, copay, co-insurance, and deductible cannot be edited when Estimate PMR? is Yes (enabled); this is because these amounts are calculated/estimated by ChiroSpring.



Billing – Change Charge Code

To change a charge code, click “Change” in the Edit Charge dialog. From the grid that opens select your new charge or search for it.

In this example I am changing a 98941 charge to a 98942

1 **Code**
98941 - Manipulation 3-4 Regions Change

2 **Change Charge Code to:**
98942|
98942
Manipulation 5 Regions

Adjustment		Examination	Focused Examination	
Therapy				
Radiography	9204-25-BC-EF-G New Patient Comprehensive Examination	99205-25 New Patient Comprehensive (High Complexity) Exam	99211-25 Established Patient Minimal Examination	99212-25 Established Patient Problem Focused Exam
Analgesics				
Electrotherapy	99213-25 Established Patient Expanded Exam	99214-25 Established Patient Detailed Exam	99215-25 Established Patient Comprehensive Exam	99371 Phone Call-Brief
Exercise/Rehab				
Heat/Cold Therapy				
Supplements	99372 Phone Call-Intermediate	99373 Phone Call-Lengthy	97750 Physical Performance test with Report	00001 No Charge Office Visit
Orthopedics				
Pillows				

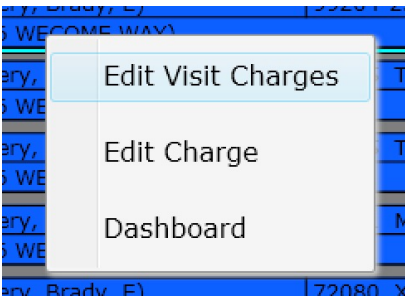
Cancel

3 **Code**
98942 - Manipulation 5 Regions Change



Billing – Edit Charge

Here is the Edit Visit Charges Dialog.



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Categories Smart Search Filter by Insurance Carrier Sort Charges by

Post Visit Charges and Diagnosis

Charges **Diagnosis** **Condition**

Charges ?

98941 Manipulation 3-4 Regions PRC: \$45.00 DISC: \$0.00 1 Units	↑ ↓
97014 Manual Therapy PRC: \$0.00 DISC: \$0.00 1 Units	↑ ↓
97012 Therapy-Traction/ Mechanical* PRC: \$20.00 DISC: \$0.00 1 Units	↑ ↓

■ Cash Charge ■ Claimable Charge ■ Care Plan

↑ ↓ ✕ ALL

Add From Charge Groups

Charges **Care Plan Charges**

Exam/Consult	500 New Patient Cash Visit	0000 Records Fee	99201-25 New Patient Problem Focused Examination	99202-25 New Patient Expanded Problem Focused Examination
Adjustment	99203-25 New Patient Detailed Examination	99204-25 New Patient Comprehensive Examination	99205-25 New Patient Comprehensive (High Complexity) Exam	99211-25 Established Patient Minimal Examination
Therapy	99212-25 Established Patient Problem Focused Exam	99213-25 Established Patient Expanded Exam	99214-25 Established Patient Detailed Exam	99371 Phone Call- Brief
Radiography	99372 Phone Call- Intermediate	99373 Phone Call- Lengthy	97750 Physical Performance test with Report	00001 No Charge Office Visit
Analgesics				
Electrotherapy				
Exercise/Rehab				
Heat/Cold Therapy				
Supplements				
Orthopedics				
Pillows				

Diagnosis Pointers Toggle Care Plan Toggle Insurance Claimable Change Price Discount by Amount Discount by Percent Taxed

Save Cancel

Front Desk Provider View Patient Flow **Tuesday, Dec 15, 2020 11:00 PM** **Dr. Brian Albery** Log Out KB

Activate Settings Go to Setting



Billing - Remittances

It is possible to view a charge's remittance (if it has one). Select the charge, then click "Remittances". This will open the dialog shown below.

Remittances

Claim Remittances for Charge

The charge 99212-25 Established Patient Problem Focused Exam dated 6/30/2020 was reconciled to the following remittances:

Aetna	Date: 06/30/2020
	Amount: \$120.00
	Issue #:
	Check #: 2345678

Open Remittance

OK

Next, select the remittance and click "Open Remittance". This will open the reconcile app showing the remittance the charge was reconciled on.

This is useful in instances where you want to bill a disputed charge to a patient. If the insurance says they will not cover the charge and you now want to bill it to the patient, you will need to "Unreconcile" the charge. This is accomplished by going into the remittance and clicking the "Unreconcile" button.

Unreconcile

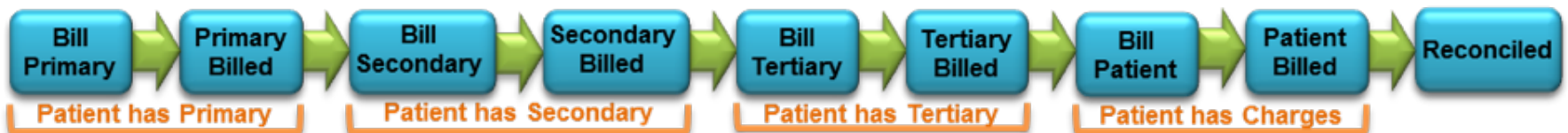


Billing - FAQs

How are charges submitted in ChiroSpring?

Charges go through an exact billing sequence as shown below.

- If Insurance
 - Bill to Primary
 - Primary Billed
 - Bill to Secondary (if have secondary)
 - Secondary Billed
 - Bill to Tertiary (if have tertiary)
 - Tertiary Billed
 - Bill to Patient
 - Patient Billed
 - Reconciled
- If No Insurance
 - Bill Patient
 - Patient Billed
 - Reconciled





Billing - FAQs

How are charges re-submitted in ChiroSpring?

There are two ways to re-submit a charge in ChiroSpring



1. Visits Tile

- Select the visit containing the charge you want to re-bill
- Select the “Change” button on the Insurance Case (pictured here)
- Select a new insurance case (or leave the same if you want)
- Select the charge from the list below (pictured bottom right here)
- Click the “Change Billing State” button. A dialog will open asking you what billing state you would like to change to.
- Charges marked Bill Primary, Bill Secondary or Bill Tertiary will automatically appear in the Claims app ready to submit to insurance



Insurance Update Charge Estimate Change

Case Name Blue Cross and Blue Shield
Case Number
Primary Medicare
Secondary Wellmark Blue Cross & Blue Shield
Tertiary

Change Insurance Case

Insurance Case
● BCBS [Nov 20, 2020 to present]

If the insurance case you wish to select is not listed, ensure the insurance cases's start and end date contain this visit's date.

Billing State for Claimable (Insurance) Charges

Description	Hold	Pri. Paid	Sec. Paid	Ter. Paid	Ins. Owes	Billing State
98941 Manipulation 3-4 Regions	No	0.00	0.00	0.00		Bill Pri.
97110 Therapy-Therapeutic Exercise	No	0.00	0.00	0.00		Bill Pri.

Change Billing State

Save Cancel



Billing - FAQs

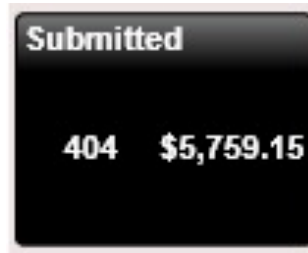
How are charges re-submitted in ChiroSpring?

There are two ways to re-submit a charge in ChiroSpring



2. Billing app

- Select the Submitted Folder on the left
- Select the charge you wish to re-bill
- Select the Billing State below (Bill Pri, Bill Sec or Bill Ter)
- Save Changes
- Your visit will now be in the Claims app ready to Print or Export to insurance



You can also select one (or multiple charges) and select “Re-Bill Charge(s)” followed by clicking Save Changes.



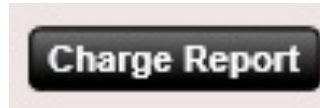


Billing - FAQs

How do I bill an attorney?

ChiroSpring makes it simple to bill attorneys.

1. The first step is to create an insurance carrier for your attorney. **Although an attorney is not REALLY an insurance carrier you must set it up this way.**
2. Next create an insurance case for your patient and select the “Attorney Insurance Carrier” as the primary insurance.
3. MAKE SURE you put “Charges On Hold = Yes” (that is if you do not want to bill the charges to insurance).
4. After you have created charges for your patient you can at anytime print the “Charge Report”. This report is located in the Insurance Case Tile in the patient dashboard.



After you bill the attorney by sending them the “Charge Report” you will eventually receive a check. **You MUST reconcile this check!** An attorney check is different than a standard insurance remittance (as an attorney does not specify amount allowed, etc.) Therefore, you will need to enter the full amount allowed and full amount paid for every charge until you have exhausted the attorney check. If anything remains (e.g. subsequent charges), you will need to write them off.

However, we have a special feature for reconciling an ENTIRE attorney check in ONE CLICK. More on this later.



Billing - FAQs

How do I bill an attorney?

Below is an example of an Insurance Case showing an attorney selected as the “Insurance Carrier”.

Insurance Cases - Chad Thompson THOCH000 DOB: 07/30/1966 Age: 49 INS: Blue Cross/Geico

Open Cases

Case Name	Case No.	Start Date	End Date	Hold Charges
Attorney - John Smith		8/27/2014		Yes

Case Description

Condition

Related To: 10
None

Place State: 10b

Claim Codes: 10d

Attorney

Name: John Smith
Phone: 555-555-5555
Fax: 555-444-3333
Email: johnsmith@gmail.com
Address: 123 Madison Ave.

Primary Insurance

Carrier	Insurance Phone	Copay
Attorney - John Smith	800-665-8866	\$0.00

Plan Name my plan
Insured's ID # 345678976
Policy Group # 1234567890
Employer/School Sewer Sucking Services
Claim Type Export
Relation to Insured Self
Coinurance 0%
Deductible None

Charge Report

Primary Insurance is “Attorney – John Smith” in this example. Although an attorney is not an “insurance” to bill an attorney in ChiroSpring you will need to create an insurance carrier with the attorney’s information.

When you are ready to submit charges to the attorney print the “Charge Report”.



Billing - FAQs

How do I bill an attorney?

Below is an example of a charge report generated using the “charge report” button inside the Insurance Case Tile. You can customize which options you want displayed on this report to suite your attorney. 😊

Spinal Care Chiropractic

234 Western

Davenport, IA 52806

563-545-4565

Insurance Case Charge Report

For: Chad Thompson

Dates: 8/27/2014 to 8/28/2014

Insured ID: 345345345

Group:

Attorney - John Smith

5453 Law Ave

Davenport, IA 78878

Date	Description	Units	Amount Charged
08/27/14	98941 - Manipulation 3-4 Regions	1	40.00
08/27/14	97014 - Therapy-Muscle Stimulation	2	40.00
08/28/14	98941 - Manipulation 3-4 Regions	1	40.00
08/28/14	97014 - Therapy-Muscle Stimulation	2	40.00
08/28/14	98941 - Manipulation 3-4 Regions	1	40.00
08/28/14	97014 - Therapy-Muscle Stimulation	2	40.00
08/28/14	99213-25 - Established Patient Expanded Exam	1	60.00
08/28/14	99372 - Phone Call-Intermediate	1	20.00
Totals:			320.00



Billing - FAQs

How do I change an insurance case after a charge has been billed and then re-bill that charge?

First examine the patient's current insurance case. Determine if you will be changing a primary insurance, secondary insurance or both.

No matter what, if the patient's insurance has changed, first close the existing insurance case. Then create a new insurance case. Add the primary (and secondary if applicable) insurance. Ensure you select a STARTING DATE for the insurance case that is OLDER than any charges you want to BILL. Set the new insurance case as default.

Next go to the Visit's Tile. Click on the visit you want to re-bill with the new insurance case. You will see that visit's insurance information in the box shown below. Now let's change the insurance case for this visit by clicking the "Change" button.

A screenshot of a software interface showing insurance information. At the top, there is a dark grey header with the word "Insurance" in white. To the right of the header are two buttons: "Update Charge Estimate" and "Change", both in white text on a dark grey background. Below the header is a light grey rounded rectangle containing the following text:

Case Name	Blue Cross/Medicaid
Case Number	
Primary	Blue Cross & Blue Shield
Secondary	Medicaid
Tertiary	



Billing - FAQs

How do I change an insurance case after a charge has been billed and then re-bill that charge?

After clicking “Change” you will see a dialog open allowing you to change the insurance case. Select your new insurance case.

Change Insurance Case

Insurance Case

- BCBS [Nov 20, 2020 to present]
- BCBS [Nov 20, 2020 to present]
- Cash [May 30, 2018 to present]
- BCBS-Massage [Nov 23, 2020 to present]

If the insurance case you wish to select is not listed, ensure the insurance cases's start and end date contain this visit's date.

Table (Insurance) Charges

			Paid	Ter. Paid	Ins. Owes	Billing State
98941	Manipulation 3-4 Regions	No	0.00	0.00	0.00	Bill Pri.
97110	Therapy-Therapeutic Exercise	No	0.00	0.00	0.00	Bill Pri.

Change Billing State

Save **Cancel**



Billing - FAQs

How do I change an insurance case after a charge has been billed and then re-bill that charge?

After selecting the new insurance case you can now select each charge and click the “Change Billing State” button.



Select the billing state you want. For example, if you want to re-bill primary under this new insurance case select “Bill Primary”. Repeat this step for all charges in the insurance case.

Select Billing State

Help

Primary Insurance	Secondary Insurance	Tertiary Insurance	Reconciled
Bill Primary	Bill Secondary	Bill Tertiary	
Mark Primary Billed	Mark Secondary Billed	Mark Tertiary Billed	Mark Reconciled

Cancel



Billing - FAQs

How can I change billing state colors?

You can change the billing state colors in Settings/Practice Info/Charge Options. This will make it easy to identify the billing states of your charges.

Billing Colors



Billing State Colors

Bill Primary **Preview Text**

Primary Billed **Preview Text**

Bill Secondary **Preview Text**

Secondary Billed **Preview Text**

Bill Tertiary **Preview Text**

Tertiary Billed **Preview Text**

Cash **Preview Text**

Reconciled **Preview Text**

Not Signed **Preview Text**

#Claims





Claims

The claims app is where you go to submit insurance claims either electronically or by printing directly onto a CMS-1500 HCFA form. Electronic claims are found within the “Export Claims” tab and print claims are found within the “Print Claims” tab.



ChiroSpring supports two electronic formats:

- CMS 1500 Text File
- EDI File (in beta)

If you use the CMS 1500 Text File option, you will need to notify your clearinghouse and submit around 10-15 charges. They will MAP this file. Once mapped you can continue submitting this file never needing it mapped again.

If you are using EDI see the Claims-EDI pages for more information.

The screenshot shows the 'Claims' application interface. At the top, there are tabs for 'Export Claims' and 'Print Claims'. Below the tabs, there are several filter and action buttons: 'Export Claim File Option' (set to 'Single EDI 837 file per claim'), 'Claim Form Type' (set to 'CMS-1500 02/12 as Text Image'), 'Filter by Patient Name', and 'Filter by Insurance Carrier'. There are also checkboxes for 'Force single date of service per HCFA' and 'Force single rendering provider per HCFA'. A 'Claim Count' box shows 56 claims. At the bottom, there are buttons for 'Check All', 'Clear All', 'View Highlighted', 'Print Highlighted', and 'Process Checked Claims'. The main area is a table with columns: Export, Processed, Status, Insurance Carrier, Patient, From, To, Charges, and Ins. Owes. The table contains 10 rows of claim data.

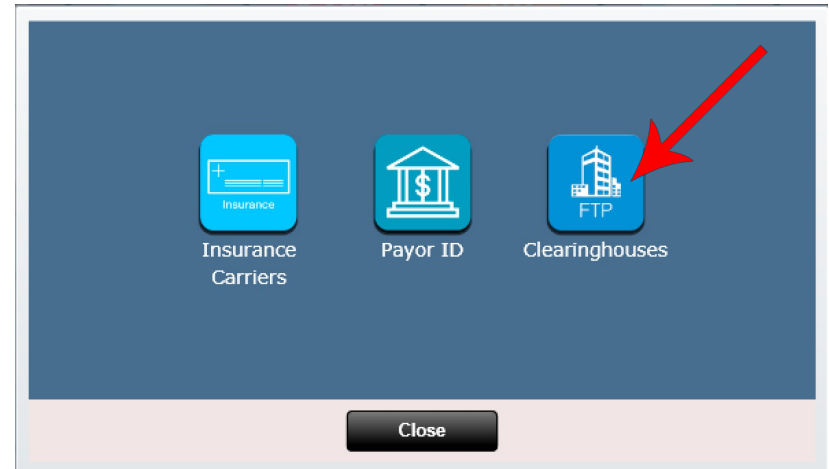
Export	Processed	Status	Insurance Carrier	Patient	From	To	Charges	Ins. Owes
<input checked="" type="checkbox"/>	No	Bill Pri.	3456 WECOME WAY	Albery, Brady, E	Dec 17, 2020	Dec 17, 2020	2	\$60.00
<input checked="" type="checkbox"/>	No	Bill Pri.	3456 WECOME WAY	Albery, Brady, E	Dec 14, 2020	Dec 14, 2020	2	\$45.00
<input checked="" type="checkbox"/>	No	Bill Pri.	3456 WECOME WAY	Albery, Brady, E	Dec 9, 2020	Dec 9, 2020	1	\$20.00
<input checked="" type="checkbox"/>	No	Bill Pri.	Attorney - Scott Jones	Becker, Omar	Dec 4, 2020	Dec 4, 2020	2	\$10.00
<input checked="" type="checkbox"/>	No	Bill Pri.	3456 WECOME WAY	Albery, Brady, E	Dec 2, 2020	Dec 2, 2020	3	\$125.00
<input checked="" type="checkbox"/>	No	Bill Pri.	Attorney - Scott Jones	Becker, Omar	Dec 2, 2020	Dec 2, 2020	3	\$60.00
<input checked="" type="checkbox"/>	No	Bill Pri.	3456 WECOME WAY	Albery, Brady, E	Dec 2, 2020	Dec 2, 2020	2	\$60.00
<input checked="" type="checkbox"/>	No	Bill Pri.	Aetna	Albery, Brady, E	Nov 20, 2020	Nov 20, 2020	4	\$63.00
<input checked="" type="checkbox"/>	No	Bill Pri.	Aetna	Albery, Brady, E	Nov 17, 2020	Nov 17, 2020	2	\$67.50
<input checked="" type="checkbox"/>	No	Bill Pri.	Blue Cross & Blue Shield	Albery, Julian	Nov 6, 2020	Nov 6, 2020	3	\$14.00
<input checked="" type="checkbox"/>	No	Bill Pri.	Cigna	Smith, Sam	Aug 19, 2020	Aug 19, 2020	2	\$35.00

Claims

If you decide to use the EDI format you will want to setup your clearinghouse in Settings/Insurance/Clearinghouses. This provides the ability when submitting to use the FTP option which directly uploads your claims to your clearinghouse. This is an easier process and will save you time vs. the manual upload process.

We currently support the following clearinghouses

- Office Ally
- Etactics
- Waystar
- Smart Data Solutions
- Trizetto
- Infinedi
- BCBS-MI





Claims – Export – Manual Process

Export Claims

To submit a claim electronically, either check all of the claims or check only the claim you wish to submit. Then click the “Process Checked Claims” button. This will generate a .TXT file stored in your computer’s documents folder in a folder called “ChiroSpring Exported Claims.”

Process Checked Claims

In addition to exporting a claim, you can also view the claim or print the claim when directly within the “Export Claims” tab. To view a claim simply highlight it and then click the “View Highlighted” button below. This will display a full rendered HCFA form. To print a claim, simply highlight it and click the “Print Selected” button. This will print the claim and ALL OF IT’S GRAPHICS. Do not use this option to print to a blank HCFA.

View Highlighted

Print Highlighted

Note: When you view or print a claim via this mechanism, it will not remove the claim from the que. Claims are ONLY removed from the Export Claims que after checking them and then clicking the “Process Checked Claims” button.

Then, in the dialog that follows select “Mark as Billed”. Now when you close the Claims app and re-open your claims will be gone (this is of course because they have been marked as billed and are no longer set to bill).

Exporting claims...

The checked claims have been exported. The exported claim file(s) are located in the folder 'ChiroSpring Exported Claims' under the current user's My Documents folder.

To mark the exported claims as billed, choose 'Mark as Billed'; to leave the claims in their current bill state, choose 'Leave as Unbilled'.

Mark as Billed

Leave as Unbilled

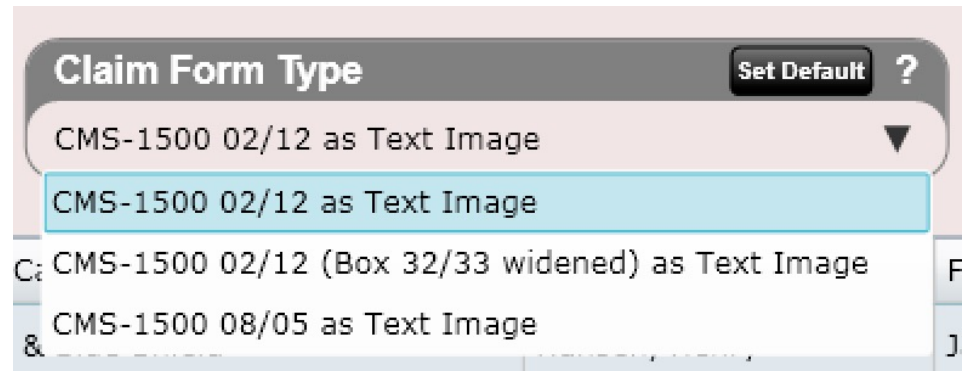
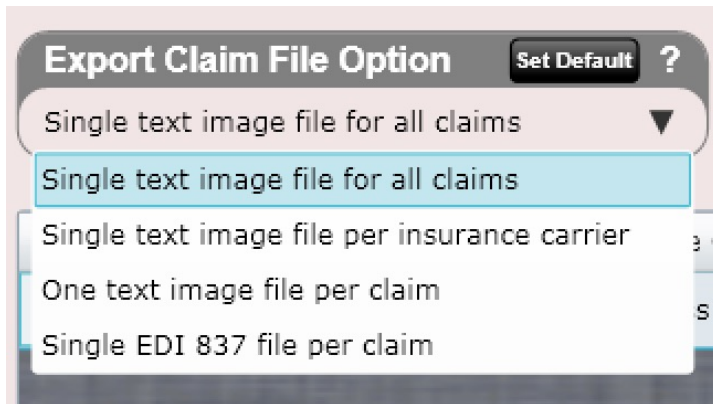


Claims – Export – Manual Process

At the top of the claims app when on the “Export Claims” tab are two drop down boxes. The first allows you to select which version of the file format you want. There are two versions which are:

- CMS 1500.TXT
- EDI 837 **(beta as of this writing but very robust so should be no issue using)**

The other drop down allows you to change which version of the .TXT file you want to use. Note 08/05 is old and kept only for legacy purposes.



There is also a Claim Count box that lists the number of claims currently in the Que.

As a reminder you will need to let the clearinghouse you use know which format you are sending and they will likely want you to send a bath of claims (usually around 10) to map the file.



Claims – View CMS-1500

Here is an example of viewing a claim.

HEALTH INSURANCE CLAIM FORM

State Farm
1224 Meadow Dr
Davenport, IA 78877

APPROVED BY NATIONAL UNIFORM CLAIM COMMITTEE (NUCC) 02/12

Page 01 of 01

<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> PICA		PICA <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
1. MEDICARE <input type="checkbox"/> MEDICAID <input type="checkbox"/> TRICARE <input type="checkbox"/> CHAMPVA <input type="checkbox"/> GROUP HEALTH PLAN <input type="checkbox"/> FECA BLK LUNG <input type="checkbox"/> OTHER <input checked="" type="checkbox"/>		1a. INSURED'S I.D. NUMBER (For Program in Item 1) 8978987987	
2. PATIENT'S NAME (Last Name, First Name, Middle Initial) Thompson, Randy		3. PATIENT'S BIRTH DATE MM | DD | YY 12 | 11 | 1981 M <input checked="" type="checkbox"/> F <input type="checkbox"/>	
5. PATIENT'S ADDRESS (No., Street) 123 Meadow Dr CITY: Davenport STATE: IA		4. INSURED'S NAME (Last Name, First Name, Middle Initial) Thompson, Randy	
6. PATIENT RELATIONSHIP TO INSURED Self <input checked="" type="checkbox"/> Spouse <input type="checkbox"/> Child <input type="checkbox"/> Other <input type="checkbox"/>		7. INSURED'S ADDRESS (No., Street) 123 Meadow Dr CITY: Davenport STATE: IA	
8. RESERVED FOR NUCC USE		8. RESERVED FOR NUCC USE	
9. OTHER INSURED'S NAME (Last Name, Middle Initial)		10. IS PATIENT'S CONDITION RELATED TO:	
a. OTHER INSURED'S POLICY OR GROUP NUMBER		a. EMPLOYMENT? (Current or Previous) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
b. RESERVED FOR NUCC USE		b. AUTO ACCIDENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO PLACE (State)	
c. RESERVED FOR NUCC USE		c. OTHER ACCIDENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
d. INSURANCE PLAN NAME OR PROGRAM NAME		10d. CLAIM CODES (Designated by NUCC)	
11. INSURED'S POLICY GROUP OR FECA NUMBER		11. INSURED'S POLICY GROUP OR FECA NUMBER	
a. INSURED'S DATE OF BIRTH MM | DD | YY 12 | 11 | 1981 M <input checked="" type="checkbox"/> F <input type="checkbox"/>		a. INSURED'S DATE OF BIRTH MM | DD | YY 12 | 11 | 1981 M <input checked="" type="checkbox"/> F <input type="checkbox"/>	
b. RESERVED FOR NUCC USE		b. OTHER CLAIM ID (Designated by NUCC)	
c. RESERVED FOR NUCC USE		c. OTHER CLAIM ID (Designated by NUCC)	
d. INSURANCE PLAN NAME OR PROGRAM NAME State Farm		d. IS THERE ANOTHER HEALTH BENEFIT PLAN? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <i>If yes, complete items 9, 9a, and 9d</i>	
READ BACK OF FORM BEFORE COMPLETING & SIGNING THIS FORM			
12. PATIENT'S OR AUTHORIZED PERSON'S SIGNATURE I authorize the release of any medical or other information necessary to process this claim. I also request payment of government benefits either to myself or to the party who accepts assignment below. SIGNED Signature on File DATE 05/18/2014		13. INSURED'S OR AUTHORIZED PERSON'S SIGNATURE I authorize payment of medical benefits to the undersigned physician or supplier for services described below. SIGNED Signature on File	
14. DATE OF CURRENT ILLNESS, INJURY, or PREGNANCY (LMP) MM | DD | YY 03 | 17 | 2014 QUAL		15. OTHER DATE MM | DD | YY QUAL	
17. NAME OF REFERRING PROVIDER OR OTHER SOURCE		17a. NPI	
19. ADDITIONAL CLAIM INFORMATION (Designated by NUCC)		18. HOSPITALIZATION DATES RELATED TO CURRENT SERVICES FROM MM | DD | YY TO MM | DD | YY	
20. OUTSIDE LAB?		\$ CHARGES	

Close
Print



Claims – Export – Manual Process

Again, after you have checked the claims, you wish to export and then clicked the “Process Checked Claims” button, a dialog box will appear. It tells you that the claims have been generated and an electronic file has been created in your documents folder within a folder called “ChiroSpring Exported Claims.” To mark that all your claims have been billed select “Mark as Billed”. If you ever want the option to process a claim but NOT mark it as billed, then select the “Leave as Unbilled” button in this dialog (see below).

After this dialog closes you will STILL see all of your claims in the Claims app. This is by design. This allows you to generate them again if for some reason there was an issue generating the file. After you close and re-open the Claims app, the app will refresh, and any previously generated claims will no longer be shown. If you wish to track them down, they can be found within the “Submitted” folder inside the Billing app.

Exporting claims...

The checked claims have been exported. The exported claim file(s) are located in the folder 'ChiroSpring Exported Claims' under the current user's My Documents folder.

To mark the exported claims as billed, choose 'Mark as Billed'; to leave the claims in their current bill state, choose 'Leave as Unbilled'.

Mark as Billed

Leave as Unbilled



Claims – Export

Accept Assignment = No

If you have an insurance carrier setup as Accept Assignment = No, then when you process these claims, you will see an orange button. This button, “Mark as Reconciled” is the preferred option to select (as indicated in the dialog below).

Why?

Well, if you are submitting the claims on behalf of the patient (and the patient has already paid you as you collect in full up front (e.g. 100% co-insurance) then once you SUBMIT the claims you do not want them “Outstanding”. Thus, in a single click you can move their status to Reconciled. SUPER AWESOME!

Exporting claims...

There are 5 charge(s) that are marked 'Do Not Accept Assignment' and patient has been charged the full amount. To mark these charges as billed choose 'Mark as Billed', to leave the charges in their current billing state choose 'Leave as Unbilled', or to mark them as reconciled choose 'Mark as Reconciled' (recommended).

The checked claims have been exported. The exported claim file(s) are located in the folder 'ChiroSpring Exported Claims' under the current user's My Documents folder.

Mark as Billed **Leave as Unbilled** **Mark as Reconciled**











Claims – Export – Manual Process

Now that you have generated your electronic file you can submit this file to the clearinghouse of your choice for processing. It's that easy!

We like to recommend Office Ally as our clearinghouse of choice as they are inexpensive. We also recommend Etactics and WayStar.

Exported claims are in the format **Claim_YYYY-MM-DD_HHMM**(am or pm)

These specific (down to the minute) time stamps will ensure you never overwrite an already existing claim and also helps you find the exact claim you are looking for.

-  Claim_2013-07-18_All.txt
-  Claim_2013-07-24_0835AM_All.txt
-  Claim_2013-07-25_All.txt
-  Claim_2013-07-26_All.txt
-  Claim_2013-07-30_All.txt
-  Claim_2013-08-13_All.txt
-  Claim_2013-08-14-1001AM_All.txt
-  Claim_2013-08-22-0214AM_All.txt



Print Claims

Claims - Print

To print your claims, follow these steps

- First ensure you have set up your proper alignment. To do this use the “Form Settings” app found within settings.



Form Settings

- Check the claims you wish to print (via the “Print Claim” check box).
- The claims may be printed by single date of service, and/or single rendering provider. See checkboxes below.

Force single date of service per HCFA

Force single rendering provider per HCFA

- Click the “Process Checked Claims” button. A dialog box will open asking if the claims all printed successfully. If you need to re-print a claim simply highlight it and click the “Print Selected” button below.

Process Checked Claims

- After all claims have printed successfully you can now close the Claims app. The next time you open the Claims app those printed claims will no longer appear.

Print Claim	Print Remittance	Processed	Status	Insurance Provider ▲	Patient	From ▲	To	Charge Count	Balance
<input checked="" type="checkbox"/>	<input type="checkbox"/>	No	Bill Pri.	Wellmark Blue Cross Blue Shield of Iowa	Wyatt, Angela	Aug 8, 2013	Aug 8, 2013	2	\$110.00



Print Claims

Claims - Print

After printing your claims to the HCFA forms, ensure they all printed correctly. If you need to print one, again, simply select it and then click the “Print” button.

Next click the “Mark as Billed” button to indicate you have billed these claims successfully.

Now when you close out of the Claims app the app will refresh and all printed claims will be gone from the que.

Printing Completed

The checked claims have been sent to the printer. If any claims did not print successfully, simply re-select one claim and print individually or check multiple claims and select 'Process Checked Claims' to submit a batch of claims again.

To mark the printed claims as billed, choose 'Mark as Billed'; to leave the claims in their current bill state, choose 'Leave as Unbilled'.

Mark as Billed **Leave as Unbilled**

Please be patient. It takes time to Print insurance claims. Your computer will seem “frozen” until all claims have been printed.



Claims – Creation Rules

When the software generates HCFA's it tries to combine visits onto a single HCFA if possible. Here are the rules that must be followed in order for multiple visit dates to exist on a single HCFA.

In order to be on the same claim, the following information must be identical:

1. Facility address of rendering provider
2. Current illness date (HICF Box 14)
3. Current Illness date qualifier (HICF Box 14)
4. Other date (HICF Box 15)
5. Other date qualifier (HICF Box 15)
6. Unable to work dates (HICF Box 16)
7. Referring provider (HICF Box 17)
8. Hospitalization dates (HICF Box 18)
9. Additional claim information (HICF Box 19)
10. Medicaid Resubmit Code and original reference number (HICF Box 22)
11. Prior Authorization Number (HICF Box 23)
12. Patient
13. Insurance case
14. Billing status of charge
15. SOAP note signing provider
16. Diagnosis codes in exact same sequence



Claims – EDI & FTP Upload

Here is the Clearinghouse app. This is where you setup the FTP credentials for your clearinghouse if you want to directly transmit your claims without needing to manually upload a file.

Clearinghouses CPT copyright 2019 American Medical Association. All rights reserved.

Clearinghouses	Details
	Name *BCBS-MI
*BCBS-MI	Receiver ID 382069753
*Infinedi	Sender ID ? BCBS Will Provide You - User Specific
*Office Ally	FTP Host Name 167.242.55.40
*TriZetto	FTP Host Port 22
*Waystar	FTP Username BCBS Will Provide You - User Specific
	FTP Password BCBS Will Provide You - User Specific
	FTP Upload Folder Name .
	FTP File Extension .txt
	Include Secondary Info When Sending Primary Claim No ▼

Close Add New Delete Cancel Save



Claims - EDI

Here is the specific EDI tab inside the Insurance Carriers app to pay attention to. Ensure you have the correct settings based on your clearinghouse and your insurance carrier.

Settings CPT copyright 2019 American Medical Association. All rights reserved.

Insurance Carriers

Insurance Carriers

- blue cross - i
- Blue Cross - Iowa**
Blue Cross Blue Shield
314 Main St.

Details

AddressEDI OptionsHCFA (1)HCFA (2)

These selections apply to EDI claims only. Other tabs apply to both EDI and CMS-1500 file types.

Claim Filing Indicator ?
Blue Cross/Blue Shield - (BL) ▼

Zip Code Format
9 digits ▼

Receiver Name

Receiver ID

Max Diagnosis Pointers
12 ▼

CloseAdd NewDeleteCancelSaveDuplicate Insurance CarrierEdit Allowed Amounts



Claims - EDI

To submit EDI claims ensure the EDI option is selected. Then select Process Checked Claims.

Claims CPT copyright 2019 American Medical Association. All rights reserved.

[Export Claims](#) [Print Claims](#)

Export Claim File Option [Set Default](#) **Claim Form Type** [Set Default](#) ? Force single date of service per HCFA **Claim Count** 3
 Force single rendering provider per HCFA
Options apply to CMS 1500 text file not EDI file

Single EDI 837 file per claim CMS-1500 02/12 as Text Image

EDI File is in Beta - Use With Consideration

Export	Processed	Status	Insurance Carrier	Patient	From	To	Charges	Ins. Owes	
<input checked="" type="checkbox"/>	No	Bill Pri.	BCBS	Albery, Brady, M	Jan 20, 2020	Jan 20, 2020	2	\$56.25	
<input checked="" type="checkbox"/>	No	Bill Sec.	Aetna	Albery, Brady, M	Jan 20, 2020	Jan 20, 2020	1	\$22.50	
<input checked="" type="checkbox"/>	No	Bill Pri.	Blue Cross & Blue Shield	Andrews, Jane	Jan 15, 2020	Jan 15, 2020	1	\$0.00	

[Check All](#) [Clear All](#) [View Highlighted](#) [Print Highlighted](#) [Process Checked Claims](#)

[Close](#) [Dock](#)



Claims - EDI

Next select if you are doing Manual Upload (the software will generate a file which you then upload manually to the clearinghouse) or FTP Upload.

The screenshot shows a software interface for managing claims. At the top, there are buttons for 'Export Claims' and 'Print Claims'. Below these, there are settings for 'Export Claim File Option' (set to 'Single EDI 837 file per claim') and 'Claim Form Type' (set to 'CMS-1500 02/12 as Text Image'). There are also checkboxes for 'Force single date of service per HCFA' and 'Force single rendering provider per HCFA'. A 'Claim Count' badge shows 56. Below the settings are filters for 'Patient Name' and 'Insurance Carrier'. A table of claims is visible in the background, with columns for 'Export', 'Processed', 'Status', 'Charges', and 'Ins. Owed'. An 'Exporting claims...' dialog box is open in the foreground, prompting the user to 'Select the method to upload the generated EDI claim files to the clearinghouse.' The dialog has a 'Select Clearinghouse' dropdown menu with '*Waystar' selected. There are three radio button options: 'FTP Upload' (selected), 'Manual Upload', and 'Export JSON data'. There are also 'Save Default', 'OK', and 'Cancel' buttons.

Exporting claims...

Loading needed data...

Select the method to upload the generated EDI claim files to the clearinghouse.

Select Clearinghouse

*Waystar

FTP Upload
With this method the files will be electronically and automatically uploaded to the clearinghouse that is selected through FTP. Clearinghouses can be added by going to the Clearinghouses app in Settings.

Manual Upload
With this method the files will be saved to your computer. Using your web browser, navigate to the clearinghouse's website and follow their instructions to upload the files.

Export JSON data

Save Default OK Cancel

Check All Clear All View Highlighted Print Highlighted Process Checked Claims

Close Dock Load More Claims

Front Desk Provider View Patient Flow Thursday, Dec 17, 2020 10:36 PM Dr. Brian Albery Log Out KB

#Reconcile



Reconcile



Reconcile

CPT copyright 2013 American Medical Association. All rights reserved.

Claim Remittance

Select

Click Select to enter a new remittance or edit an existing.

Selected Patient

Recent Patients

?

Rucus Anderson
ANDRU000 02/24/1984

Tom Andresen
ANDTO000 08/06/1984

harry foot
FOOHA000 12/18/1922

Henry Gase
GASHE000 01/05/1982

William Gates

Reconciled Patients

Date	Code - Description			Units	Billing State (Ins. Carrier)			Amt Charged
Allowed	Pri. Payment	Sec. Payment	Ter. Payment	Disputed	Amt Disputed	Writeoff	Amt to Sec/Ter	
Ins. Savings	Pri. Paid	Sec. Paid	Ter. Paid	Copay	Co-ins.	Deduct.	Ins. Owes	
Notes								

Only Show Charges on Remittance

Issue Amount Remaining

\$0.00

Close

Dock

Print

Load Reconciled Charges

Reconcile Charge

Reconcile Insurance Case

Finish Remittance



You Must Reconcile!!!

IMPORTANT POINT. YOU MUST RECONCILE! WHEN YOU RECEIVE CHECKS FROM INSURANCE OR ATTORNEYS YOU MUST RECONCILE THESE CHECKS. HERE IS WHY:

1. If you do not reconcile you will have “messy” books. Patient ledgers may not accurately reflect patient copays, co-ins or deductibles.
2. If you do not reconcile your “Billing app” will have a massive number of charges in the “Submitted” folder. Remember, the Billing app by design is there to show you charges that have NOT BEEN PAID. If you are not reconciling, your Billing app is also not accurate, and you will not know what charges you have been paid on.
3. If you do not reconcile your insurance accounts receivable will grow and grow and grow. And obviously it will not be accurate.
4. If you do not reconcile and charges are not covered by insurance, how will you notate this? Reconciling is the only way to mark the charge as denied (which is indicated with a “*” on the patient ledger. Charges marked denied are immediately the patient’s responsibility.

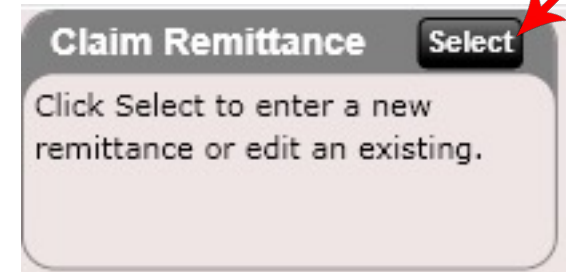
Reconcile



ChiroSpring's Reconcile app has these amazing features

1. Reconcile every patient on a claim remittance all from one screen. This makes the reconcile process fast and efficient.
2. Make no mistakes. ChiroSpring ensures all charges balance and furthermore ensures all charges on a claim remittance balance against the original check amount.
3. Dispute a charge directly during the reconciling process and even write notes on the charge to help keep track of the dispute process and what needs to be done.
4. Tell the software what to do with remaining balances (e.g. bill secondary or mark secondary as already billed)
5. Record a charge as denied and make the charge the patient's responsibility.
6. Mark a patient's deductible as met while reconciling a charge. This is a huge time saver and helps keep your cash register calculations accurate.

To get started click the "Select" button at the top of the screen. This will open the window shown to the right.





Reconcile

At the top of the claim remittance dialog box are two tabs (Unfinished Remittances and Finished Remittances). This allows you to go back at any time and view or edit old remittances. Also, because ChiroSpring has the ability to view and print the remittance into a report, you can always view or print every single payment entered for the remittance you are looking at.



It's great knowing that ChiroSpring will forever keep every remittance on file.

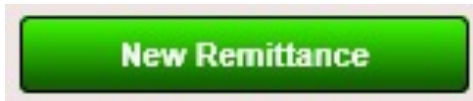




Reconcile

Here you can see a list of any unfinished claim remittance. As you can see we have several unfinished remittances from Blue Cross and Blue Shield.

To create a new remittance click the “New Remittance” button below. This will launch a dialog prompting you for the appropriate information.



Next select the remittance type. **As of this writing the Electronic Remittance (ERA) works but is in beta. Use with consideration. It is working very well so there should be no issues.**

Select the remittance type

Paper Remittance

Electronic Remittance

ERA Feature is in Beta

The screenshot shows a software interface for reconciling remittances. At the top, there are two tabs: "Unfinished Remittances" (selected) and "Finished Remittances". Below the tabs is a list of remittance entries. Each entry includes the provider name, issue date, amount, issue number, and check number. At the bottom of the interface, there are several buttons: "Reconcile Remittance", "Edit Remittance", "New Remittance" (highlighted with a red arrow), and "Delete Remittance". A "Close" button is also present at the bottom center.

Provider	Issue Date	Amount	Issue #	Check #
Blue Cross & Blue Shield	08/20/2018	\$450.00	23456	34567
BCBS	08/20/2018	\$550.00	34567	5678
Blue Cross & Blue Shield	07/23/2018	\$420.00	4567	345
Blue Cross & Blue Shield	07/20/2018	\$450.00	3456	23456
Blue Cross & Blue Shield	05/31/2018	\$180.00	345	2345
United Health Care	05/30/2018	\$10.00		

Reconcile



Once the dialog opens, enter the following information:

- **Insurance Payer** - This is who wrote the check
(if your payer list is blank you will need to click “Add Payer”)
- **Issue Number** – This number is sometimes included on claim remittances (optional)
- **Issue Date** - Date of check (required)
- **Check Number** – The check number (optional)
- **Issue Amount** – Entire dollar amount of check
- **Payment Type** – Check or Credit (e.g. direct deposit)
- **Payment Date** – Date you are entering the payment. **This date is used to create reports associated with insurance payments.**
- **Notes** – Write general notes for the remittance
- **Is Bonus Payment** – For adding bonus payments. For example, Medicare sometimes sends you a single payment with small bonus payments and includes a remittance with these charges. These charges are often already reconciled. Select “Yes” to enter this remittance in as a bonus payment.
- **Bonus Start/End Date** – If entering in a bonus payment select the oldest date (start date) and newest date (end date) for the charges on the remittance. They are often not in order so you may need to look hard to find this information.

Reconcile Dialog

A screenshot of a software dialog box titled "Reconcile Dialog". The form is divided into several sections. At the top left is the "Insurance Payer" section with a dropdown menu showing "BCBS" and buttons for "Add Payer" and "Edit Payer List". Below this are fields for "Issue Number" (34567), "Issue Date" (8/20/2018), "Check Number" (5678), and "Issue Amount" (550.00). The "Payment Type" is set to "Check" and "Payment Date" is 8/20/2018. A "Notes" text area is below these. Further down are "PI Case" (No) and "Is Bonus Payment" (No) dropdowns, followed by "Bonus Start Date" and "Bonus End Date" fields. At the bottom left are "Reconcile To Charges" (Yes) and "Created By" (Henry Hansen) fields, and an "Updated By" field (Henry Hansen). On the right side, there are two lists: "Selected Carriers" and "Available Carriers". The "Selected Carriers" list includes "BCBS" with address "1234 Prospect Way, Davenport, IA 52748" and "Blue Cross & Blue Shield" with address "1234 Main St, Davenport, IA 87878". The "Available Carriers" list includes "123 Main St, Anytown, IA 99999" and "123 Main St, Anytown, IA 99999". Buttons for "Remove Selected" and "Copy From Previous" are between the lists. At the bottom right are "OK" and "Cancel" buttons.

Reconcile



- **Reconcile to Charges** – Always YES unless you are entering in a bonus payment that **does not have charges associated with it**. This is extremely RARE but there are times when an insurance company sends you a bonus payment and there is no remittance or associated charges to reconcile against.
- **Created By** – The user who created the remittance (auto populated)
Updated By – The last user who updated the remittance (auto populated)
- **Select Carriers** – Select one or more insurance carriers that are associated with the check (99% of the time the insurance carrier is the same as the insurance payer. Some cases there will be two or more insurance carriers associated with the check written by the insurance payer.

When you have entered in all of the information for your remittance select “Ok”.



Reconcile Dialog

The screenshot shows a 'Reconcile Dialog' form with the following fields and values:

- Insurance Payer:** BCBS
- Issue Number:** 34567
- Issue Date:** 8/20/2018
- Check Number:** 5678
- Issue Amount:** 550.00
- Payment Type:** Check
- Payment Date:** 8/20/2018
- Notes:** (Empty text area)
- PI Case:** No
- Is Bonus Payment:** No
- Bonus Start Date:** (Empty)
- Bonus End Date:** (Empty)
- Reconcile To Charges:** Yes
- Created By:** Henry Hansen
- Updated By:** Henry Hansen

On the right side, there are sections for **Selected Carriers** and **Available Carriers**. The 'Selected Carriers' section lists BCBS with address 1234 Prospect Way, Davenport, IA 52748, and Blue Cross & Blue Shield with address 1234 Main St, Davenport, IA 87878. The 'Available Carriers' section lists 123 Main St, Anytown, IA 99999. At the bottom right, there are 'Remove Selected' and 'Copy From Previous' buttons. A red arrow points to the 'OK' button at the bottom center of the dialog.

Power Tip: Click “Copy From Previous” to select the Carrier you used last time for the payer you are reconciling.

Reconcile



A closer look at the Reconcile Dialog.

Insurance Payer		Selected Carriers	
<input type="text" value="BCBS"/>		BCBS 1234 Prospect Way Davenport, IA 52748	
<input type="button" value="Add Payer"/>		<input type="button" value="Edit Payer List"/>	
Issue Number <input type="text" value="34567"/>	Issue Date <input type="text" value="8/20/2018"/> ▼ X	Blue Cross & Blue Shield 1234 Main St Davenport, IA 87878	
Check Number <input type="text" value="5678"/>	Issue Amount <input type="text" value="550.00"/>		
Payment Type <input type="text" value="Check"/> ▼	Payment Date ? <input type="text" value="8/20/2018"/> ▼ X		
Notes <div style="border: 1px solid gray; height: 40px;"></div>		<input type="button" value="Remove Selected"/> <input type="button" value="Copy From Previous"/>	
PI Case <input type="text" value="No"/> ▼	Is Bonus Payment <input type="text" value="No"/> ▼	Available Carriers	
Bonus Start Date <input type="text"/> ▼ X	Bonus End Date <input type="text"/> ▼ X	<div style="border: 1px solid gray; height: 100px;"></div>	
Reconcile To Charges ? <input type="text" value="Yes"/> ▼	Created By <input type="text" value="Henry Hansen"/>	123 Main St Anytown , IA 99999	
Updated By <input type="text" value="Henry Hansen"/>		123 Main St Anytown , IA 99999	
		<input type="button" value="Add Selected"/>	
		<input type="button" value="OK"/> <input type="button" value="Cancel"/>	



Reconcile

If a Payer is not present from your drop-down list, click “Add Payer” or “Edit Payer List”. This will allow you to add a new payer or edit an existing one.



Power Tip: A Payer is who issues the check. In most cases the payer and the insurance carrier will be the same. However, there are cases when the payer and insurance carrier are not the same. Or, in some cases there are two insurance carriers associated with one payer.

ChiroSpring supports all of these scenarios as you can select an unlimited number of insurance carriers and associate them with that pay3r for the remittance you are reconciling.

A screenshot of a software interface. On the left, a panel titled "Payers" contains a list of payer names: "Attorney - Scott Jones", "Blue Cross & Blue Shield", "Medicaid", and "Medicare". The first item is highlighted in cyan. Below the list is a "Close" button. On the right, a panel titled "Details" has a "Name" field with a red border. At the bottom of the interface are three buttons: "Add New" (grey), "Delete" (red), and "Save" (green).



Reconcile

After you have created a remittance, it will appear in the Unfinished Remittances tab.

When you are ready to start reconciling the remittance, select it (it will highlight), then press “Reconcile Remittance”.

If you wish to edit the remittance press “Edit Remittance”. This will open the “Create Remittance” screen allowing you to make any necessary changes.

Power Tip:

Double click the remittance to reconcile.

The screenshot displays a software interface for managing remittances. At the top, there are two tabs: "Unfinished Remittances" (active) and "Finished Remittances". Below the tabs is a list of remittance entries. The first entry, "Medicaid", is highlighted with a red border. A red arrow points from a text box to this entry. The text box contains the instruction: "Here is the remittance I just created. When it is highlighted select the 'Reconcile Remittance' button to continue." Another red arrow points from the bottom of the text box to the "Reconcile Remittance" button at the bottom of the screen. The list of remittances includes details such as Issue Date, Amount, Issue #, and Check #. At the bottom of the screen, there are four buttons: "Reconcile Remittance" (black), "Edit Remittance" (black), "New Remittance" (green), and "Delete Remittance" (red). A "Close" button is also present at the very bottom.

Remittance Name	Issue Date	Amount	Issue #	Check #
Medicaid	10/20/2015	\$1,000.00	63789	12345
Blue Cross & Blue Shield	10/12/2015	\$100.00		433
Blue Cross & Blue Shield	08/31/2015	\$100.00	4324324	32421321
Blue Cross & Blue Shield	08/28/2015	\$20.00		
Blue Cross & Blue Shield	08/26/2015	\$500.00		233455
Blue Cross & Blue Shield	04/22/2015	\$1,000.00	7987897	1234
Blue Cross & Blue Shield	04/01/2015			



Reconcile

After creating the Remittance and clicking the “Reconcile Remittance” button you will see the Reconcile Screen (shown below). The top of the screen shows the Claim Remittance you are reconciling, the issue date and the check amount (shown below). The bottom right corner of the screen has a box called “Issue Amount Remaining” (also shown below). This box shows the amount of the check remaining that you still need to reconcile. If the “Issue Amount Remaining” does not equal zero when you are done reconciling, you have made a mistake. **You cannot click “Finish” if the “Issue Amount Remaining” does not equal zero.**

There is also a “Recent Patients” list box. Use this box to search for the patients on your remittance.

When you have selected a patient, their name will appear in the “Selected Patient” box and their unreconciled charges will appear in the right pane.

Claim Remittance Select
Blue Cross and Blue Shield
05/12/2014 \$20.00

Issue Amount Remaining
\$20.00

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Claim Remittance Select
Payer: Blue Cross & Blue Shield
Payment Date: 04/24/2017
Issued Date: 04/24/2017
Check Amount: \$12.43

Selected Patient

Recent Patients ?

Anee	00AN001	DOB:	
Daniel Abraham	ABRDA000	DOB:	
John Abraham	ABRJO000	10/10/2000	
Eleanor Abram	ABREL000	03/10/1967	

Reconciled Patients

Cindy Nielson

Date	Code - Description				Units	Billing State (Ins. Carrier)		Amt Charged
Allowed	Pri. Payment	Sec. Payment	Ter. Payment	Disputed	Amt Disputed	Writeoff	Amt to Sec/Ter	
Ins. Savings	Pri. Paid	Sec. Paid	Ter. Paid	Copay	Co-ins.	Deduct.	Ins. Owes	
Notes								

Only Show Charges on Remittance

Issue Amount Remaining
\$0.00

Close Dock Print Load Reconciled Charges Reconcile Charge Reconcile Insurance Case Unreconcile All Finish Remittance ?



Reconcile

Power Tip: We have created a way to filter the Recent Patients list box by visit date. This can be beneficial when reconciling a remittance and you only want to see patients in this list box that were seen within the date range of the EOB remittance. To filter click the “triangle” icon. Select your date range. Your list is now filtered. Clicking the filter icon will un-filter the list if you want to revert it back to normal.

The screenshot displays a software interface with two main sections. On the left is a 'Recent Patients' list, and on the right is a 'Select Filter' dialog box.

Recent Patients List:

Name	ID	DOB
Kurt Anderson	100TE000	03/12/1990
Tom Andresen	ANDTO000	01/12/1990
Mark E Beason	123	04/20/1957
Odell K Beck	DEEJO000	08/11/2005
Curtis Bison		

Reconciled Patients List:

Kurt Anderson

Select Filter Dialog:

Select Visit Date Range

From: March, 2016 (11 selected)

To: March, 2016 (11 selected)

Buttons: OK, Cancel



Reconcile

After selecting your patient their unreconciled charges will appear in the right pane and the selected patient will appear in the Selected Patient box.

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Claim Remittance Select

Blue Cross & Blue Shield
Issued: 12/29/2015 \$50.00

Selected Patient

Randy Smith

Recent Patients ran ?

Randy Hewitt
HEWRA000 02/18/2007

Randy Smith
SMIRA000 08/01/1999

Reconciled Patients

	Date	Code - Description				Units	Billing State (Ins. Carrier)			Amt Charged
	Allowed	Pri. Payment	Sec. Payment	Ter. Payment	Disputed	Amt Disputed	Writeoff		Amt to Sec/Ter	
	Ins. Savings	Pri. Paid	Sec. Paid	Ter. Paid	Copay	Co-ins.	Deduct.		Ins. Owes	
Notes										
<input type="checkbox"/>	01/29/15	98941 - Manipulation 3-4 Regions				1	Pri. Billed (Blue Cross & Blue Sh			40.00
	32.50				No	0.00	0.00		0.00	
	7.50	0.00	0.00	0.00	20.00	0.00	0.00		12.50	
<input type="checkbox"/>	03/27/15	98941 - Manipulation 3-4 Regions				1	Pri. Billed (Blue Cross & Blue Sh			40.00
	32.50				No	0.00	0.00		0.00	
	7.50	0.00	0.00	0.00	20.00	0.00	0.00		12.50	
<input type="checkbox"/>	03/27/15	98943-51 - Manipulation Extra-Spinal				1	Pri. Billed (Blue Cross & Blue Sh			15.00
	15.00				No	0.00	0.00		0.00	
	0.00	0.00	0.00	0.00	0.00	0.00	0.00		15.00	
<input type="checkbox"/>	03/27/15	99212-25 - Established Patient Problem Focused				1	Pri. Billed (Blue Cross & Blue Sh			40.00
	40.00				No	0.00	0.00		0.00	
	0.00	0.00	0.00	0.00	0.00	0.00	0.00		40.00	
<input type="checkbox"/>	03/27/15	99214-25 - Established Patient Detailed Exam				1	Pri. Billed (Blue Cross & Blue Sh			75.00
	75.00				No	0.00	0.00		0.00	
	0.00	0.00	0.00	0.00	0.00	0.00	0.00		75.00	
<input type="checkbox"/>	03/27/15	98941 - Manipulation 3-4 Regions				1	Pri. Billed (Blue Cross & Blue Sh			40.00
	32.50				No	0.00	0.00		0.00	
	7.50	0.00	0.00	0.00	20.00	0.00	0.00		12.50	
<input type="checkbox"/>	03/27/15	98943-51 - Manipulation Extra-Spinal				1	Pri. Billed (Blue Cross & Blue Sh			15.00
	15.00				No	0.00	0.00		0.00	
	0.00	0.00	0.00	0.00	0.00	0.00	0.00		15.00	
<input type="checkbox"/>	03/27/15	97112-59-52-AT-25 - Therapy-Neuromuscular R				1	Pri. Billed (Blue Cross & Blue Sh			40.00
	40.00				No	0.00	0.00		0.00	
	0.00	0.00	0.00	0.00	0.00	0.00	0.00		40.00	
<input type="checkbox"/>	08/31/15	98941 - Manipulation 3-4 Regions				1	Pri. Billed (Blue Cross & Blue Sh			40.00
	32.50				No	0.00	0.00		0.00	
	7.50	0.00	0.00	0.00	20.00	0.00	0.00		12.50	

Only Show Charges on Remittance

Issue Amount Remaining

\$50.00

Close

Dock

Print

Load Reconciled Charges

Reconcile Charge

Reconcile Insurance Case

Finish Remittance



Reconcile

As mentioned, the right pane will show all of the selected patient's unreconciled charges. Each charge will show the following:

- Date
- Code – Description
- Units
- Billing State (Ins. Carrier)
- Amt Charged
- Allowed
- Pri. Payment
- Sec. Payment
- Ter. Payment
- Disputed
- Amt Disputed
- Writeoff
- Amt to Sec/Ter
- Ins. Savings (network savings)
- Pri. Paid
- Sec. Paid
- Ter. Paid
- Copay
- Co-ins
- Deduct.
- Denied Amount
- Amount Not Covered
- Ins. Owes
- Notes

To reconcile a charge, click on it. It will open the charge reconcile dialog allowing you to enter details from the claim remittance.

	Date	Code - Description			Units	Billing State (Ins. Carrier)			Amt Charged
	Allowed	Pri. Payment	Sec. Payment	Ter. Payment	Disputed	Amt Disputed	Writeoff	Amt to Sec/Ter	
	Ins. Savings	Pri. Paid	Sec. Paid	Ter. Paid	Copay	Co-ins.	Deduct.	Ins. Owes	
	Notes								
<input type="checkbox"/>	12/22/16	99214-25 - Established Patient Detailed Exam			1	Pri. Billed (Blue Cross/Blue Shie			75.00
	75.00				No	0.00	0.00	0.00	
	0.00	0.00	0.00	0.00	20.00	0.00	0.00	55.00	



Reconcile

After clicking the charge, you wish to reconcile the dialog below will open. The white fields are editable. Look at your remittance and copy the information from it to the appropriate white boxes.

Reconcile Charge

Charge Info		Primary Insurance		Secondary Insurance		Tertiary Insurance	
Billing State	Pri. Billed	Blue Cross & Blue Shield ID No. 898797					
Deductible	None						

Date	Code	Units	Plc of Svc	Amt Charged
03/13/18	98942 - Manipulation 5 Regions	2	11	30.00

Allowed	Pri. Payment	Sec. Payment	Ter. Payment	Copay	Coinsurance	Deductible	Denied Amt	Writeoff	Amt to Sec/Ter	Amt Disputed	Disputed?
30.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	No ▼

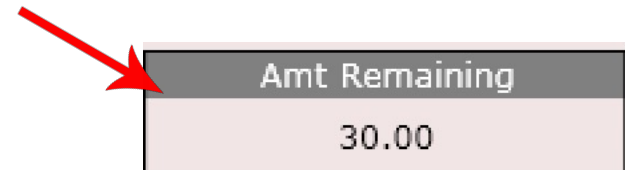
Ins. Savings	Pri. Paid	Sec. Paid	Ter. Paid	Ins. Owes	Amount Not Covered	Pt. Owes	Pt. Paid	Amt Remaining
0.00	0.00	0.00	0.00	30.00	0.00	0.00	0.00	30.00

Notes

Statement Note ?

Don't Claim Charge **Mark Deductible Met** **Finish Charge** **Cancel** **Help** **Unreconcile**

NOTE: Pay very close attention to the "Amt. Remaining" box in the lower right corner. This must equal ZERO or the charge does not balance and you have thus made an error.





Reconcile

The non-editable fields include:

- **Date** – the date of the charge
- **Code – Description** – the CPT code of the charge and description
- **Units** – number of units
- **Plc of Svc** – place of service (defaults to your clinic’s default value if not manually overridden)
- **Amt Charged** – the charge amount
- **Ins Savings** – this is the network savings and is automatically calculated. Network Savings = Amount Charged – Amount Allowed. This is sometimes referred to as “writeoff”. However, we have another field for writeoff (see next page).

Ins Savings and Writeoff are NOT the same!

- **Pri. Paid, Sec. Paid, Ter. Paid** – what the insurance has already paid from a previous reconciling
- **Pt. Owes** – This is what the patient still owes on the charge and will be automatically adjusted
- **Pt. Paid** – This is the amount the patient has already paid on this charge
- **Amt. Remaining** – this amount must balance to zero. If it does not, the charge does not balance, and you have made a mistake that needs to be corrected.

Date	Code		Units	Plc of Svc		Amt Charged					
12/22/16	98941 - Manipulation 3-4 Regions		1	11		40.00					
Allowed	Pri. Payment	Sec. Payment	Ter. Payment	Copay	Coinsurance	Deductible	Denied Amt	Writeoff	Amt to Sec/Ter	Amt Disputed	Disputed?
32.50	20.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	No ▼
Ins. Savings	Pri. Paid	Sec. Paid	Ter. Paid	Ins. Owes	Amount Not Covered		Pt. Owes	Pt. Paid	Amt Remaining		
7.50	20.00	0.00	0.00	12.50	0.00		0.00	0.00	12.50		



Reconcile

The Editable fields include:

- **Allowed** – the allowed amount of the charge (remember you can put default amount allowed amounts in settings).
- **Pri. Payment, Sec. Payment, Ter. Payment** – the amount the insurance paid
- **Copay, Coinsurance, Deductible** – the patient’s member responsibility for copay, coinsurance and deductible
- **Denied Amt** – the amount you wish to charge to the patient on a charge denied by insurance
- **Amount Not Covered** – the amount you wish to charge to the patient on a charge not covered by insurance
- **Writeoff** - Amount Allowed – Insurance Payment – Copay – Coinsurance – Deductible. You will rarely use this field. However, if an insurance allows an amount but DOES NOT PAY you will either dispute the charge OR you may have to use the Writeoff field to write off and balance this charge.
- **Amt to Sec/Ter** – the amount you wish to forward to the patient’s secondary or tertiary
- **Amt Dispute** – if you are disputing a charge mark “Yes” in the disputed box and enter the amount disputed here
- **Disputed** – mark “Yes” if you are disputing the charge. The amount disputed should equal the amount allowed in most cases. e.g. Charged \$40, paid zero. Thus, put Allowed = \$40 and Disputed = \$40 and mark “yes” in disputed.
- **Notes** – general notes about a charge. This is most useful if you are disputing a charge

Date	Code					Units	Ptc of Svc	Amt Charged			
12/22/16	98941 - Manipulation 3-4 Regions					1	11	40.00			
Allowed	Pri. Payment	Sec. Payment	Ter. Payment	Copay	Coinsurance	Deductible	Denied Amt	Writeoff	Amt to Sec/Ter	Amt Disputed	Disputed?
32.50	20.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	No ▼
Ins. Savings	Pri. Paid	Sec. Paid	Ter. Paid	Ins. Owes	Amount Not Covered		Pt. Owes	Pt. Paid	Amt Remaining		
7.50	20.00	0.00	0.00	12.50	0.00		0.00	0.00	12.50		

Note: “Denied” or “Amount Not Covered” charges will be displayed with a * next to them on the patient statement or printed patient ledger. The amount you put in the “Denied Amt” box or “Amount Not Covered” box is now the patient’s responsibility.



Reconcile

What is the difference between Denied Amount and Amount Not Covered?

- **Denied Amt** – If a charge is denied but is TYPICALLY covered you will enter the amount here. For example, perhaps the patient’s insurance covers therapy but THIS TIME they did not because benefits have been exceeded. Enter the amount denied in this box and it will now become patient responsibility.
- **Amount Not Covered** – Charges that are JUST NOT COVERED under the patient’s insurance go in this box. For example, perhaps you billed orthotics to the insurance, but the patient’s insurance does not cover orthotics. You would enter the amount not covered in this box.

Date	Code						Units	Plc of Svc	Amt Charged		
12/22/16	98941 - Manipulation 3-4 Regions						1	11	40.00		
Allowed	Pri. Payment	Sec. Payment	Ter. Payment	Copay	Coinsurance	Deductible	Denied Amt	Writeoff	Amt to Sec/Ter	Amt Disputed	Disputed?
32.50	20.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	No ▼
Ins. Savings	Pri. Paid	Sec. Paid	Ter. Paid	Ins. Owes	Amount Not Covered		Pt. Owes	Pt. Paid	Amt Remaining		
7.50	20.00	0.00	0.00	12.50	0.00		0.00	0.00	12.50		

Note: “Denied” or “Amount Not Covered” charges will be displayed with a * next to them on the patient statement or printed patient ledger. The amount you put in the “Denied Amt” box or “Amount Not Covered” box is now the patient’s responsibility.



Reconcile

	Date	Code - Description			Units	Billing State (Ins. Carrier)		Amt Charged
	Allowed	Pri. Payment	Sec. Payment	Ter. Payment	Disputed	Amt Disputed	Writeoff	Amt to Sec/Ter
	Ins. Savings	Pri. Paid	Sec. Paid	Ter. Paid	Copay	Co-ins.	Deduct.	Ins. Owes
	Notes							
<input type="checkbox"/>	12/22/16	99214-25 - Established Patient Detailed Exam			1	Pri. Billed (Blue Cross/Blue Shie		75.00
	75.00				No	0.00	0.00	0.00
	0.00	0.00	0.00	0.00	20.00	0.00	0.00	55.00

If you select a charge that does not have an insurance carrier added to the remittance, the dialog shown to the right will open. This dialog should serve as a reminder that you have either:

- Selected the wrong charge (as it is not part of the remittance you are reconciling)
- Need to add THAT insurance carrier to the remittance, which you can do by clicking the insurance carrier name (dialog shown to the right)

In this example I have selected a State Farm charge and you can see in the "Claim Remittance" box my insurance carrier for my remittance is "Blue Cross and Blue Shield".

Claim Remittance **Select**

Blue Cross and Blue Shield

05/12/2014 \$20.00

The insurance carrier(s) this charge is being billed against does not exist in the claim remittance being reconciled. Please select which of the charge's insurance carrier(s) to reconcile against, otherwise select Cancel.

State Farm
ID No. 8978987987

Cancel



Reconcile - Examples

Next, I will walk you through several examples of reconciling charges. First, I'd like to point out some key information at the top of each charge you are reconciling.

Reconcile Charge

Charge Info		Primary Insurance	Secondary Insurance	Tertiary Insurance
Billing State	Pri. Billed	Wellmark Blue Cross & Blue Shield ID No. 897987978	Medicare ID No. 897987987	
Deductible	Met 03/31/14			

Above we have the **Charge Info** box which shows the current billing state of the charge (in this case Pri. Billed) and also shows you the deductible status (in this example Met 03/31/14). This information is useful as you may possibly want to mark the patient's deductible as met while reconciling the charge if their deductible is zero and the deductible status is "Not Met".

You can also see the patient's insurance (Primary, Secondary and Tertiary). This is useful because if there is a balance remaining on the charge you will either bill it to secondary/tertiary or write off the remaining balance as a loss.

Reconcile Charge

Charge Info		Primary Insurance	Secondary Insurance	Tertiary Insurance
Billing State	Pri. Billed	Wellmark Blue Cross & Blue Shield ID No. 8797987	Medicare ID No. 897987987	
Deductible	Not Met			

Above we have an example of a deductible that is "Not Met".



Reconcile - Example

Here we have a charge that has not been reconciled. Let's pretend the remittance has an amount allowed of \$30 and the primary paid \$10.

Date	Code						Units	Plc of Svc	Amt Charged			
01/28/16	98941 - Manipulation 3-4 Regions						1	11	40.00			
Allowed	Pri. Payment	Sec. Payment	Ter. Payment	Copay	Coinsurance	Deductible	Denied Amt	Writeoff	Amt to Sec/Ter	Amt Disputed	Disputed?	
40.00	0.00	0.00	0.00	20.00	0.00	20.00	0.00	0.00	0.00	0.00	No ▼	
Ins. Savings	Pri. Paid	Sec. Paid	Ter. Paid	Ins. Owes	Amount Not Covered			Amt Remaining				
0.00	0.00	0.00	0.00	0.00	0.00			0.00				

Here you can see I entered \$10 in Pri. Payment and you can also see the patient has a \$20 copay, but the Amt Remaining is -\$20.00. This is because there is a \$20 in the Deductible field. I will now zero out the deductible field (because the remittance shows the patient's deductible has been met).

Date	Code						Units	Plc of Svc	Amt Charged			
01/28/16	98941 - Manipulation 3-4 Regions						1	11	40.00			
Allowed	Pri. Payment	Sec. Payment	Ter. Payment	Copay	Coinsurance	Deductible	Denied Amt	Writeoff	Amt to Sec/Ter	Amt Disputed	Disputed?	
30.00	10.00	0.00	0.00	20.00	0.00	20.00	0.00	0.00	0.00	0.00	No ▼	
Ins. Savings	Pri. Paid	Sec. Paid	Ter. Paid	Ins. Owes	Amount Not Covered			Amt Remaining				
10.00	10.00	0.00	0.00	-20.00	0.00			-20.00				

After I zero out the Deductible field in this example my "Amt Remaining" will be zero. The charge is now reconciled.



Amount Not Covered vs. Denied Amount

There are two boxes that can seem confusing until you understand their meaning. They BOTH will make the amount entered in these boxes Patient Responsibility. However, you use them under different circumstances.

Amount Not Covered – Use this box when a charge is not covered by the patient’s insurance PERIOD. This means the insurance flat out DOES NOT COVER this charge. For example, let’s say the patient’s insurance does not have coverage for x-rays. If you submitted the x-rays and they came back rejected, you would enter the amount not covered in the Amount Not Covered box. This value would immediately become patient responsibility.

Amount Not Covered
0.00

Denied Amount – Use this box when a charge is TYPICALLY covered but THIS TIME was denied. For example, let’s say the patient’s insurance covers 20 adjustments per year. You go to reconcile this charge and there is a note on the remittance that says something like “benefits exceeded”. You would know this charge was denied because benefits were exceeded. In this case you would then use the Denied Amount box (and not the Amount Not Covered box).

Denied Amt
0.00



Reconcile Example

Denied Amount Field

This field is used to charge the patient for a denied insurance charge (a charge that is typically covered but was NOT covered in this case). In the example below the insurance did not cover the charge. Therefore, the amount allowed was ZERO and I have entered the full charge amount of \$40 in the Denied Amt. box. The patient will now be responsible for this charge after clicking the green “Finish Charge” button.

Reconcile Charge

Charge Info

Billing State Pri. Billed
Deductible Not Met

Primary Insurance

Blue Cross & Blue Shield
ID No. 45678

Secondary Insurance

Medicare
ID No. 26357

Tertiary Insurance

Date	Code	Units	Plc of Svc	Amt Charged
03/15/16	98941 - Manipulation 3-4 Regions	1	11	40.00

Allowed	Pri. Payment	Sec. Payment	Ter. Payment	Copay	Coinsurance	Deductible	Denied Amt	Writeoff	Amt to Sec/Ter	Amt Disputed	Disputed?
0.00	0.00	0.00	0.00	0.00	0.00	0.00	40.00	0.00	0.00	0.00	No ▼

Ins. Savings	Pri. Paid	Sec. Paid	Ter. Paid	Ins. Owes	Amount Not Covered	Amt Remaining
0.00	0.00	0.00	0.00	0.00	0.00	0.00

Notes

Don't Claim Charge

Mark Deductible Met

Finish Charge

Cancel

Help

Unreconcile

Use the “Help” button below for an explanation of all fields.



Reconcile Example

Denied Amount Field

Let's take a look at another example of a denied charge. As you can see, I have a 3-4 region manipulation. Let's assume this charge is not covered under the patient's insurance and I want to make it the patient's responsibility. For starters, you can see there is already a copay of \$20.00 and before I do anything note the "Amt Remaining" is \$20.00 (a sign the charge is not reconciled).

Date	Code				Units	Plc of Svc		Amt Charged			
01/28/16	98941 - Manipulation 3-4 Regions				1	11		40.00			
Allowed	Pri. Payment	Sec. Payment	Ter. Payment	Copay	Coinsurance	Deductible	Denied Amt	Writeoff	Amt to Sec/Ter	Amt Disputed	Disputed?
40.00	0.00	0.00	0.00	20.00	0.00	0.00	0.00	0.00	0.00	0.00	No ▼
Ins. Savings	Pri. Paid	Sec. Paid	Ter. Paid	Ins. Owes	Amount Not Covered			Amt Remaining			
0.00	0.00	0.00	0.00	20.00	0.00			20.00			



Reconcile Example

Denied Amount Field

The next step is to enter the amount of the charge that is denied. Since this charge is not covered, I could mark the patient responsibility in two ways:

1. Leave the \$20 in Copay and enter \$20 in denied.
2. Delete the copay and enter \$40 in denied.

I have chosen to leave the \$20 copay and enter \$20 in the Denied Amt box. See below.

Date	Code						Units	Plc of Svc	Amt Charged			
01/28/16	98941 - Manipulation 3-4 Regions						1	11	40.00			
Allowed	Pri. Payment	Sec. Payment	Ter. Payment	Copay	Coinsurance	Deductible	Denied Amt	Writeoff	Amt to Sec/Ter	Amt Disputed	Disputed?	
40.00	0.00	0.00	0.00	20.00	0.00	0.00	20.00	0.00	0.00	0.00	No ▼	
Ins. Savings	Pri. Paid	Sec. Paid	Ter. Paid	Ins. Owes	Amount Not Covered			Amt Remaining				
-20.00	0.00	0.00	0.00	20.00	0.00			20.00				

Note: I am not done. As you can see the "Amt Remaining" is not balanced. It should say \$0.00. Therefore, to balance this charge I need to change the "Allowed" to \$20. Even if this is technically NOT correct (e.g. perhaps the insurance did allow \$40) I must do this to balance the charge. You can enter a note on the charge if you want to indicate the allowed was really \$40.



Reconcile Example

Denied Amount Field

Finally, I have completed this charge by changing “Allowed” to \$20. Now everything balances. See below as the “Amt Remaining” is now \$0.00 which is a must!

Date	Code						Units	Plc of Svc	Amt Charged			
01/22/16	98941 - Manipulation 3-4 Regions						1	11	40.00			
Allowed	Pri. Payment	Sec. Payment	Ter. Payment	Copay	Coinsurance	Deductible	Denied Amt	Writeoff	Amt to Sec/Ter	Amt Disputed	Disputed?	
20.00	0.00	0.00	0.00	20.00	0.00	0.00	20.00	0.00	0.00	0.00	No ▼	
Ins. Savings	Pri. Paid	Sec. Paid	Ter. Paid	Ins. Owes	Amount Not Covered			Amt Remaining				
0.00	0.00	0.00	0.00	0.00	0.00			0.00				
Notes												
This charge was denied by your insurance.												

I also added a comment to my notes box as I like to keep organized. I could have also added “Allowed Amount actually \$40” because as stated, sometimes you have to enter an incorrect allowed amount in order to get “Amt Remaining” to balance in the event of a Denied Charge.



Reconcile Example

Amount Not Covered Field

This field is used to charge the patient for a charge that is not covered by their insurance. This means the charge was not denied but was FLAT OUT NOT COVERED. For example, perhaps the patient's insurance does not cover x-rays. In this case you would use Amount Not Covered to indicate the x-rays were not covered.

In the example below the 99204 exam was not covered by the patient's insurance. The insurance did provide Ins. Savings by lowering the allowed to \$100. Therefore, the remaining portion owed I entered in the Amount Not Covered box. When I click "Finish Charge" this will become Pt. Responsibility.

Reconcile Charge

Charge Info		Primary Insurance		Secondary Insurance		Tertiary Insurance	
Billing State	Pri. Billed	Blue Cross & Blue Shield		Medicaid			
Deductible	None	ID No. 89878787		ID No. 897987			

Date	Code	Units	Plc of Svc	Amt Charged
08/13/14	99204-25-BC-EF-GH - New Patient Comprehensive Examination	1	11	110.00

Allowed	Pri. Payment	Sec. Payment	Ter. Payment	Copay	Coinsurance	Deductible	Denied Amt	Writeoff	Amt to Sec/Ter	Amt Disputed	Disputed?
100.00	0.00	0.00	0.00	20.00	9.00	0.00	0.00	0.00	0.00	0.00	No ▼

Ins. Savings	Pri. Paid	Sec. Paid	Ter. Paid	Ins. Owed	Amount Not Covered	Amt Remaining
10.00	0.00	0.00	0.00	0.00	71.00	0.00

Notes
This charge was not covered because the patient is out of visits for the year

Buttons: Don't Claim Charge, Mark Deductible Met, **Finish Charge**, Cancel, Help, Unreconcile

Use the "Help" button below for an explanation of all fields.



Reconcile Example

Amount Not Covered Field

There will be times when you receive a remittance with a charge that is not covered. In this case you can mark the charge as patient responsibility by populating the Amount Not Covered box.

Let's take a look at an example. As you can see, I have a 3-4 region manipulation. Let's assume this charge is not covered under the patient's insurance and I want to make it the patient's responsibility. Here I have set the allowed to \$40.00 and put \$40.00 in the Amount Not Covered box. Now the Pt. Owes box auto-adjusted to \$40 and the Amt. Remaining is \$0.00. The charge balances. I also added a note "This charge is not covered by your insurance" for clarity should I ever need to investigate this charge in the future.

Remember, the denied box is for charges that are typically covered but are DENIED (often benefits are exceeded). The Amount Not Covered box is for charges that are flat out NOT COVERED by the patient's insurance.

Date	Code					Units	Plc of Svc	Amt Charged			
12/22/16	98941 - Manipulation 3-4 Regions					1	11	40.00			
Allowed	Pri. Payment	Sec. Payment	Ter. Payment	Copay	Coinsurance	Deductible	Denied Amt	Writeoff	Amt to Sec/Ter	Amt Disputed	Disputed?
40.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	No ▼
Ins. Savings	Pri. Paid	Sec. Paid	Ter. Paid	Ins. Owes	Amount Not Covered		Pt. Owes	Pt. Paid	Amt Remaining		
0.00	0.00	0.00	0.00	0.00	40.00		40.00	0.00	0.00		
Notes											
This charge is not covered by your insurance.											

Reconcile Example

Mark Deductible Met



After zeroing out the deductible the “Amt Remaining” is now \$0.00 so the charge balances. Technically I am done.. But what I should realize is that I THOUGHT the patient had a deductible and the charge is saying the deductible is zero. Therefore, logically the deductible has been met.

Good news! We can mark the deductible as met RIGHT FROM THIS SCREEN. Simply click on the “Mark Deductible Met” button at the bottom and confirm from the prompt that you do in fact want to mark the deductible as met. This will mark the patient’s deductible as met and from now forward (until the deductible resets at the deductible reset date) the deductible will be marked as met and the patient will no longer be charged 100% of the charge.

This is a HUGE time saver, so make sure you learn this feature

Charge Info		Primary Insurance		Secondary Insurance		Tertiary Insurance	
Billing State	Pri. Billed	Blue Cross & Blue Shield					
Deductible	Not Met	ID No. 45678					

Date	Code	Units	Plc of Svc	Amt Charged
03/15/16	98941 - Manipulation 3-4 Regions	1	11	40.00

Allowed	Pri. Payment	Sec. Payment	Ter. Payment	Copay	Coinsurance	Deductible	Denied Amt	Writeoff	Amt to Sec/Ter	Amt Disputed	Disputed?
30.00	10.00	0.00	0.00	20.00	0.00	0.00	0.00	0.00	0.00	0.00	No ▼

Ins. Savings	Pri. Paid	Sec. Paid	Ter. Paid	Ins. Owes	Amount Not Covered	Amt Remaining
10.00	10.00	0.00	0.00	0.00	0.00	0.00

Notes

Don't Claim Charge**Mark Deductible Met**Finish ChargeCancelHelpUnreconcile

Reconcile Example

Mark Deductible Met



After clicking the “Mark Deductible Met” button the dialog below will appear. Click “Yes” to mark the deductible as met.

Reconcile Charge ✕

Confirm set the deductible met date to this charge's date?

You can now visually see the deductible has been met.

Charge Info	
Billing State	Pri. Billed
Deductible	Met 03/15/16

NOTE: If you mark a deductible as met any FUTURE charges that have already been created will need to be “refreshed” with this new knowledge. To do this go to the Dashboard/Visit Tile and select each visit. Then click the “Update Charge Estimate” button in the “Insurance” box. This will update all charges for that visit with the new knowledge of the patient’s deductible being met.



Reconcile – Bill Secondary

In this example Pri. Payment = \$5.00. Notice the Amt Remaining is \$5.00 and therefore the charge does not balance.

Date	Code				Units	Plc of Svc	Amt Charged				
03/15/16	98941 - Manipulation 3-4 Regions				1	11	40.00				
Allowed	Pri. Payment	Sec. Payment	Ter. Payment	Copay	Coinsurance	Deductible	Denied Amt	Writeoff	Amt to Sec/Ter	Amt Disputed	Disputed?
30.00	5.00	0.00	0.00	20.00	0.00	0.00	0.00	0.00	0.00	0.00	No ▼
Ins. Savings	Pri. Paid	Sec. Paid	Ter. Paid	Ins. Owes	Amount Not Covered		Amt Remaining				
10.00	5.00	0.00	0.00	5.00	0.00		5.00				

Now notice the patient has a secondary insurance so I am going to want to bill any remaining balance to the secondary.

Charge Info		Primary Insurance	Secondary Insurance
Billing State	Reconciled	Wellmark Blue Cross & Blue Shield	Medicare
Deductible	Met 05/13/14	ID No. 8797987	ID No. 897987987

Therefore, I put the \$5.00 remaining in the Amt to Sec/Ter box. This will let the software know you intend to bill the secondary or tertiary insurance the remaining unpaid portion of the charge. Notice the Amt Remaining is now \$0.00 and the charge balances.

Date	Code				Units	Plc of Svc	Amt Charged				
03/15/16	98941 - Manipulation 3-4 Regions				1	11	40.00				
Allowed	Pri. Payment	Sec. Payment	Ter. Payment	Copay	Coinsurance	Deductible	Denied Amt	Writeoff	Amt to Sec/Ter	Amt Disputed	Disputed?
30.00	5.00	0.00	0.00	20.00	0.00	0.00	0.00	0.00	5.00	0.00	No ▼
Ins. Savings	Pri. Paid	Sec. Paid	Ter. Paid	Ins. Owes	Amount Not Covered		Amt Remaining				
10.00	5.00	0.00	0.00	5.00	0.00		0.00				



Reconcile – Bill Secondary

After the charge balances, click “Finish and Save”. Because I have an amount in the “Amt to Sec/Ter” box the software is getting ready to ask what you would like to do with the charge. But... first the software has also noticed I had an amount in either the copay, co-ins or deductible field. The dialog below will appear in an example like this. It is asking if you would like to move the amounts in the copay, co-insurance and/or deductible fields to be billed to secondary or tertiary insurance. Select Yes or No (or Cancel). Note, if you select “Yes” the patient will no longer be charge whatever amount you previously had in their copay, co-insurance or deductible fields. After reconciling secondary/tertiary you can re-add these fields if the secondary/tertiary remittance tells you to.

Before selecting “Yes” the Copay is \$20 and the Amt to Sec/Ter is \$5.00

Copay	Coinsurance	Deductible	Writeoff	Amt to Sec/Ter
20.00	0.00	0.00	0.00	5.00

Reconcile Charge ✕

There are amounts in the copay, co-insurance, and/or deductible fields that might be paid by the charge's other insurance carrier. Would you like to move these amounts to the 'Amt to Sec/Ter' field to bill to the next insurance?

After selecting “Yes” the Copay is \$0.00 and the Amt to Sec/Ter is \$25.00.

Copay	Coinsurance	Deductible	Writeoff	Amt to Sec/Ter
0.00	0.00	0.00	0.00	25.00



Reconcile – Bill Secondary

The next dialog that appears is the “Select Billing State” dialog. In this case I had an amount I was submitting to secondary. Therefore, I am going to select either “Bill Secondary” or “Mark Secondary Billed”.

- **Bill Secondary** – this will put the charge into the Claims app on the front desk ready to bill secondary
- **Mark Secondary Billed** – this will mark the charge as billed by secondary (do this if the primary forwarded the charge for you to secondary)

The screenshot shows a software dialog box titled "Select Billing State". At the top right is a "Help" button. The main text asks, "What would you like to do next with this charge?". Below this are four columns of options. The first column, "Primary Insurance", has "Bill Primary" and "Mark Primary Billed" buttons. The second column, "Secondary Insurance", has "Bill Secondary" and "Mark Secondary Billed" buttons. The third column, "Tertiary Insurance", has "Bill Tertiary" and "Mark Tertiary Billed" buttons, which are greyed out. The fourth column, "Reconciled", has a "Mark Reconciled" button. A "Cancel" button is centered at the bottom.

Note: Tertiary is greyed out because this patient did not have a tertiary insurance.



Reconcile – Dispute a Charge

Here we are disputing a charge. The insurance did not pay anything, so I am disputing the full allowed amount of \$30.00. I have also marked the “Disputed?” option to “Yes”.

I also wrote myself a note on the charge to remind me to call the insurance.

Date	Code					Units	Plc of Svc	Amt Charged			
03/15/16	98941 - Manipulation 3-4 Regions					1	11	40.00			
Allowed	Pri. Payment	Sec. Payment	Ter. Payment	Copay	Coinsurance	Deductible	Denied Amt	Writeoff	Amt to Sec/Ter	Amt Disputed	Disputed?
30.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	30.00	Yes ▼
Ins. Savings	Pri. Paid	Sec. Paid	Ter. Paid	Ins. Owes	Amount Not Covered		Amt Remaining				
10.00	0.00	0.00	0.00	30.00	0.00		0.00				
Notes											
Call insurance and find out why they are not covering this!!!											

After clicking “Finish and Save” the Select Billing State dialog will appear asking you what you would like to do with this charge. Typically, a disputed charge you will mark Primary Billed (or Secondary Billed/Tertiary Billed). If you mark Bill Primary the charge will immediately go into the claims app (and this may not be desired).

Remember, even if you mark “Primary Billed” NO MATTER WHAT, the charge will be kept inside the Billing app’s “Disputed” folder.



Billing





Reconcile – How to Resolve an Overpayment

- Q: How do you reconcile an insurance claim remittance with an overpayment recovery or take back?
- A: In the software create a new remittance as normal and enter in the amount shown on the check. Select the patient whose charge has an overpayment. In the list of charges locate the charge. If the charge cannot be found, then click the button "Load Reconciled Charges" and select a date range that includes the date of service for the charge. Once loaded, locate the charge and click it. In the reconcile charge dialog, enter in the amount the insurance recovered (took back) in the appropriate "Pri. Paid", "Sec. Paid", or "Ter. Paid" box as a **negative** number. Adjust the remaining boxes to properly disposition the charge and then click "Finish Charge". Continue to reconcile the remaining charges as normal.

Reconcile – How to Enter a Bonus Payment with NO Charge(s) to Reconcile Against?



There are times when an insurance carrier will issue you a bonus payment (e.g. Interest because you accept direct deposit). However, there are NO CHARGES to reconcile this money against. How do you reconcile this?

Create a new remittance and select the two options circled in the image to the right.

Is Bonus Payment = Yes

Reconcile to Charges = No

After entering the payer, carrier(s) and issue amount click Ok. You are done! :) You have just entered a bonus payment without any associated charges.

The screenshot shows a software interface for entering a bonus payment. The form includes the following fields and options:

- Insurance Payer:** Blue Cross & Blue Shield
- Issue Number:** (Empty)
- Issue Date:** 4/15/2017
- Check Number:** (Empty)
- Issue Amount:** 40.00
- Payment Type:** Direct Deposit
- Payment Date:** 4/15/2017
- Notes:** Interest Payment
- PI Case:** No
- Is Bonus Payment:** Yes (Circled in red)
- Bonus Start Date:** 4/15/2017
- Bonus End Date:** 4/15/2017
- Reconcile To Charges:** No (Circled in red)
- Created By:** Dr. Brian

The **Selected Carriers** section includes:

- Blue Cross/Blue Shield
1234 Main St
Davenport, IA 87878

The **Available Carriers** section includes:

- *** Medicare is Primary**
- *** Medicare with Medigap
- Aetna **
334343
Madison Ave, IA 76775
AIS

Buttons at the bottom include **OK** and **Cancel**.

Help menu in Reconcile Dialog



Reconcile Charge

Allowed : Enter here the Amount Allowed as indicated on the remittance. If Amount Allowed not specified then subtract Insurance Savings from Amount Charged and enter here.

Pri. Payment : If insurance is patient's primary then enter here the amount the insurance paid toward the charge as indicated on the remittance.

Sec. Payment : If insurance is patient's secondary then enter here the amount the insurance paid toward the charge as indicated on the remittance.

Ter. Payment : If insurance is patient's tertiary then enter here the amount the insurance paid toward the charge as indicated on the remittance.

Copay : Enter patient's copay as indicated on the remittance.

Coinsurance : Enter patient's co-insurance as indicated on the remittance.

Deductible : Enter patient's deductible as indicated on the remittance.

Denied Amt : Enter the amount to bill patient when the charge is denied.

Writeoff : Enter the amount of the Allowed Amount to writeoff (do not enter Insurance/Network Savings) here. This is commonly used when the remittance specifies a non-zero 'adjustment'; meaning they allow the charge, but will not pay the provider the full amount allowed.

Amt to Sec/Ter : Enter amount to forward to a secondary or tertiary insurance. When another insurance exists that might pay some or all of the patient's copay, co-insurance, or deductible, it is suggested to enter the sum of these amounts here; this will prevent the patient from being billed these amounts until the next insurance's claim remittance is received.

Amt Disputed : When disputing a charge, enter here the amount required to balance the charge. For example, enter here the sum of the copay, co-insurance, and deductible to prevent the patient being charged these amounts until the dispute is resolved. Note that the full charge amount will always be billed to the insurance regardless of the amount entered here.

Disputed : Mark this 'yes' when disputing the charge.

Ins. Savings : Displays the calculated Insurance Savings which is the Amount Charged less the Amount Allowed.

Pri. Paid : Displays the total amount primary insurance has paid to date for the charge.

Sec. Paid : Displays the total amount secondary insurance has paid to date for the charge.

Ter. Paid : Displays the total amount tertiary insurance has paid to date for the charge.

Ins. Owes : Displays the calculated amount that is still owed by insurance.

Amt. Not Covered : Enter the amount to bill patient when a charge is not covered.

Close



Reconcile - Print

Note: At any time clicking the “Print” button will render a report showing you all of your reconciled charges. This report can be very useful especially in the case when an error is made. This way you can print the report and go charge by charge and compare the REAL remittance vs. the “Claim Remittance Report”.

Spinal Care Chiropractic
1234 State St.
Davenport, IA 52804
563-555-6755
spinalcare@gmail.com

Claim Remittance Report

Printed 05/18

Payor Blue Cross and Blue Shield
Issue Date 05/16/2014
Issue Number
Check No.
Issue Amount 20.00

Patient	Date	Code	Units	Charged	Allowed	Savings	Deduct.	Copay	Coins.	Pri. Paid	Sec. Paid	Ter. Paid	Wri
WATBU000 Watson, Bubba	05/16/14	98941-AT	1	40.00	30.00	10.00	0.00	0.00	3.00	10.00	10.00	0.00	
WATBU000 Watson, Bubba	05/16/14	98941-AT	1	40.00	30.00	10.00	0.00	0.00	3.00	10.00	10.00	0.00	
TOTALS													

Close Print

Reconcile – Attorney Check (Insurance Case)



When you submit a “Charge Report” to your attorney from an Attorney Insurance Case (note this is NOT insurance but a neat and tidy way to track charges for an attorney) there is a FAST and EASY way to reconcile this check using the Reconcile app.

Remember, an attorney will send you a payment but will not provide a remittance showing how much of each charge was paid.

Using our “magic button” you can reconcile an entire attorney check. The software will automatically add money to charges evenly distributed and write off the remaining.

To do this you will first enter your check as you would for a standard insurance EOB check. Select the “Attorney” from the “Payer” drop down. Then in the right pane select the Attorney “Insurance Carrier”.

In the “PI Case” dropdown you MUST select “Yes”. Doing so will enable the “magic button” on the next screen.

The screenshot shows the Reconcile app interface for an Attorney Check. The form is divided into several sections:

- Insurance Payer:** Attorney - John Smith (dropdown), Add Payer, Edit Payer List
- Issue Information:** Issue Number (empty), Issue Date: 4/30/2017 (dropdown with red X)
- Check Information:** Check Number (empty), Issue Amount: 450.00
- Payment Information:** Payment Type: Check (dropdown), Payment Date: 4/30/2017 (dropdown with red X)
- Notes:** Empty text area
- PI Case:** Yes (dropdown, highlighted with a red arrow)
- Is Bonus Payment:** No (dropdown)
- Bonus Dates:** Bonus Start Date (dropdown with red X), Bonus End Date (dropdown with red X)
- Reconcile To Charges:** Yes (dropdown)
- Created By:** Dr. Brian
- Updated By:** Dr. Brian
- Selected Carriers:** Attorney - John Smith, 5453 Law Ave, Davenport, IA 78878
- Available Carriers:** Medicare is Primary**, Medicare with Medigap, Aetna **, 334343, Madison Ave, IA 76775

Buttons at the bottom include OK and Cancel. The right pane also has Remove Selected and Copy From Previous buttons.

Reconcile – Attorney Check (Insurance Case)



Next select your patient, then click the “Reconcile Insurance Case” button below. This is the “magic button” and will only be selectable if you selected “Yes” in the “PI Case” dropdown in the previous dialog.

Reconcile
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Claim Remittance Select

Payer: Attorney - John Smith
 Payment Date: 04/30/2017
 Issued Date: 04/30/2017
 Check Amount: \$450.00

Selected Patient

Luke Henderson

Recent Patients ▼

luke ?

Luke Henderson
HENLU000 04/30/1978

Reconciled Patients

Date	Code - Description				Units	Billing State (Ins. Carrier)			Amt Charged
	Allowed	Pri. Payment	Sec. Payment	Ter. Payment	Disputed	Amt Disputed	Writeoff	Amt to Sec/Ter	
Ins. Savings	Pri. Paid	Sec. Paid	Ter. Paid	Copay	Co-ins.	Deduct.	Ins. Owes		
Notes									
<input type="checkbox"/>	04/26/17	97110 - Therapy-Therapeutic Exercise			2	Bill Pri. (Attorney - John Smith)			80.00
	80.00				No	0.00	0.00	0.00	
	0.00	0.00	0.00	0.00	0.00	0.00	0.00	80.00	
<input type="checkbox"/>	04/26/17	72070 - X-ray Thoracic Spine-AP/Lat			1	Bill Pri. (Attorney - John Smith)			65.00
	65.00				No	0.00	0.00	0.00	
	0.00	0.00	0.00	0.00	0.00	0.00	0.00	65.00	
<input type="checkbox"/>	04/26/17	98941 - Manipulation 3-4 Regions			1	Bill Pri. (Attorney - John Smith)			50.00
	50.00				No	0.00	0.00	0.00	
	0.00	0.00	0.00	0.00	0.00	0.00	0.00	50.00	
<input type="checkbox"/>	04/27/17	97010 - Therapy-Hot/Cold Therapy			2	Bill Pri. (Attorney - John Smith)			30.00
	30.00				No	0.00	0.00	0.00	
	0.00	0.00	0.00	0.00	0.00	0.00	0.00	30.00	
<input type="checkbox"/>	04/27/17	98941 - Manipulation 3-4 Regions			1	Bill Pri. (Attorney - John Smith)			50.00
	50.00				No	0.00	0.00	0.00	
	0.00	0.00	0.00	0.00	0.00	0.00	0.00	50.00	
<input type="checkbox"/>	04/27/17	97035 - Therapy-Ultrasound			2	Bill Pri. (Attorney - John Smith)			50.00
	50.00				No	0.00	0.00	0.00	
	0.00	0.00	0.00	0.00	0.00	0.00	0.00	50.00	
<input type="checkbox"/>	04/30/17	98941 - Manipulation 3-4 Regions			1	Bill Pri. (Attorney - John Smith)			50.00
	50.00				No	0.00	0.00	0.00	
	0.00	0.00	0.00	0.00	0.00	0.00	0.00	50.00	
<input type="checkbox"/>	04/30/17	72040 - X-ray Cervical Spine-AP/Lat Views			1	Bill Pri. (Attorney - John Smith)			65.00
	65.00				No	0.00	0.00	0.00	
	0.00	0.00	0.00	0.00	0.00	0.00	0.00	65.00	
<input type="checkbox"/>	04/30/17	72080 - X-ray Thocacolumbar Spine-AP/Lat			1	Bill Pri. (Attorney - John Smith)			65.00
	65.00				No	0.00	0.00	0.00	
	0.00	0.00	0.00	0.00	0.00	0.00	0.00	65.00	

Only Show Charges on Remittance

Issue Amount Remaining
 \$450.00

Close
Dock
Print
Load Reconciled Charges
Reconcile Charge
Reconcile Insurance Case
Unreconcile All
Finish Remittance ?

Reconcile – Attorney Check (Insurance Case)



Next select the Insurance Case you are reconciling (e.g. Attorney – John Smith). Once selected either double click or press “Select”.

Reconcile Select

Payer: Attorney - John Smith
Payment Date: 04/30/2017
Issued Date: 04/30/2017
Check Amount: \$450.00

Selected Patient
Luke Henderson

Recent Patients
luke ?
Luke Henderson HENLU000 04/30/1978

Reconciled Patients

Reconcile CPT copyright 2013 American Medical Association. All rights reserved.

Date	Code - Description				Units	Billing State (Ins. Carrier)		Amt Charged
Allowed	Pri. Payment	Sec. Payment	Ter. Payment	Disputed	Amt Disputed	Writeoff	Amt to Sec/Ter	
Ins. Savings	Pri. Paid	Sec. Paid	Ter. Paid	Copay	Co-ins.	Deduct.	Ins. Owes	
Notes								
04/2								Bill Pri. (Attorney - John Smith) 80.00
								0.00 0.00 0.00
								0.00 0.00 80.00
04/2								Bill Pri. (Attorney - John Smith) 65.00
								0.00 0.00 0.00
								0.00 0.00 65.00
04/2								Bill Pri. (Attorney - John Smith) 50.00
								0.00 0.00 0.00
								0.00 0.00 50.00
04/2								Bill Pri. (Attorney - John Smith) 30.00
								0.00 0.00 0.00
								0.00 0.00 30.00
04/2								Bill Pri. (Attorney - John Smith) 50.00
								0.00 0.00 0.00
								0.00 0.00 50.00
04/2								Bill Pri. (Attorney - John Smith) 50.00
								0.00 0.00 0.00
								0.00 0.00 50.00
04/3								Bill Pri. (Attorney - John Smith) 50.00
								0.00 0.00 0.00
								0.00 0.00 50.00
04/3								Bill Pri. (Attorney - John Smith) 65.00
								0.00 0.00 0.00
								0.00 0.00 65.00
04/3								Bill Pri. (Attorney - John Smith) 65.00
								0.00 0.00 0.00
								0.00 0.00 65.00

Select Insurance Case

Open Cases

Attorney - John Smith

Start Date: Apr 30, 2017 **End Date:**

Closed Cases

Cancel Select

Issue Amount Remaining \$450.00

Close Dock Print Load Reconciled Charges Reconcile Charge Reconcile Insurance Case Unreconcile All Finish Remittance ?

Reconcile – Attorney Check (Insurance Case)



Next select the Insurance Plan that is associated with this attorney check.

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Claim Remittance Select

Payer: Attorney - John Smith
Payment Date: 04/30/2017
Issued Date: 04/30/2017
Check Amount: \$450.00

Selected Patient
Luke Henderson

Recent Patients ?

luke

Luke Henderson
HENLU000 04/30/1978

Reconciled Patients

Date	Code - Description	Units	Billing State (Ins. Carrier)	Amt Charged			
Allowed	Pri. Payment	Sec. Payment	Ter. Payment	Disputed	Amt Disputed	Writeoff	Amt to Sec/Ter
Ins. Savings	Pri. Paid	Sec. Paid	Ter. Paid	Copay	Co-ins.	Deduct.	Ins. Owes
04/26/17	97110 - Therapy-Therapeutic Exercise	2	Bill Pri. (Attorney - John Smith)	80.00			
80.00			No	0.00	0.00	0.00	80.00
0.00	0.00	0.00	0.00	0.00	0.00	0.00	80.00
04/26/17	72070 - X-ray Thoracic Spine-AP/Lat	1	Bill Pri. (Attorney - John Smith)	65.00			
65.00			No	0.00	0.00	0.00	65.00
0.00	0.00	0.00	0.00	0.00	0.00	0.00	65.00
04/26/17	97110 - Therapy-Therapeutic Exercise	2	Bill Pri. (Attorney - John Smith)	50.00			
50.00			No	0.00	0.00	0.00	50.00
0.00	0.00	0.00	0.00	0.00	0.00	0.00	50.00
04/26/17	97110 - Therapy-Therapeutic Exercise	2	Bill Pri. (Attorney - John Smith)	30.00			
30.00			No	0.00	0.00	0.00	30.00
0.00	0.00	0.00	0.00	0.00	0.00	0.00	30.00
04/26/17	97110 - Therapy-Therapeutic Exercise	2	Bill Pri. (Attorney - John Smith)	50.00			
50.00			No	0.00	0.00	0.00	50.00
0.00	0.00	0.00	0.00	0.00	0.00	0.00	50.00
04/26/17	97110 - Therapy-Therapeutic Exercise	2	Bill Pri. (Attorney - John Smith)	50.00			
50.00			No	0.00	0.00	0.00	50.00
0.00	0.00	0.00	0.00	0.00	0.00	0.00	50.00
04/26/17	97110 - Therapy-Therapeutic Exercise	2	Bill Pri. (Attorney - John Smith)	50.00			
50.00			No	0.00	0.00	0.00	50.00
0.00	0.00	0.00	0.00	0.00	0.00	0.00	50.00
04/26/17	97110 - Therapy-Therapeutic Exercise	2	Bill Pri. (Attorney - John Smith)	50.00			
50.00			No	0.00	0.00	0.00	50.00
0.00	0.00	0.00	0.00	0.00	0.00	0.00	50.00
04/30/17	72080 - X-ray Thoracolumbar Spine-AP/Lat	1	Bill Pri. (Attorney - John Smith)	65.00			
65.00			No	0.00	0.00	0.00	65.00
0.00	0.00	0.00	0.00	0.00	0.00	0.00	65.00

Only Show Charges on Remittance

Issue Amount Remaining
\$450.00

Select Insurance Case

Select Insurance Plan

Attorney - John Smith
ID No. 2422424

Cancel

Close Dock Print Load Reconciled Charges Reconcile Charge Reconcile Insurance Case Unreconcile All Finish Remittance ?

Reconcile – Attorney Check (Insurance Case)



The software will now display all charges for this insurance case. As you can see here none of these charges have been paid. Next enter the amount you want to apply to the charges (in this case \$450) and click “Apply”.

Luke Henderson - Attorney - John Smith - Unreconciled Charges

	Date	Code - Description			Units	Billing State (Ins. Carrier)		Amt Charged
	Allowed	Pri. Payment	Sec. Payment	Ter. Payment	Disputed	Amt Disputed	Writeoff	Amt to Sec/Ter
	Ins. Savings	Pri. Paid	Sec. Paid	Ter. Paid	Copay	Co-ins.	Deduct.	Ins. Owes
Notes								
<input type="checkbox"/>	04/26/17	98941 - Manipulation 3-4 Regions			1	Bill Pri. (Attorney - John Smith)		50.00
	50.00				No	0.00	0.00	0.00
	0.00	0.00	0.00	0.00	0.00	0.00	0.00	50.00
<input type="checkbox"/>	04/26/17	72070 - X-ray Thoracic Spine-AP/Lat			1	Bill Pri. (Attorney - John Smith)		65.00
	65.00				No	0.00	0.00	0.00
	0.00	0.00	0.00	0.00	0.00	0.00	0.00	65.00
<input type="checkbox"/>	04/26/17	97110 - Therapy-Therapeutic Exercise			2	Bill Pri. (Attorney - John Smith)		80.00
	80.00				No	0.00	0.00	0.00
	0.00	0.00	0.00	0.00	0.00	0.00	0.00	80.00
<input type="checkbox"/>	04/27/17	97010 - Therapy-Hot/Cold Therapy			2	Bill Pri. (Attorney - John Smith)		30.00
	30.00				No	0.00	0.00	0.00
	0.00	0.00	0.00	0.00	0.00	0.00	0.00	30.00
<input type="checkbox"/>	04/27/17	97035 - Therapy-Ultrasound			2	Bill Pri. (Attorney - John Smith)		50.00
	50.00				No	0.00	0.00	0.00
	0.00	0.00	0.00	0.00	0.00	0.00	0.00	50.00
<input type="checkbox"/>	04/27/17	98941 - Manipulation 3-4 Regions			1	Bill Pri. (Attorney - John Smith)		50.00
	50.00				No	0.00	0.00	0.00
	0.00	0.00	0.00	0.00	0.00	0.00	0.00	50.00
<input type="checkbox"/>	04/30/17	98941 - Manipulation 3-4 Regions			1	Bill Pri. (Attorney - John Smith)		50.00
	50.00				No	0.00	0.00	0.00
	0.00	0.00	0.00	0.00	0.00	0.00	0.00	50.00
<input type="checkbox"/>	04/30/17	72040 - X-ray Cervical Spine-AP/Lat Views			1	Bill Pri. (Attorney - John Smith)		65.00
	65.00				No	0.00	0.00	0.00
	0.00	0.00	0.00	0.00	0.00	0.00	0.00	65.00
<input type="checkbox"/>	04/30/17	72080 - X-ray Thoracolumbar Spine-AP/Lat			1	Bill Pri. (Attorney - John Smith)		65.00

Distribute payment across all charges writing off remaining amount

How Much Would You Like to Apply From the Check to These Charges?

Insurance Case Total Owed
\$655.00

Number of Charges Owed
10

Reconcile – Attorney Check (Insurance Case)



After clicking “Apply” the software has now distributed the payment across all charges and written off the remainder. All charges are now reconciled in ONE CLICK!!!! THIS is a HUGE timesaver!

Luke Henderson - Attorney - John Smith - Unreconciled Charges								
	Date	Code - Description			Units	Billing State (Ins. Carrier)		Amt Charged
	Allowed	Pri. Payment	Sec. Payment	Ter. Payment	Disputed	Amt Disputed	Writeoff	Amt to Sec/Ter
	Ins. Savings	Pri. Paid	Sec. Paid	Ter. Paid	Copay	Co-ins.	Deduct.	Ins. Owes
Notes								
<input checked="" type="checkbox"/>	04/26/17	98941 - Manipulation 3-4 Regions			1	Reconciled		50.00
	50.00	34.35	0.00	0.00	No	0.00	15.65	0.00
	0.00	34.35	0.00	0.00	0.00	0.00	0.00	0.00
<input checked="" type="checkbox"/>	04/26/17	72070 - X-ray Thoracic Spine-AP/Lat			1	Reconciled		65.00
	65.00	44.66	0.00	0.00	No	0.00	20.34	0.00
	0.00	44.66	0.00	0.00	0.00	0.00	0.00	0.00
<input checked="" type="checkbox"/>	04/26/17	97110 - Therapy-Therapeutic Exercise			2	Reconciled		80.00
	80.00	54.96	0.00	0.00	No	0.00	25.04	0.00
	0.00	54.96	0.00	0.00	0.00	0.00	0.00	0.00
<input checked="" type="checkbox"/>	04/27/17	97010 - Therapy-Hot/Cold Therapy			2	Reconciled		30.00
	30.00	20.61	0.00	0.00	No	0.00	9.39	0.00
	0.00	20.61	0.00	0.00	0.00	0.00	0.00	0.00
<input checked="" type="checkbox"/>	04/27/17	97035 - Therapy-Ultrasound			2	Reconciled		50.00
	50.00	34.35	0.00	0.00	No	0.00	15.65	0.00
	0.00	34.35	0.00	0.00	0.00	0.00	0.00	0.00
<input checked="" type="checkbox"/>	04/27/17	98941 - Manipulation 3-4 Regions			1	Reconciled		50.00
	50.00	34.35	0.00	0.00	No	0.00	15.65	0.00
	0.00	34.35	0.00	0.00	0.00	0.00	0.00	0.00
<input checked="" type="checkbox"/>	04/30/17	98941 - Manipulation 3-4 Regions			1	Reconciled		50.00
	50.00	34.35	0.00	0.00	No	0.00	15.65	0.00
	0.00	34.35	0.00	0.00	0.00	0.00	0.00	0.00
<input checked="" type="checkbox"/>	04/30/17	72040 - X-ray Cervical Spine-AP/Lat Views			1	Reconciled		65.00
	65.00	44.66	0.00	0.00	No	0.00	20.34	0.00
	0.00	44.66	0.00	0.00	0.00	0.00	0.00	0.00
<input type="checkbox"/>	04/30/17	72080 - X-ray Thoracolumbar Spine-AP/Lat			1	Reconciled		65.00

Distribute payment across all charges writing off remaining amount

How Much Would You Like to Apply From the Check to These Charges?

Insurance Case Total Owed

\$205.00

Number of Charges Owed

10

Reconcile – Attorney Check (Insurance Case)



Now you can see the “Issue Amount Remaining” is \$0.00 and we can click “Finish Remittance” to complete this remittance.

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Claim Remittance Select

Payer: Attorney - John Smith
 Payment Date: 04/30/2017
 Issued Date: 04/30/2017
 Check Amount: \$450.00

Selected Patient

Luke Henderson

Recent Patients ▼

luke ?

Luke Henderson
 HENLU000 04/30/1978

Reconciled Patients

Luke Henderson

	Date	Code - Description				Units	Billing State (Ins. Carrier)			Amt Charged
	Allowed	Pri. Payment	Sec. Payment	Ter. Payment	Disputed	Amt Disputed	Writeoff	Amt to Sec/Ter		
	Ins. Savings	Pri. Paid	Sec. Paid	Ter. Paid	Copay	Co-ins.	Deduct.	Ins. Owes		
Notes										
✓	04/26/17	97110 - Therapy-Therapeutic Exercise				2	Reconciled			80.00
		80.00	54.96	0.00	0.00	No	0.00	25.04	0.00	
		0.00	54.96	0.00	0.00	0.00	0.00	0.00	0.00	
✓	04/26/17	72070 - X-ray Thoracic Spine-AP/Lat				1	Reconciled			65.00
		65.00	44.66	0.00	0.00	No	0.00	20.34	0.00	
		0.00	44.66	0.00	0.00	0.00	0.00	0.00	0.00	
✓	04/26/17	98941 - Manipulation 3-4 Regions				1	Reconciled			50.00
		50.00	34.35	0.00	0.00	No	0.00	15.65	0.00	
		0.00	34.35	0.00	0.00	0.00	0.00	0.00	0.00	
✓	04/27/17	97010 - Therapy-Hot/Cold Therapy				2	Reconciled			30.00
		30.00	20.61	0.00	0.00	No	0.00	9.39	0.00	
		0.00	20.61	0.00	0.00	0.00	0.00	0.00	0.00	
✓	04/27/17	98941 - Manipulation 3-4 Regions				1	Reconciled			50.00
		50.00	34.35	0.00	0.00	No	0.00	15.65	0.00	
		0.00	34.35	0.00	0.00	0.00	0.00	0.00	0.00	
✓	04/27/17	97035 - Therapy-Ultrasound				2	Reconciled			50.00
		50.00	34.35	0.00	0.00	No	0.00	15.65	0.00	
		0.00	34.35	0.00	0.00	0.00	0.00	0.00	0.00	
✓	04/30/17	98941 - Manipulation 3-4 Regions				1	Reconciled			50.00
		50.00	34.35	0.00	0.00	No	0.00	15.65	0.00	
		0.00	34.35	0.00	0.00	0.00	0.00	0.00	0.00	
✓	04/30/17	72040 - X-ray Cervical Spine-AP/Lat Views				1	Reconciled			65.00
		65.00	44.66	0.00	0.00	No	0.00	20.34	0.00	
		0.00	44.66	0.00	0.00	0.00	0.00	0.00	0.00	
✓	04/30/17	72080 - X-ray Thocacolumbar Spine-AP/Lat				1	Reconciled			65.00
		65.00	44.66	0.00	0.00	No	0.00	20.34	0.00	
		0.00	44.66	0.00	0.00	0.00	0.00	0.00	0.00	

Only Show Charges on Remittance

Close Dock Print Load Reconciled Charges Reconcile Charge Reconcile Insurance Case Unreconcile All

Issue Amount Remaining
\$0.00

Finish Remittance ?

#Statements





Statements

The Statements app is used to bill patients. Like the Billing app it keeps track of charges that are owed only in this case this is money PATIENTS OWE.

Billing patients is extremely simple and is accomplished in two steps:

1. Create Statements
2. Print and Bill Checked Statements

The Statements app is composed of a tab system. There are two tabs in this app:

1. Patients with Balances
 - Shows you every patient in ChiroSpring that has a balance (they owe you money). They will be here regardless if you billed them.
2. Unbilled Statements
 - Shows statements that have been created (are ready to bill) but have not yet been billed. Typically, once you create a statement you will want to bill it immediately.





Let Etactics Do Your Statements

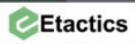
We have partnered with Etactics for practices not wanting to print, envelope, stamp and mail their statements. If this service interests you, please reach out to them. You can request a demo in Settings/Practice Info/Statements.

Practice Info CPT copyright 2022 American Medical Association. All rights reserved.

General | Papaya | Etactics

General 2
Facility Locations
Billing Address
Logo
Charge Options
Payment Colors
Integrated Payments
Body Orientation
Online Scheduling
Statements

Revenue Cycle Solutions
Deploying Innovative Technology



With Etactics seamless integration with ChiroSpring, your statement process becomes fully automated. Etactics will print, envelope, stamp and mail your statements for less than you can do it yourself. Free up your time and save your money with Etactics.

To get started click below or if you prefer a demo that's okay also.

[Get Started Today](#)
[I Prefer A Demo First](#)

Close **Save**

Front Desk | Provider View | Patient Flow | **Tuesday, Oct 4, 2022** | **11:42 AM** | **Dr. Brian Albery** | Log Out | KB



Statements – Create Statements

Statements can be created in three ways

- Select a patient and click the “View Highlighted” button. A dialog will open asking if you would like to view their old statement or view and create a new statement.



- Check the box next to a patient and click “Create Statements”.



- In the patient Dashboard/View Statements Tile there is a button that says, “Create Current Statement”. This allows you to create a current statement for a patient without even going into the Statements app on the front



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Patients with Balances | **Unbilled Statements**

Filters Save Default

Amount Owed At Least: 0

Show Patients That Were

Never Billed Billed

Last Billed On or After: <MM-dd-yyyy> 15

Last Billed On or Before: <MM-dd-yyyy> 15

Include 'In Collection' Patients
 Include 'Not in Collections' Patients

Non-reconciled Insurance Charges ?
Show

Include Aged Accounts Receivable ?

Show Last Names That

Start With: A End With: Z

Filter by Patient: [X] Due Date: 01-21-2019 15

Select Providers

Patient	Patient Owes	Last Statement	Statement Billed	Last Payment	Payment Date
<input type="checkbox"/> Adams, Bailey	\$351.04	08/21/18	Never Billed	\$17.12	05/10/18
<input type="checkbox"/> Alberty, Brady	\$236.67	08/11/18	Never Billed	\$50.00	05/31/18
<input type="checkbox"/> Anderson, Rucus	\$138.39	08/11/18	07/12/16	\$50.00	08/09/18
<input type="checkbox"/> baker, michael	\$14.00	05/29/18	05/25/18	\$50.00	05/10/18
<input type="checkbox"/> Becker, Omar	\$150.00	05/31/18	05/31/18	\$20.00	05/31/18
<input type="checkbox"/> Bham, Dave	\$80.00	05/29/18	05/25/18	\$50.00	05/10/18
<input type="checkbox"/> Burch, Laura, E	\$30.00	05/29/18	Never Billed	\$0.00	05/02/18
<input type="checkbox"/> Carlson, Orville	\$120.00	None	Never Billed	N/A	None
<input type="checkbox"/> Carson, Rob	\$40.00	05/29/18	Never Billed	\$56.00	03/08/18
<input type="checkbox"/> Cash, Miles	\$81.71	05/29/18	Never Billed	\$20.00	01/28/18
<input type="checkbox"/> Cash, Victor	\$471.73	08/10/18	Never Billed	\$252.82	01/05/18
<input type="checkbox"/> Coffee, Iced	\$47.41	05/29/18	Never Billed	\$40.00	08/31/17
<input type="checkbox"/> Confetti, Pink	\$197.12	05/29/18	Never Billed	\$172.85	08/16/17
<input type="checkbox"/> Cooks, Brady	\$20.00	None	Never Billed	N/A	None
<input type="checkbox"/> coulter, Sarah	\$178.32	05/29/18	Never Billed	\$100.00	11/30/17
<input type="checkbox"/> Cross, Molly	\$45.00	05/29/18	05/16/18	\$80.00	05/16/18

Check All Clear All View Highlighted Create Statements

Close Dock Print Settings

Note: Once you create a statement it will also appear in the patient’s Dashboard/View Statements Tile. This way you have record of when a statement was created, and once billed you have record of when the statement was billed.



Statements – Patients with Balances

Statements

Patients with Balances

Unbilled Statements

The left side of the “Patients with Balances” tab has a filters section. Here you can filter your patients with balances so that you create only the statements you want to create. It would not make sense to bill every single patient with a balance, especially if you just billed some of them a few days ago.

Filters include:

- **Amount Owed At Least**
 - This allows you to only show patients with a minimum balance, for example \$5. You would likely not want to mail a statement with a balance of \$0.05!
- **Show Patients That Were**
 - Never Billed
 - Billed
 - Last Billed On Or After
 - Last Billed On Or Before
- **In Collections or Not In Collections** (you can put a patient in collections in the patient profile using the ‘In Collections’ dropdown)
- **Non-reconciled Insurance Charges** (allows you to show or not show charges based on if they are reconciled by insurance yet or not).
- **Show Last Names That**
 - Start With
 - End With
- **Filter by Patient** (type any patient name)
- **Due Date** (specify the due date of the statement)
- **Select Providers** (allows you to select one or multiple providers and only have their charges shown on the statement).

The screenshot shows a 'Filters' panel with a 'Save Default' button in the top right. The filters are organized into several sections:

- Amount Owed At Least:** A text input field containing the number '0'.
- Show Patients That Were:** A section with two checkboxes: 'Never Billed' (checked) and 'Billed' (checked). Below these are two date pickers: 'Last Billed On or After' and 'Last Billed On or Before', both showing '<MM-dd-yyyy>' and a calendar icon with '15'.
- In Collections or Not In Collections:** Two checkboxes: 'Include 'In Collection' Patients' (unchecked) and 'Include 'Not in Collections' Patients' (checked).
- Non-reconciled Insurance Charges ?** A dropdown menu set to 'Show'.
- Include Aged Accounts Receivable ?** A checked checkbox.
- Show Last Names That:** Two dropdown menus: 'Start With' (set to 'A') and 'End With' (set to 'Z').
- Filter by Patient:** A text input field with a red 'X' icon to its right.
- Due Date:** A date picker set to '01-21-2019' with a calendar icon and '15'.
- Select Providers:** A black button at the bottom of the panel.



Statements – Unbilled Statements

Statements

Patients with Balances

Unbilled Statements

This is the “Unbilled Statements” tab. Statements will only appear here once they are created.

Once created check the statement and click “Print and Bill Checked Statements”. This will send the statements to your printer and will also mark them in ChiroSpring as “Billed” with today’s date.

Print and Bill Checked Statements

If any statements do not print correctly simply “Clear All” and check only the statement(s) you wish to re-print. Then click the “Print and Bill Checked Statements” button again. Once all print successfully you can close out of the Statements app.

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Patients with Balances | Unbilled Statements

Show Last Names That
Start With: A | End With: Z

Load Statements Created
5 Day(s) Ago | Load
By default, only statements created in the last 15 days, that have not been billed, are loaded. To load older unbilled statements, enter the desired days and click Load.

Filter ?
 Show outdated Statements

Provider
 Show provider per charge

Patient	Statement Date	Statement Billed	Patient Owes
<input type="checkbox"/> Abham, John	04/28/17	Never Billed	\$112.50
<input type="checkbox"/> Abraham3, John	04/28/17	Never Billed	\$584.38
<input type="checkbox"/> Alberty, Brian	04/28/17	Never Billed	\$414.48
<input type="checkbox"/> Alberty, Brian, E	04/28/17	Never Billed	\$250.00
<input type="checkbox"/> Alexander, Vicki	04/28/17	Never Billed	\$755.00
<input type="checkbox"/> Alington, Allison	04/28/17	Never Billed	\$96.38
<input type="checkbox"/> Anderson, Steve	04/28/17	Never Billed	\$1,532.00
<input type="checkbox"/> Andresen, Tom	04/28/17	Never Billed	\$1,952.12
<input type="checkbox"/> Ausmus, Sarah	04/28/17	Never Billed	\$80.00
<input type="checkbox"/> Bahama, Tommy	04/28/17	Never Billed	\$80.00
<input type="checkbox"/> Barb5, Austin	04/28/17	Never Billed	\$189.00
<input type="checkbox"/> Barber, Sergio	04/28/17	Never Billed	\$80.00
<input type="checkbox"/> Basu, Bipasha	04/28/17	Never Billed	\$699.00
<input type="checkbox"/> Bates, Tracy	04/28/17	Never Billed	\$1,100.00
<input type="checkbox"/> Beason, Mark, E	04/28/17	Never Billed	\$430.33
<input type="checkbox"/> Beck, Odell	04/28/17	Never Billed	\$392.12
<input type="checkbox"/> Beenan, Tony	04/28/17	Never Billed	\$60.00

Check All | Clear All | View Highlighted | Print and Bill Checked Statements

Close | Dock | Print Settings



Dashboard – View Statements Tile

As mentioned, once a statement is created it is saved on file in the patient's Dashboard/View Statements tile. Here is an example of a patient that has some statements that has been created.

Date Created:	08/06/14
Date Billed:	Never
Amount Due:	\$32.50

Once a statement is billed it will include the "Date Billed" here as well.

Date Created:	08/29/14
Date Billed:	08/29/14
Amount Due:	\$25.25

View Statements - Chad Thompson THOCH001 DOB: 12/16/1979 Age: 39 INS: Not Assignment CPT copyright 2013 American Medical Association. All rights reserved.

Date Created:	05/29/18
Date Billed:	Never
Amount Due:	\$85.00
Date Created:	03/22/18
Date Billed:	Never
Amount Due:	\$-105.00

Spinal Care Chiropractic
234 Western
Davenport, IA 123456789
563-545-4565
info@gmail.com

Chad Thompson
1234 Foxborough Ct.
Davenport, IA 54545

Patient: Chad Thompson
Patient Account: THOCH001
Statement Date: 5/29/18
Due Date: 6/18/18
Amount Due: \$85.00
Amount Enclosed: \$ _____

If Credit Card Payment, Please Complete.

CARD COMPANY (i.e. VISA, MASTERCARD)	AMOUNT
CARD NUMBER	CSC (3 digits on back)
SIGNATURE	EXP. DATE

PLEASE CUT AND RETURN THIS STUB WITH YOUR PAYMENT

DATE	DESCRIPTION	UNITS	CHARGED AMOUNT	SAVINGS	INS. PAID	COPAY	CO-INS	DEDUCT.	PATIENT PAID	PATI OW
05/29/18	98941 Manipulation 3-4 Regions	1	40.00	0.00	0.00	0.00	0.00	0.00	0.00	40.00
05/29/18	99201-25 New Patient Problem Focused Examination	1	45.00	0.00	0.00	0.00	0.00	0.00	0.00	45.00

Load more

Close
Dock
Create Current Statement
Print



Statements

To the right is a patient statement. It is designed to be folded and inserted into a #10 Security (window) envelope. This way you do not have to handwrite yours or the patient's address. This is a huge time saver!

Spinal Care Chiropractic
1515 Brady St.
Davenport, IA 52806
563-545-4565

Patient: Chad Thompson
Patient Account: THOCH000
Statement Date: 10/31/14
Due Date: 11/20/14
Amount Due: \$15.00
Amount Enclosed: \$_____

Chad Thompson
123 Sunny Dr
Davenport, IA 54356

If Credit Card Payment, Please Complete.

CARD COMPANY (i.e. VISA, MASTERCARD)	AMOUNT
CARD NUMBER	CSC (3 digits on back)
SIGNATURE	EXP. DATE

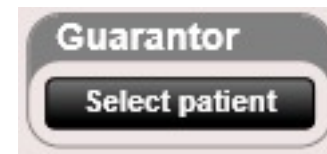
The statement also shows the aged balance, so your patients know how "delinquent" they have been on payment.

PLEASE CUT AND RETURN THIS STUB WITH YOUR PAYMENT

The patient can pay by check or credit card. The patient cuts and returns the top portion of the statement and mails it back to you.

DATE	DESCRIPTION	UNITS	CHARGED AMOUNT	INS. SAVINGS	INS. PAID	COPAY	CO-INS	DEDUCT.	PATIENT PAID	PATIENT OWES
10/31/14	99205-25 New Patient Comprehensive (	1	150.00	0.00	0.00	0.00	15.00	0.00	0.00	15.00
AMOUNT DUE		0 TO 30 DAYS	31 to 60 DAYS	61 TO 90 DAYS	91 TO 120 DAYS	121+ DAYS	DUE DATE			
\$15.00		\$15.00	\$0.00	\$0.00	\$0.00	\$0.00	11/20/2014			

Power Tip: Use the "Guarantor" field in the patient profile to indicate the guarantor for a patient. For example, if Sally Joe is the child of Mary Joe, you would go to the profile of Sally Joe and make Mary Joe the guarantor. Then, the statement would print with the guarantor's name and mailing address but would still include Sally Joe as the Patient.





Statements

Print Settings allows you to configure your patient statements to align business address and patient address in a #10 double window security envelope. To align your statements, follow the instructions within Print Settings and print several test pages by clicking the “Print Test Page” button until everything is aligned. Then save changes.



The “Print Settings” button is accessible in the Statements app.

A screenshot of the Print Settings interface. It features four horizontal sliders for adjusting margins: Left Margin, Top Margin, Right Margin, and Bottom Margin. Each slider has a green arrow on the left and a green arrow on the right, with the number '32' displayed in the center. Below the sliders is a black button labeled "Print Test Page". At the bottom of the interface are two buttons: a green "Save & Close" button and a red "Cancel" button.

Left Margin 32

Top Margin 32

Right Margin 32

Bottom Margin 32

Print Test Page

By default your printer may not properly align patient statements for proper use with a #10 double window security envelope. Use this screen to align your printer. Follow the procedures below (ensure there is blank paper in your printer before starting):

1. Print a test page by clicking button "Print Test Page".
2. Adjust the top and left margins until the 'To' and 'From' addresses are align with the envelope. After each adjustment, print a new test page to verify alignment. Repeat until centered. Note, increasing the top or left margin value will shift the printed text down or right, respectively.
3. Once satisfied with the final text alignment, click 'Save'.
4. Logout and then re login to apply these settings.

Save & Close Cancel



Statements

Here is an example of a statement that has been folded and inserted into the proper #10 double window security envelope.

Spinal Care Chiropractic
1515 Brady St.
Davenport, IA 52806
563-545-4565

Mark Johnson
3434 Durant St.
Davenport, IA 88787



Statements

These are the envelopes to get (any brand is fine as long as it meets the same standard requirements).

Office DEPOT.

clean seal™
peel off
to close

convenient
no moisture
no mess

#10 security
double-window
envelopes

envelopes de sécurité à
deux fenêtres
sobres de seguridad con
dos ventanas

WINDOW
fenêtre | ventana

250
COUNT
unites | unidades

security pattern
ensures privacy

4 1/8 in x 9 1/2 in
(10.5 cm x 24.1 cm)
24 lb (90 g/m²)
Item 679-609



Statements

The statement shows

- Date
- Description
- Units
- Charged Amount
- Ins. Savings
- Ins. Paid
- Copay
- Co-Ins
- Deduct.
- Patient Paid
- Patient Owes

Power Tip: The statement “Footer” can be customized in Settings/Practice Info

You can also customize on a PER PATIENT BASIS a statement footer in the Patient Profile.

Custom Statement Footer

You need to pay us money!!!

DATE	DESCRIPTION		UNITS	CHARGED AMOUNT	INS. SAVINGS	INS. PAID	COPAY	CO-INS	DEDUCT.	PATIENT PAID	PATIENT OWES
03/13/14	98941	Manipulation 3-4 Regions	1	40.00	0.00	0.00	0.00	0.00	0.00	0.00	40.00
AMOUNT DUE		0 TO 30 DAYS	31 to 60 DAYS	61 TO 90 DAYS	91 TO 120 DAYS	121+ DAYS	DUE DATE				
\$40.00		\$0.00	\$40.00	\$0.00	\$0.00	\$0.00	\$0.00		05/29/2014		

#Reports





Reports

The Reports app is available on the front desk and contains many useful reports. Presently the app contains the following reports.

- **ACH Payment Report**
 - Lists all ACH payments by a selected date range
- **Appointment Schedule Report**
 - Lists all appointments and breaks them down by provider
- **Charge Detail Report**
 - Lists every charge for a date range
- **Charge Summary Report**
 - A general charge report that lists the number of units for a particular charge
- **Insurance Accounts Receivable Report**
 - Shows all of the un-reconciled insurance charges. Shows if they are 30, 60, 90 or more days old.
- **Insurance Payments Detail Report**
 - Shows insurance payments (must be input by Reconcile app)
- **Insurance Plans Expiring**
 - Shows all insurance plans that are expired or will soon expire
- **Missed, Canceled, & Rescheduled appointments**
 - Shows appointments that have have not been completed
- **Missing in Action Report**
 - This report helps keep track of patients that have stopped coming in

The screenshot shows a mobile application interface titled "Available Reports". It features a scrollable list of report names, each in a light gray button-like box. The "ACH Payment Report" is highlighted in cyan. At the bottom of the list is a dark gray button labeled "Generate".

Available Reports
ACH Payment Report
Appointment Schedule Report
Charge Detail Report
Charge Summary Report
Clinic Location Financial Summary Re
Clinic Location Payment Summary Re
How Heard About Report
Insurance Accounts Receivable Repo
Insurance Carrier Receivable Report
Insurance Charges by Visit with Carr
Insurance Payments Detail Report
Insurance Plans Expiring Report
Insurance/Cash Usage Report
Missed, Canceled & Rescheduled App
Missing In Action Report
Patient Accounts Receivable Report
Patient Birthdate Report
Patient Cash Case Report
Patient Demographic Report

Generate



Reports

The Reports app is available on the front desk and contains many useful reports. Presently the app contains the following reports.

- **Patient Accounts Receivable Report**
 - Shows every patient and the amount they owe
- **Patient Birthdate Report**
 - Allows you to create a list of patients with birthdays
- **Patient Demographics Report**
 - Generate a report by patient showing demographic, contact and insurance information
- **Patient Future appointment Report**
 - Shows a selected patient's future appointments
- **Patient Negative Balance Report**
 - Shows all patients with a credit (negative balance) on their account
- **Patient Over/Under applied Report**
 - Shows all patients with an under applied or over applied value on their Ledger
- **Patient Payments Detail Report**
 - Shows all patient payments and their details
- **Patient Referral Report**
 - Allows you to track patient referrals for a selected patient

The screenshot shows a mobile application interface titled "Available Reports". It features a list of 20 report options, each in a grey button. The "ACH Payment Report" is highlighted in cyan. At the bottom of the list is a black button with the text "Generate".

Available Reports
ACH Payment Report
Appointment Schedule Report
Charge Detail Report
Charge Summary Report
Clinic Location Financial Summary Re
Clinic Location Payment Summary Re
How Heard About Report
Insurance Accounts Receivable Repo
Insurance Carrier Receivable Report
Insurance Charges by Visit with Carr
Insurance Payments Detail Report
Insurance Plans Expiring Report
Insurance/Cash Usage Report
Missed, Canceled & Rescheduled App
Missing In Action Report
Patient Accounts Receivable Report
Patient Birthdate Report
Patient Cash Case Report
Patient Demographic Report

Generate



Reports

The Reports app is available on the front desk and contains many useful reports. Presently the app contains the following reports.

- **Patients by Insurance Carrier Report**
 - Allows you to show a list of patients associated with a selected Insurance Carrier
- **Payment Summary Report**
 - A summary of payments broken down into type (e.g. cash)
- **Practice Analysis Report**
 - Shows various statistics to monitor the health of your practice. The report also compares this years statistics with last years.
- **Product Inventory Report**
 - Displays all products, quantities and re-order points
- **Product Shortage Report**
 - Beneficial for re-ordering products and shows products below the re-order trigger.
- **Sold Products Detail Report**
 - Lists all products sold and their details for a selected date range
- **Sold Products Summary Report**
 - Lists a summary of products sold for a selected date range
- **Unfinished SOAP Note Report**
 - Displays a list of unfinished SOAP Notes by provider
- **User Earnings Detail Report**
 - Shows the amount a user has earned for a particular date range

The screenshot shows a mobile application interface titled "Available Reports". It features a list of 18 report options, each in a grey button. The "ACH Payment Report" is highlighted in cyan. At the bottom of the list is a black button with the text "Generate".

Report Name
ACH Payment Report
Appointment Schedule Report
Charge Detail Report
Charge Summary Report
Clinic Location Financial Summary Re
Clinic Location Payment Summary Re
How Heard About Report
Insurance Accounts Receivable Repo
Insurance Carrier Receivable Report
Insurance Charges by Visit with Carr
Insurance Payments Detail Report
Insurance Plans Expiring Report
Insurance/Cash Usage Report
Missed, Canceled & Rescheduled App
Missing In Action Report
Patient Accounts Receivable Report
Patient Birthdate Report
Patient Cash Case Report
Patient Demographic Report



Reports

To generate a report, click the report you want and click the generate button below (or double click the report).



For some reports a dialog box will open. Select the date range. The report will then generate and be displayed in the right pane.

Select Date Range

Select Date Range

From

Sun	Mon	Tue	Wed	Thu	Fri	Sat
29	30	1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31	1	2
3	4	5	6	7	8	9

To

Sun	Mon	Tue	Wed	Thu	Fri	Sat
29	30	1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31	1	2
3	4	5	6	7	8	9

OK Cancel

Available Reports

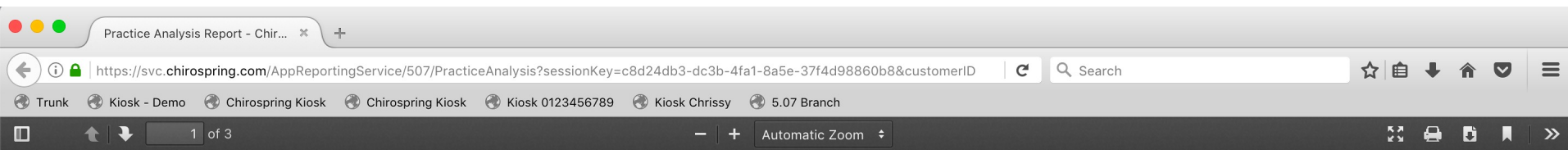
- ACH Payment Report
- Appointment Counts
- Appointment Schedule Report
- Charge Detail Report
- Charge Summary Report
- Clinic Location Financial Summary Report
- Clinic Location Payment Summary Report
- How Heard About Report
- Insurance Accounts Receivable Report
- Insurance Carrier Payments
- Insurance Carrier Receivable Report
- Insurance Charges by Visit with Carrier Details Report
- Insurance Payments Detail Report
- Insurance Plans Expiring Report
- Insurance/Cash Usage Report
- Missed, Canceled & Rescheduled Appointments Report
- Missing In Action Report
- Patient Accounts Receivable Report
- Patient Appointment History
- Patient Birthdate Report

Generate



Reports

Here is an example of the "Practice Analysis Report." Reports will generate inside of your default web-browser.



Practice Analysis Report

1/1/2019 through 1/10/2019

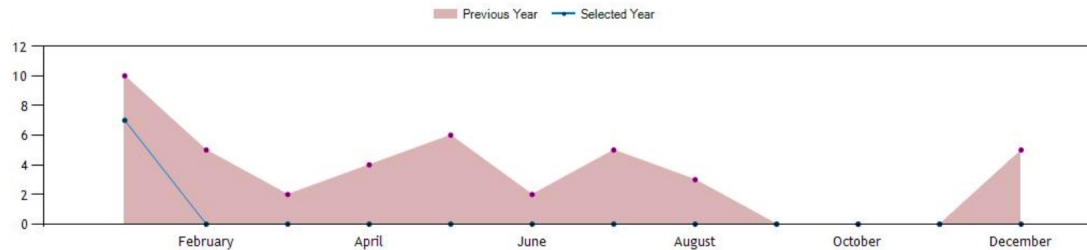
Created 1/10/2019 1:24 PM

All Selected Providers

Appointments			Appointment Type		
Total	16		Unknown	1	(6.2%)
Missed	9	(56.2%)	Scheduled	15	(93.8%)
Canceled	0	(0%)	Walk In	0	(0%)
Rescheduled	0	(0%)	Call In	0	(0%)
Completed	7	(43.8%)			
Kept	7	(43.8%)			

Kept = Total - (WalkIn + Missed + Canceled + Rescheduled)
 % Kept = Kept / (Unknown + Scheduled + CallIn)

Selected Year Info			Previous Year Info		
New Patients	0	(0%)	New Patients	0	(0%)
Existing Patients	7	(100%)	Existing Patients	0	(0%)



Brian Albery

Appointments			Appointment Type		
Total	16		Unknown	1	(6.2%)



Reports

Because reports generate in a web-browser you are able to use a dual-monitor setup. This allows you to view ChiroSpring on say the left monitor and one or multiple reports on the right monitor.



#Tasks



Tasks

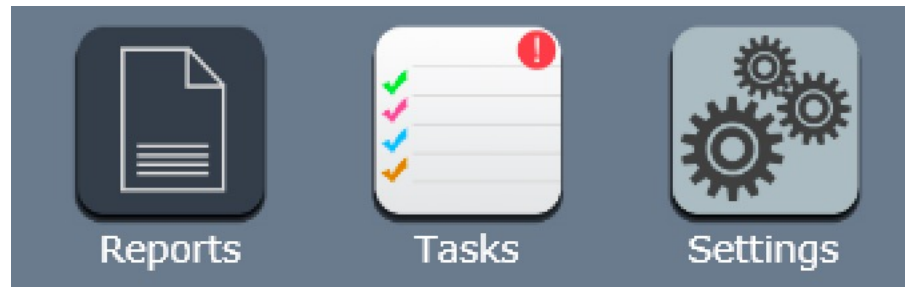


The Tasks app is a great way for recording tasks to help you and your practice stay organized. The app is simple yet highly powerful.

On the left you can create GROUPS. For example, you might create a group called “Insurances to Call”.

Within a group you can then create individual TASKS. Tasks can have a name and a note field, as well as a due date or even an assignee.

If a date is past due, the Task’s icon will update with a red (!) Icon. This lets you know there is an overdue task. This is based on the Assigned to User. Therefore, if YOU do not have overdue tasks, you will not see the red (!) Icon.



Tasks



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Groups Show Active Show Complete **Tasks** Due Date Descending ▼

Pre-Certs	<input type="checkbox"/> Get a new printer	Assigned to: Vishal, 05/12/2017
Patients to Call	<i>cfgb</i>	
Office Supplies to Order	<input type="checkbox"/> Paper	01/27/2017
Insurances to Call	<input type="checkbox"/> Pens	01/12/2017
Everyone Clean!!!!	<i>Buy 10</i>	
Cleaning		
Call insurance		
Bills		

Add **Edit** **Delete** Show only tasks I created or assigned to me **Mark Complete** **Add** **Edit Checked** **Delete Selected**

Close **Dock** **Save**

Tasks



Here we are creating a task with a due date and an assignee.

A screenshot of a task creation dialog box. It has a light beige background and rounded corners. At the top, there's a dark grey header with the text "Task Name". Below it is a text input field containing "Joe Smith". The next header is "Task Due Date", with a date input field showing "6/29/15" and a calendar icon with "15" and a red "X". The third header is "Assign To", with a dropdown menu showing "Dr. Brian DC" and a red "X". The fourth header is "Notes", with a text area containing "Find out why this patient keeps missing appointments." At the bottom, there are two buttons: "OK" and "Cancel".

Task Name

Joe Smith

Task Due Date

6/29/15 15 X

Assign To

Dr. Brian DC ▼ X

Notes

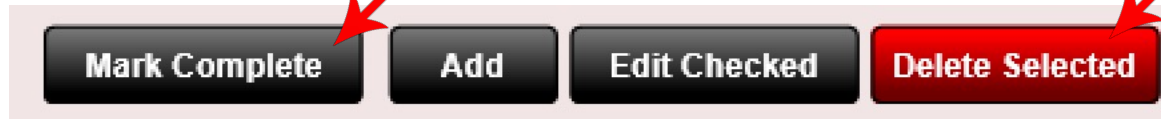
Find out why this patient keeps missing appointments.

OK Cancel



Tasks

Tasks can be deleted or marked complete. If you plan on re-opening a common task (e.g. ordering computer paper) use the Mark Complete option.



Tasks	
Groups	Tasks
Pre-Certs	<input checked="" type="checkbox"/> Get a new printer <i>crgb</i>
Patients to Call	
Office Supplies to Order	
Insurances to Call	
Everyone Clean!!!!	
Cleaning	
Call insurance	
Bills	

#Dashboard

Dashboard - Brady M Albery ALBBR000 DOB: 12/16/1979 Age: 40 INS: BCBS/Aetna CPT copyright 2019 American Medical Association. All rights reserved.



Profile



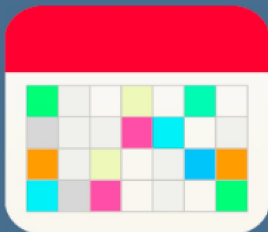
Insurance Cases



Condition Cases



Ledger



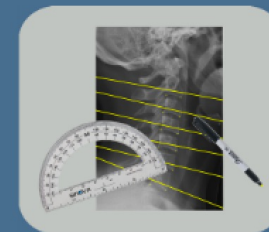
Visits



SOAP Notes



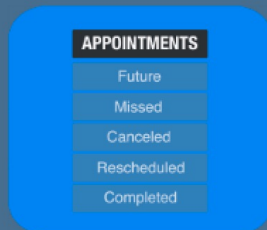
Documents



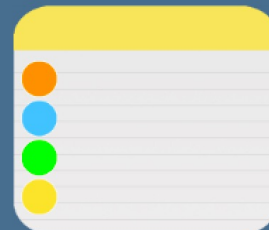
Images



View Statements



Appointments



Patient Notes



Stop Managers



Close

Dock

Edit SOAP Note

Refresh

Front Desk

Provider View

Patient Flow

Monday, Jan 20, 2020

9:06 PM

Dr. Brian Albery

Log Out

KB

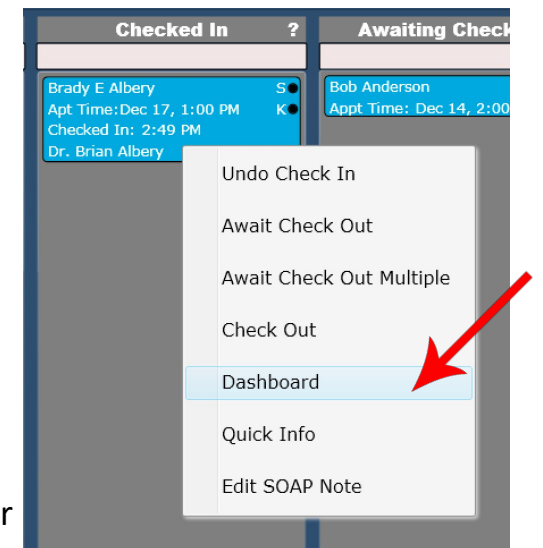
Dashboard

The Patient Dashboard is the central hub for patient data. It contains the complete profile for that patient and is neatly broken down into the following sections.

- Profile
- Insurance Cases
- Ledger
- Visits
- SOAP Notes
- Documents
- Images
- View Statements
- Labs
- Vitals
- Stop Managers
- MIST
- Health History
- Condition Case
- appointments
- Immunizations
- CPOE
- Patient Notes
- Review of Systems
- Med Rec
- Amendments
- Patient Education
- Connect EHR
- Transfer Care
- CDA Files

To get to the patient dashboard right click on the patient name when on the Front Desk. A menu will appear. Click on “Dashboard.” This will launch the Patient Dashboard.

Power Tip: Remember you can arrange the order of your Dashboard tiles on per user basis in Settings/Arrange Dashboard. Just log in as that user and arrange away. 😊



Patient Dashboard - Tiles

The following pages will explore in detail each of the Dashboard Tiles. Here is a brief summary of each tile. Note your tile arrangement may be different than shown. You can customize the order of your dashboard tiles in Settings/Arrange Dashboard.

- **Profile**
 - Personal Info, Demographics, Profile Picture, Driver License Image, Hobbies
- **Insurance Cases**
 - Patient's Insurance Information. Create as many active insurance cases as you want
- **Ledger**
 - Review and Edit patient transactions
 - Print Ledger
 - Add payments and apply payments
- **Visits**
 - Lists every patient visit. View details from the visit such as the receipt, charges, diagnosis, etc. Update or change the insurance case or charge billing states if necessary.



Patient Dashboard - Tiles

The following pages will explore in detail each of the Dashboard Tiles. Here is a brief summary of each tile.

- **SOAP Notes**
 - Lists every patient SOAP note. SOAPs can be viewed, printed or edited from here.
- **Documents**
 - Store patient documents.
- **Images**
 - Store patient images including x-rays, thermography scans, MRI's and more.
 - Use custom line drawing annotation tools such as George's Line, Disc Plane Tool, Cobb's Angle, Ilium Analysis and more.
- **View Statements**
 - Allows you to view every statement ever created/billed for your patient.
- **Care Plans**
 - Create and manage patient care plans.



Patient Dashboard - Tiles

The following pages will explore in detail each of the Dashboard Tiles. Here is a brief summary of each tile.

- **Labs**
 - Create lab orders or enter lab results.
- **Vitals**
 - View or edit patient vitals.
- **Stop Managers**
 - Create custom patient “Alerts” based on encounter number or date. Set them to display in almost any location. Set repeat based on encounter number or date.
- **MIST History**
 - Medications, Allergies, Problems (Illnesses), Surgeries, Traumas



Patient Dashboard - Tiles

The following pages will explore in detail each of the Dashboard Tiles. Here is a brief summary of each tile.

- **Health History**
 - Record smoking status, cognitive status and family history information.
- **Condition Cases**
 - Lists the patient's conditions
- **Appointments**
 - View appointment history
 - Edit "Reason Missed or Cancelled"
 - View Reason for Visit
 - View appointment Note
- **Immunizations**
 - View, edit or enter patient immunizations.



Patient Dashboard - Tiles

The following pages will explore in detail each of the Dashboard Tiles. Here is a brief summary of each tile.

- **CPOE**
 - Create medication or supplement orders.
- **Patient Notes**
 - Write general notes about your patient.
- **Review of Systems**
 - View or print past review of systems.
- **Med Rec**
 - Enter medications from a different facility. Record which medications you want to keep as part of your final list.
- **Amendments**
 - Record a patient request for a profile change such as name or DOB.



Patient Dashboard - Tiles

The following pages will explore in detail each of the Dashboard Tiles. Here is a brief summary of each tile.

- **Patient Education**

- View medications, allergies, problems and labs and use the info button to identify educational materials. Document when patient education was provided.

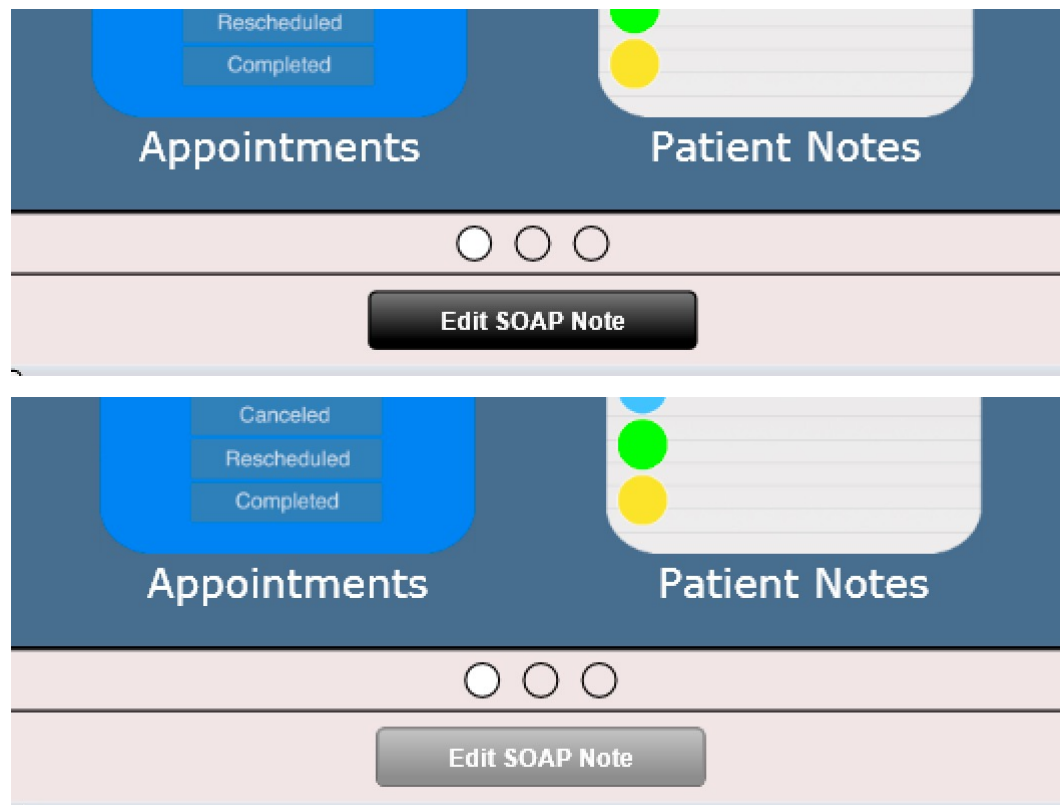
- **Transfer Care**

- This is used when transferring your patient to another care setting. A Summary of Care CCDA can be sent to another provider who is receiving the patient.



Patient Dashboard

You may have noticed an “Edit SOAP Note” button at the bottom of the Patient Dashboard. This button is black if it is selectable or greyed out if non-selectable. The only time the “Edit SOAP Note” button is selectable is when the patient is in the Checked In list box or if a SOAP Note has previously been started for the patient. Clicking the “Edit SOAP Note” button will open the SOAP Note for that visit.



HCFA Fields

Throughout ChiroSpring you will find red flags next to areas of data input. These red flags indicate which HCFA field you are populating.

Some areas of data input may have more than one HCFA flag. Do not worry, ChiroSpring knows when to use that data and where to place it on the HCFA form. For example, when adding an insurance there are both boxes 9a and 11 on the Policy/FECA Group # box. ChiroSpring will populate that insurance's group number appropriately for you depending on if this is primary or secondary insurance.

Every single field on the HCFA form can be populated somewhere in ChiroSpring. Using these flags will ensure you are putting in the correct information. However, not every text field that has a red flag is required. Therefore do not be alarmed if some of your fields are left blank. For example, a provider's Medicare ID# may never be used. For completeness ChiroSpring provides these fields should the need to use them arise.

NOTE: There is a separate “**HCFA Fields Where Are They?**” document in our Help Center. Just search for it.



A screenshot of a text input field with a grey header containing the text "First". To the right of the input field is a red square containing the white number "2".



A screenshot of a text input field with a grey header containing the text "Policy/FECA Group #". To the right of the input field are two stacked red squares. The top square contains the white text "9a" and the bottom square contains the white text "11".

#Profile (Dashboard)





Dashboard - Profile

The Patient Profile contains all of the following information

- Personal Info
- Demographics
- Profile Picture
- Driver License Image
- Hobbies
- Emergency Contact
- Employment Info
- Primary Care Provider
- Acknowledgements
- Payment Methods

Personal Info
Demographics
Profile Picture
Driver License Image
Hobbies
Emergency Contact
Employment Info
Primary Care Provider
Acknowledgements
Payment Methods



Dashboard - Profile

Personal Info Tab

Contains the patient's personal information. Note HCFA fields are indicated by the red "flags".

Prefix	First Chad	2	Last Thompson	2	MI	2	Suffix	Nickname
DOB 7/30/1997	3	Age 18	Sex M	3	SSN	Email Address bob@gmail.com		
Address 123 Sunny Dr	5	City Davenport	5	State Abbr. IA	5	Zip 54356	5	
Phone 1 555-332-3443	5	Type Mobile	Phone 2	Type Home	Fax			



Dashboard - Profile

Notes (Visible in Check-In Dialog) ?

Default Reason/Visit Note (Copies into Reason/Visit Note when scheduling new appointment) ?

Wants message every visit

Account

THOCH001

26

Fee Schedule ?

Normal

Job Status

Unknown

Marital Status

Unknown

Referred By ?

Select patient

How Heard About ?

Select Option

Guarantor ?

Select patient



Preferred Provider ?



In Collections ?

No



Is Active

Active



Is Pregnant



Kiosk Pin ?

1234

Reset Kiosk Account

Appt Reminder ?

None



Message Contact ?

None



Preferred Location

Main



Patient Portal

Not Enrolled



Custom Receipt Footer



Custom Statement Footer





Dashboard - Profile

Personal Info Tab

- **Account #**
 - Automatically set, however you can overwrite the default with any value you want
- **Fee Schedule**
 - In Settings you can create multiple prices per service. Easily set a patient to whichever fee schedule you want.
- **Job Status** – Record job status (not required)
- **Marital Status** – Record marital status (not required)
- **Is Active**
 - Inactive patients will not appear in the Recent Patient's list box (unless you search, and press enter)
- **Is Pregnant** – Use this field to indicate pregnancy status for females. Pregnancy status will be shown at the top of the menu bar when a patient file is open.
- **Preferred Provider**
 - Lists the preferred provider. This information is also visible when scheduling an appointment
- **In Collections** – Put patients in collections if they are not paying. Then use the check box in the Statements app so that you filter and do not send them a statement. If they are in collections, you would not want to continue sending them a statement.
- **Referred By**
 - Lists the patient that referred the patient
- **How Heard About**
 - Used to track how patients heard about you for marketing purposes. Used in conjunction with the “How Heard About” app in Settings as well as the Practice Analysis Report and How Heard About Report.



Dashboard - Profile

Personal Info Tab

- **Guarantor**
 - The guarantor is the person in charge of this patient's bills. For example, select the patient's mother if they are a child. This information is used when printing Patient Statements.
- **Appt Reminder**
 - Set patient reminders for Voice, Text, Email. appointment reminder setup is in Settings/Practice Info and an account through www.remindercall.com is required for their services.
- **Message Contact**
 - This is the contact method your patient prefers if you need to contact them by message using the "Patient List" app.
- **Preferred Location**
 - An optional field but will be used for several reports if the user generates them "By Location".
- **Patient Portal**
 - Use this field to enroll your patient into the Patient Portal. A valid email address is required to enroll your patient as they will be emailed further instructions on how to log into the portal. This option is available in our Ultimate Package.
- **Kiosk Pin**
 - If you are using the Patient Self Check-in Kiosk your patient will need a PIN to check-in. We recommend purchasing a number pad "keyboard" visible on your front desk. Then click the Kiosk Pin box (in the Profile) and have them type their preferred pin.



Dashboard - Profile

Personal Info Tab

Notes

This field can be used for general patient notes and will be seen on the “Check-in Patient” dialog box when you check in a patient at the Front Desk.

Notes (Visible in Check-In Dialog) ?

Get insurance information

Default Reason/Visit Note

This note will be copied into the ‘Default Reason/Visit Note’ box when you schedule an appointment. It will also be displayed in the Intro Tab within the Edit SOAP screen. This note is NOT part of the SOAP Note itself but WILL appear in the clinical summary per EHR certification requirements.

Default Reason/Visit Note (Copies into Reason/Visit Note when scheduling new appointment) ?

Wants massage every visit



Dashboard - Profile

Personal Info Tab

Custom Receipt Footer

Use this field to populate text on the patient's receipt. For example, if you find out the patient's insurance covers therapy you may consider adding this to their receipt, so they are aware.

Custom Receipt Footer

Your insurance covers orthotics!

Custom Statement Footer

Use this field to populate text on the patient's statement. This note will populate when you generate the patient statement.

Custom Statement Footer

You need to pay us money!!!



Dashboard - Profile

Demographics Tab

- Language
- Dominance
- Race
- Ethnicity
- Previous Name
- Gender Identity
- Sexual Orientation

Previous Name

Type	Previous Name
<input type="text"/>	<input type="text"/>

Gender Identity

Identifies as male gender

Sexual Orientation

Hetrosexual

Language

Dominance

Race

Declines to Specify

White

Asian

Black or African American

American Indian or Alaska Native

Native Hawaiian Or Pacific Islander

Other

Other

Ethnicity

Hispanic or Latino

Not Hispanic or Latino

Declines to Specify



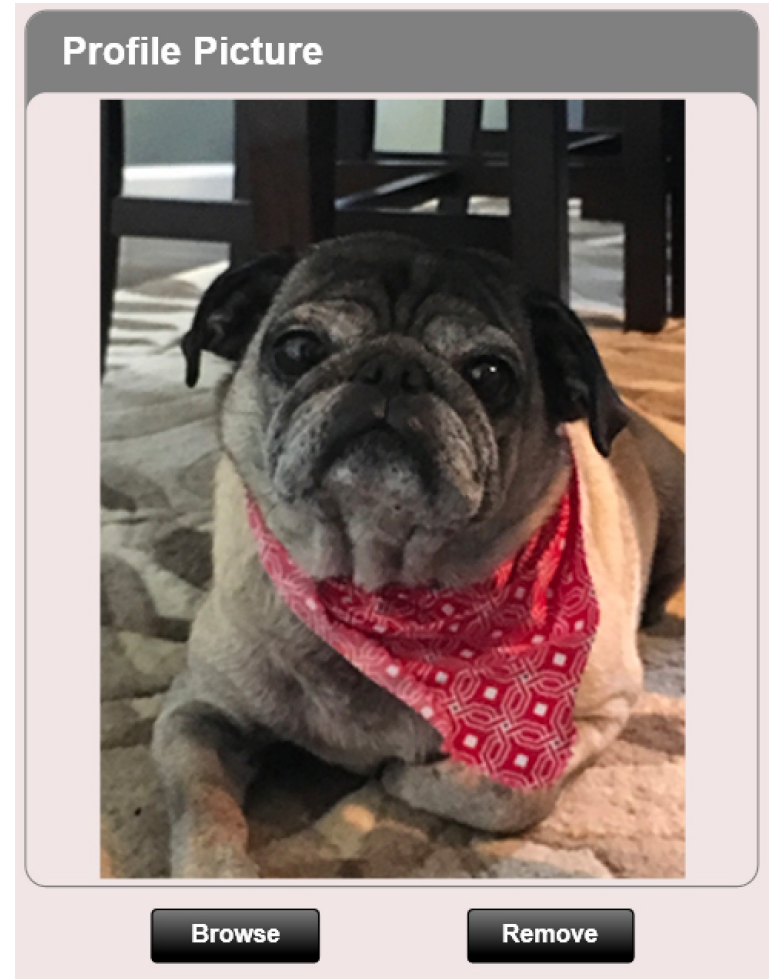
Dashboard - Profile

Profile Picture Tab

Add the patient's profile photo. You will see the profile photo at Check-in as well as when scheduling the patient. The profile photo is also shown in Edit SOAP on the Intro tab. This image is also available in the Quick Info dialog.

NOTE: You must upload an image less than 150 kb. Larger images will auto-resize. This is to conserve cloud space and for better speed performance.

Power TIP: Use our iPhone app to snap a photo which uploads into ChiroSpring.






Dashboard - Profile

Driver License Image Tab

Add the patient's driver's license image Front or Back.


Use the checkboxes if you want to use the drivers license picture in the Check-In Dialog or Edit SOAP. This is a global setting for all patients.

License Front



Browse **Remove**

License Back



Browse **Remove**

- Use Drivers License in Check In Dialog
- Use Drivers License in Edit SOAP Intro Tab

These check boxes are global and will copy to all patients.



Dashboard - Profile

Hobbies Tab

Enter the patient's hobbies

Hobbies

Patient enjoys playing golf



Dashboard - Profile

Emergency Contact

Enter emergency contact info for the patient. This section can be populated at the Patient Kiosk by the patient.

Profile - Chad Thompson THOCH000 DOB: 07/30/1947 Age: 69 INS: Blue Cross and Blue Shield

Personal Info	Prefix	First Mark	Last Thompson	MI	Suffix	Nickname
Demographics	DOB ▼ X	Age	Sex ▼	SSN	Email Address	
Profile Picture	Address 3244 Madison Ave		City Davenport	State Abbr. IA	Zip 65644	
Driver License Image	Phone 1 555-333-4533	Type Mobile ▼	Phone 2	Type Home ▼	Fax	
Hobbies	Notes					
Emergency Contact	Relationship to Patient Father ▼					
Employment Info	Copy Existing Patient/Non-Patient					
Acknowledgements						



Dashboard - Profile

Employment Info

Enter employment info and job status information for your patient. This section can be populated at the Patient Kiosk by the patient.

Profile - Chad Thompson THOCH000 DOB: 07/30/1947 Age: 69 INS: Blue Cross and Blue Shield

Personal Info	Job Status Employed ▼	Occupation <input type="text"/> Software developer X		
Demographics	Employer Details			
Profile Picture	Employer Name ChiroSpring	Address 1234 Madison Ave		
Driver License Image	City Davenport	State Abbr. IA	Zip 55434	
Hobbies	Phone 1 555-555-5555	Type Work ▼	Phone 2 <input type="text"/>	Type Mobile ▼
Emergency Contact	Fax <input type="text"/>	Email Address <input type="text"/>		
Employment Info				
Acknowledgements				



Dashboard - Profile

Acknowledgements

View or record patient acknowledgments. For example. If your patient signed a HIPAA document, you can record this was done. This section can be populated at the Patient Kiosk by the patient.

Profile - Brady Albery ALBBR000 DOB: 12/16/1979 Age: 39 INS: Blue Cross

Date Requested	Acknowledgment	Acknowledged at Kiosk	Acknowledged with Signature
01/11/2019	Verification of Payment		
01/11/2019	Verification of Privacy	01/11/2019	
01/11/2019	Authorization to Contact	01/11/2019	
01/11/2019	Verification of Payment	01/11/2019	
01/11/2019	Verify Information	01/11/2019	

Personal Info

Demographics

Profile Picture

Driver License Image

Hobbies

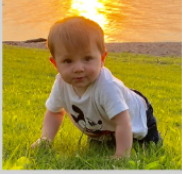
Emergency Contact

Employment Info

Primary Care Provider

Acknowledgements

Payment Methods



Add Acknowledgement **View Acknowledgement** **Delete Acknowledgement** **Record Patient Signed Acknowledgement**

Close **Save** **Dashboard**



Dashboard - Profile

Payment Methods





Use this section to add a credit card, debit card or ACH (bank) payment method. You can then use a stored payment method when taking payment at checkout or in the patient ledger.

Profile - Chad A Thompson TherapyTHOCH DOB: 12/12/1957 Age: 59 INS: BLUE CROSS

- Personal Info
- Demographics
- Profile Picture
- Driver License Image
- Hobbies
- Emergency Contact
- Employment Info
- Primary Care Provider
- Acknowledgements
- Payment Methods**

XXXX-XXXX-XXXX-2229	Credit	Expiration: 04/18
XXXX-XXXX-XXXX-4111	Credit	Expiration: 12/25
XXXX-XXXX-XXXX-4111	Credit	Expiration: 12/25
XXXX-XXXX-XXXX-0010	Credit	Expiration: 12/18
XXXX-XXXX-XXXX-1119	Credit	Expiration: 04/18
2121	ACH	

[Add Credit Card on File](#) [Add Debit Card on File](#) [Add ACH on File](#) [Delete](#)



#Insurance Cases (Dashboard)





Dashboard – Insurance Cases

Insurance can be a complicated matter. ChiroSpring makes it easy. Click on the Insurance tile on the Dashboard. Doing so will open up the Insurance Summary Screen.

The screen is broken up into two pieces. On the left is a list box that contains all of your Insurance Cases. Open Cases are on the top portion of the list box and Closed Cases are at the bottom.

Selecting an insurance case will display its information on the right. This summary information consists of:

- Insurance Case Name
- Case Number
- Date Opened
- Date Closed
- Case Description
- Hold Charges (Yes or No)
- Billing Notes
- Primary Insurance
- Secondary Insurance
- Tertiary Insurance

Insurance Cases - Chad A Thompson TherapyTHOCH DOB: 12/12/1957 Age: 59 INS: CPT copyright 2013 American Medical Association. All rights reserved.

Open Cases	Case Name	Case No.	Start Date	End Date	Hold Charges
BLUE CROSS	BLUE CROSS		03-26-2017	<MM-dd-yyyy>	No

Start Date: Mar 26, 2017
Blue Cross/Medicare
Start Date: Jan 22, 2017
bsbs tt
Start Date:
Cash
Start Date: Jul 30, 2014

Closed Cases
21241
to Apr 18, 2017
Attorney - John Smith
Nov 11, 2016 to Nov 11, 2016
Attorney - John Smith
Aug 27, 2014 to Dec 20, 2016
Blue Cross
Jan 11, 2017 to Apr 18, 2017
Blue Cross
Jan 11, 2017 to Jan 11, 2017
Blue Cross

Case Description

Billing Notes

Condition

Related To: 10
None

Place State: 10b

Claim Codes: 10d

Attorney Select Remove

Name: None
Phone:
Fax:
Email:
Address:

Qual Other Claim ID 11b

Primary Insurance Edit

Carrier: Blue Cross/Blue Shield
Plan Name: Blue Cross
Insured's ID #: 897987
Employer/School:

Insurance Phone: 800-884-7788
Claim Type: Export
Policy Group #: 987987
Relation to Insured: Self

Copay: \$20.00
Coinsurance: 10%
Deductible: Not Met

Secondary Insurance Add Delete Edit

Carrier:
Plan Name:
Insured's ID #:
Employer/School:

Insurance Phone:
Claim Type:
Policy Group #:
Relation to Insured:

Copay:
Coinsurance: 0%
Deductible:

Tertiary Insurance Add Delete Edit

Carrier:
Plan Name:
Insured's ID #:
Employer/School:

Insurance Phone:
Claim Type:
Policy Group #:
Relation to Insured:

Copay:
Coinsurance: 0%
Deductible:

CAUTION: Edit insurances carefully! Any changes made will affect ALL previous claims referencing that insurance. Generally, create a new Insurance Case if a patient changes a primary, secondary, and/or tertiary insurance plan. Any other changes should be carefully analyzed to determine what affect they might have on previously submitted or unsubmitted claims.

Set As Default Open Case Close Case Charge Report

Close Dock Add New Delete Save Duplicate Case

Dashboard – Insurance Cases



Insurance Cases - Chad A Thompson TherapyTHOCH DOB: 12/12/1957 Age: 59 INS: CPT copyright 2013 American Medical Association. All rights reserved.

Open Cases

- BLUE CROSS**
 - Start Date: Mar 26, 2017
 - Blue Cross/Medicare
 - Start Date: Jan 22, 2017
 - bsbs tt
 - Start Date:
 - Cash
 - Start Date: Jul 30, 2014

Case Name BLUE CROSS	Case No.	Start Date 03-26-2017 15 X	End Date <MM-dd-yyyy> 15 X	Hold Charges No
Case Description	Condition	Related To 10 None	Attorney Select Remove	Name: None Phone: Fax: Email: Address:
Billing Notes	Place State 10b	Claim Codes 10d	Qual	Other Claim ID 11b

Closed Cases

- 21241
to Apr 18, 2017
Attorney - John Smith
- Nov 11, 2016 to Nov 11, 2016
Attorney - John Smith
- Aug 27, 2014 to Dec 20, 2016
Blue Cross
- Jan 11, 2017 to Apr 18, 2017
Blue Cross
- Jan 11, 2017 to Jan 11, 2017
Blue Cross

Primary Insurance

Carrier Blue Cross/Blue Shield	Insurance Phone 800-884-7788	Copay \$20.00
Plan Name Blue Cross	Claim Type Export	Coinsurance 10%
Insured's ID # 897987	Policy Group # 987987	Deductible Not Met
Employer/School	Relation to Insured Self	

Secondary Insurance

Carrier	Insurance Phone	Copay
Plan Name	Claim Type	Coinsurance 0%
Insured's ID #	Policy Group #	Deductible
Employer/School	Relation to Insured	

Tertiary Insurance

Carrier	Insurance Phone	Copay
Plan Name	Claim Type	Coinsurance 0%
Insured's ID #	Policy Group #	Deductible
Employer/School	Relation to Insured	

CAUTION: Edit insurances carefully! Any changes made will affect ALL previous claims referencing that insurance. Generally, create a new Insurance Case if a patient changes a primary, secondary, and/or tertiary insurance plan. Any other changes should be carefully analyzed to determine what affect they might have on previously submitted or unsubmitted claims.

Set As Default
Open Case
Close Case
Charge Report

Close
Dock
Add New
Delete
Save
Duplicate Case



Insurance Case – Create New

Before you can add an insurance, you must first create an insurance case. To create an insurance case, click the black “Add New” button at the bottom of the insurance summary screen. This will open a blank insurance summary screen. The most important piece of information needed initially is the insurance **Case Name**.

A good strategy for naming your insurance cases is to use something like this:

Primary/Secondary – Date

Primary – Date

If the patient had Blue Cross and Medicaid, you might name it:

Blue Cross/Medicaid – 2016

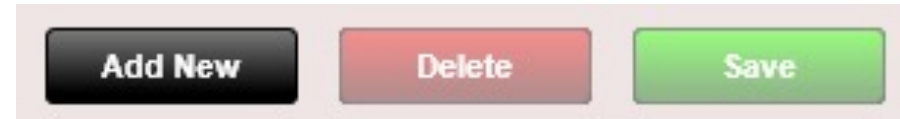
If the patient had only Blue Cross, you might name it:

Blue Cross – 2016

For an auto accident you might even name it:

State Farm – Auto Accident.

These are of course just examples. You can use any naming system you like.

A rectangular input field with a dark gray header containing the text "Case Name" in white. Below the header is a white text input area with a thin red border and rounded corners.

Note: Case Name is not shown on the HCFA. This is for internal purposes only.



Dashboard – Insurance Cases

What is an insurance case anyway?

Insurance cases are a set of primary, secondary or tertiary insurances for a particular patient. In order to bill an insurance, you must first create an insurance case. An insurance case “name” is required. We suggest naming the case “Primary Insurance Name – Year.” For example, If you have an insurance case with Blue Cross as primary and Medicaid as secondary a good name for that case would be “Blue Cross – 2013”, assuming the year is 2013. This naming convention may come in handy years down the road. Perhaps a patient who had Blue Cross as primary in 2013 will have Aetna as primary in 2014. Then in 2015 they may again have Blue Cross as primary.

Insurance Cases are great because they allow you to bill multiple insurances at the same time. For example, if a patient has Blue Cross & Blue Shield as their insurance but suddenly has an auto accident. The auto accident insurance case can then be created without having to delete the previous Blue Cross & Blue Shield insurance case. During treatment for the auto accident, you would select the auto accident insurance case to ensure proper billing.

Later we will show you how to create multiple insurance cases as well. We will also show you how to close an insurance case or re-open an inactive insurance case. We will also show you how to select the “Default” insurance case.



Dashboard – Insurance Cases

The insurance summary screen also contains text boxes for both a Case Description and Billing Notes. These can be used to input any notes that are specific to that insurance case.

- Case Description
- Billing Notes

A screenshot of a software interface showing two text input fields. The top field is titled "Case Description" and contains the text "This is an auto accident case". The bottom field is titled "Billing Notes" and contains the text "Do not bill this case until the patient has completed care". Both fields have a light gray background and rounded corners.

Case Description

This is an auto accident case

Billing Notes

Do not bill this case until the patient has completed care



Dashboard – Insurance Cases

The insurance summary screen provides key information for the Primary, Secondary and Tertiary insurances such as the insurance carrier, plan name, ID#, Employer/School, Provider Phone, Claim Type, Policy Group #, Relation to Insured, Copay, Co-insurance and Deductible. You can also Add, Edit, or Delete an insurance by selecting the appropriate buttons.

Primary Insurance			Edit
Carrier Medicare	Provider Phone	Copay \$0.00	
Plan Name Medicare	Claim Type Export	Coinsurance 20%	
Insured's ID # 078098098	Policy Group #	Deductible Met	
Employer/School	Relation to Insured Self		

Secondary Insurance			Add	Delete	Edit
Carrier Wellmark Blue Cross & Blue Shield	Provider Phone 555-446-4474	Copay \$20.00			
Plan Name Blue Cross	Claim Type Export	Coinsurance 10%			
Insured's ID # 7987897	Policy Group #	Deductible None			
Employer/School	Relation to Insured Self				

Tertiary Insurance			Add	Delete	Edit
Carrier	Provider Phone	Copay			
Plan Name	Claim Type	Coinsurance 0%			
Insured's ID #	Policy Group #	Deductible			
Employer/School	Relation to Insured				

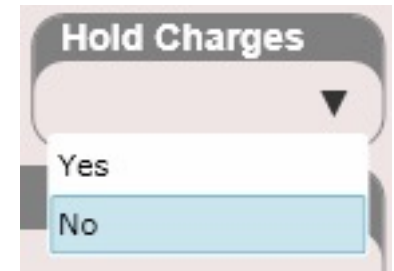
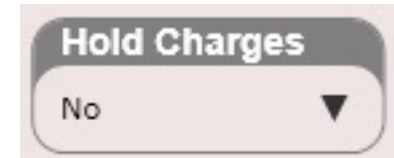


Dashboard – Insurance Cases

The insurance summary screen also provides the option to HOLD charges with the “Hold Charges” drop down box. By default, this is marked “No.” This is handy for auto accident or workman’s comp cases as they often do not want any charges billed to them until the case is closed.

To mark charges on hold simply select the Hold Charges drop down and select either “yes” or “no.” When you are satisfied with your selection click the green save button below.

Charges on hold cannot be billed to insurance. Instead, you will find them in a “Hold” folder inside the Billing app. This way you will both not submit them to insurance AND you will not forget they exist. When you are ready to bill them to insurance simply change “no” to “yes” inside the Insurance Case. Alternatively, you can select one of the charges in the Billing app and click “Remove Hold”. This will remove the hold for all charges inside the insurance case.



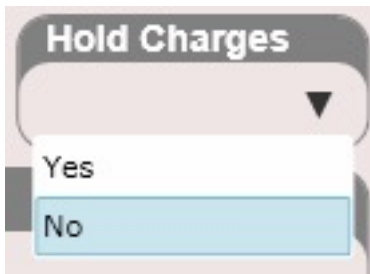


Dashboard – Insurance Cases

Once you have marked charges on “Hold” they cannot be billed. If you navigate to the Billing app on the front desk you will see all non-billed charges are categorized into folders. Pictured to the left are the folders in the Billing app. As you can see, there is a folder called “Hold.” Clicking on this folder will reveal all of your patients and their associated held charges.

Again, the charges in the “Hold” folder cannot be billed until you remove the “hold.” Removing the “hold” can be done in two ways.

- Go to the patient’s dashboard/insurance case. Click on the insurance case and select “No” from the “Hold Charges” drop down. Then click “Save.” All charges associated with this insurance case will now be billable.
- Within the Billing app select a charge that is being held. Then click the “Remove Hold” button. This will remove every charge associated with that insurance case.



Billing	
Categories	
Not Signed	
5	\$205.00
Not Submitted	
4	\$190.00
Submitted	
114	\$5,488.00
Hold	
6	\$296.00
Disputed	
2	\$120.00
Waiting to Print	
0	\$0.00
Waiting to Export	
4	\$190.00

Insurance – Add New

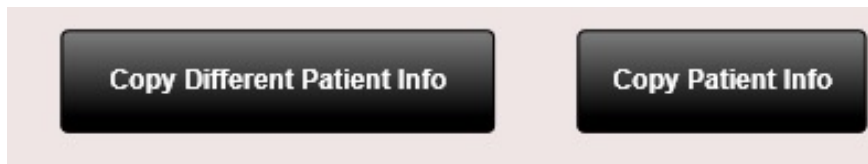
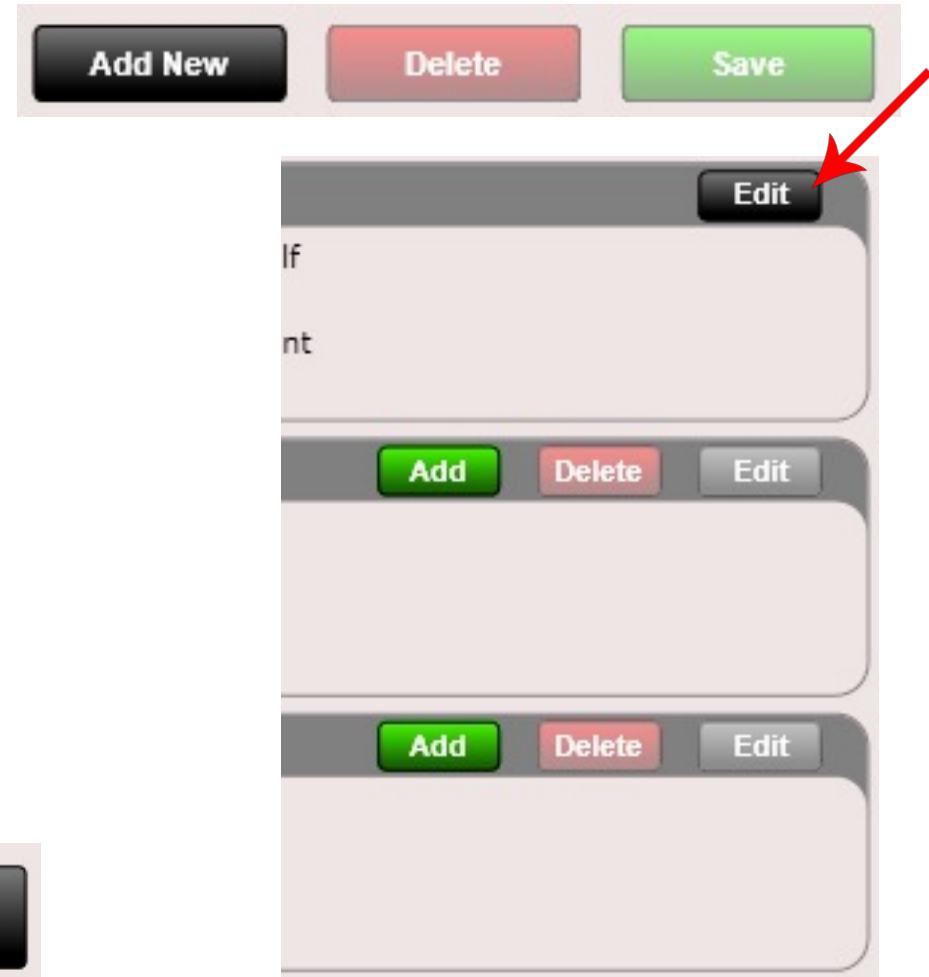
To add a new insurance, you will first need to create a new insurance case as previously described. Once you have created an insurance case it's time to add the actual insurance. To add an insurance, click the black "Edit" button at the top of the Primary insurance box or click on the green "Add" button at the top of the secondary or tertiary insurance boxes. This will open the Insurance Plan screen allowing you to enter in all of the insurance information.

- Insured's Personal Info
- Policy Info
- Patient Responsibility and Annual Limits
- Adjuster
- Card Image

If the Insured's Information is the same as the patient information, click on the "Copy Patient Info" button.

If the Insured's Information is the same as a different patient, click the "Copy Different Patient Info" button.

After entering in the new primary insurance repeat the same steps for secondary and/or tertiary.





Insurance – Add New

Pictured to the right is the Insurance Plan Screen. It is opened after clicking the black “Edit” button or green “Add” button from the previous insurance summary screen. As you can see there are five tabs on the left. They consist of:

- Insured’s Information
- Policy Info
- Patient Responsibility and Annual Limits
- Adjuster
- Card Image

The “Insured’s Info” tab is selected in this image. This is where you enter the Insured’s personal information. If the information is the same as the patient’s information, click the “Copy Patient Info” button. Or use the “Copy Different Patient Info” button to copy patient information from a different patient.

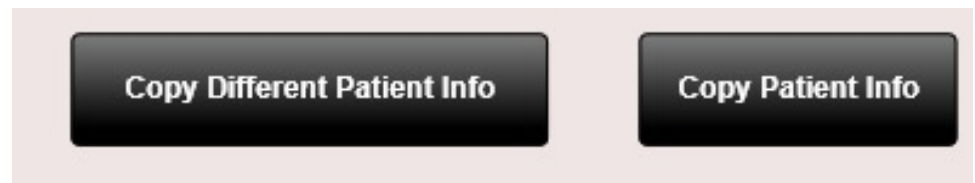
Primary - Chad A Thompson TherapyTHOCH DOB: 12/12/1957 Age: 59 CPT copyright 2013 American Medical Association. All rights reserved.

Insured's Info	Prefix	First Chad 4 9	Last Thompson 4 9	Middle 4 9	Suffix	Nickname
Policy Info	DOB 12/12/1957 11a X	Age 59	Birth Sex M	SSN	Email Address brian.alberly@chirospring.com	
Patient Responsibility and Annual Limits	Address 123 Sunny Dr 7	City Davenport 7	State Abbr. IA 7	Zip 54356 7		
Adjuster	Phone 1 563-505-9372 7	Type Mobile	Phone 2 556-897-8554	Type Home	Fax	
Card Image						

Copy Different Patient Info Copy Patient Info Clear All

Insurance Notes

Close





Insurance – Add New

The Insurance Notes field may be useful for general insurance notes, or in instances where certain HCFA fields are required to be blank per an insurance request. Therefore, you could blank out these HCFA fields and record this information in the Insurance Notes field so that you still have the information on file.

Insurance Notes

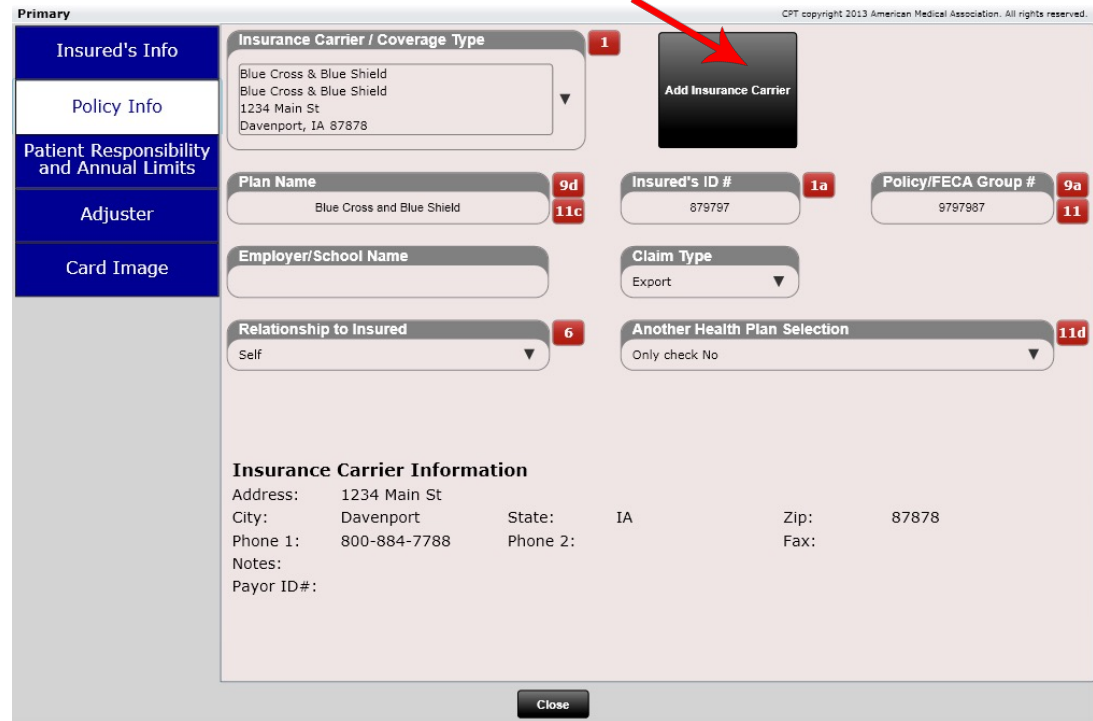
This is his primary insurance notes.....

Insurance – Add New

The Policy Info tab is where you add the following information:

- Insurance Carrier/Coverage Type
- Plan Name
- Insured's ID #
- Policy/FECA Group #
- Employer/School Name
- Claim Type (Print or Export)
- Relationship to Insured
- Another Health Plan Selected

If the insurance carrier you are trying to locate is not present from the drop-down menu click the black “Add Insurance Carrier” button to the right. This will open a new window allowing you to create a new insurance carrier.



Primary CPT copyright 2013 American Medical Association. All rights reserved.

Insured's Info Policy Info Patient Responsibility and Annual Limits Adjuster Card Image	Insurance Carrier / Coverage Type 1 Blue Cross & Blue Shield Blue Cross & Blue Shield 1234 Main St Davenport, IA 87878	Add Insurance Carrier		
	Plan Name 9d Blue Cross and Blue Shield 11c	Insured's ID # 1a 879797	Policy/FECA Group # 9a 9797987 11	
	Employer/School Name	Claim Type Export		
	Relationship to Insured 6 Self	Another Health Plan Selection 11d Only check No		

Insurance Carrier Information

Address: 1234 Main St
 City: Davenport State: IA Zip: 87878
 Phone 1: 800-884-7788 Phone 2: Fax:
 Notes:
 Payor ID#:

Close





Insurance – Duplicate Case

If your patient has new insurance but there are only minor changes (e.g. Primary is the same but secondary is different) you can use the Duplicate Case button. This will allow you to duplicate any insurance case and then make any changes to it as necessary. You can even duplicate a case from a DIFFERENT patient. This is incredibly handy if there is an insurance case that is common over a wide range of patients.

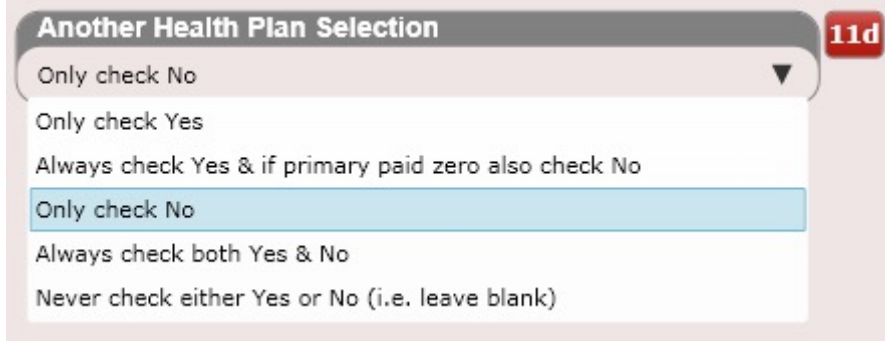



Insurance – Box 11d

Box 11d (Another Health Plan Selected)

HCFA box 11d can be either Yes, No or both. This may sound confusing. Box 11d has a Yes and a No check box on the actual HCFA form. Most insurances want “Yes” selected if the patient has secondary insurance. However, oddly, some insurance may also want both boxes selected if the patient has secondary. This dropdown gives you this kind of flexibility.

By default, it is set to “Only check No.” If the patient does not have a secondary or tertiary insurance, you will want to leave this as “Only check No”.

See examples of Medicare and Medicaid on subsequent pages. We also have a full “Setting up Medicare” document in our customer portal.

www.ChiroSpring.com/customers.php

Setting up Medicare

This document details how to set up Medicare in ChiroSpring. Medicare has different requirements on what HCFA fields are populated. [Download](#)

Insurance – Box 11d

Box 11d (Another Health Plan Selected)

Recommendations:

- If patient has only primary select: “Only check No”.
- If patient has secondary and you are not sure of what the insurance wants, select “Only check Yes”.
- For Medicare and Medicaid see the following pages.

d. IS THERE ANOTHER HEALTH BENEFIT PLAN?

YES NO *If yes, return to and complete Item 9 a-d*

Another Health Plan Selection **11d**

Only check No

Only check Yes

Always check Yes & if primary paid zero also check No

Only check No

Always check both Yes & No

Never check either Yes or No (i.e. leave blank)



Insurance – Box 11d (Medicare)

Box 11d (Medicare)

- If the patient ONLY has Medicare (e.g. has no Secondary)

A screenshot of a form field for Box 11d. The field is titled "Another Health Plan Selection" in a dark grey header. Below the header, the text "Only check No" is displayed. A small black downward-pointing triangle is on the right side of the text. To the right of the field is a red square button with the white text "11d".

- If the patient has Medicare for Primary (and has another insurance for Secondary)

A screenshot of a form field for Box 11d. The field is titled "Another Health Plan Selection" in a dark grey header. Below the header, the text "Only check Yes" is displayed. A small black downward-pointing triangle is on the right side of the text. To the right of the field is a red square button with the white text "11d".

- If the patient has Medicare for Secondary (and has another insurance for Primary)

A screenshot of a form field for Box 11d. The field is titled "Another Health Plan Selection" in a dark grey header. Below the header, the text "Only check Yes" is displayed. A small black downward-pointing triangle is on the right side of the text. To the right of the field is a red square button with the white text "11d".



Insurance – Box 11d (Medicaid)

Box 11d (Medicaid)

- If the patient ONLY has Medicaid (e.g. has no Secondary)

A screenshot of a form field labeled "Another Health Plan Selection" with a red "11d" tag. The dropdown menu is open, showing the text "Only check No".

- If the patient has Medicaid for Primary (and has another insurance for Secondary)

A screenshot of a form field labeled "Another Health Plan Selection" with a red "11d" tag. The dropdown menu is open, showing the text "Always check Yes & if primary paid zero also check No".

- If the patient has Medicaid for Secondary (and has another insurance for Primary)

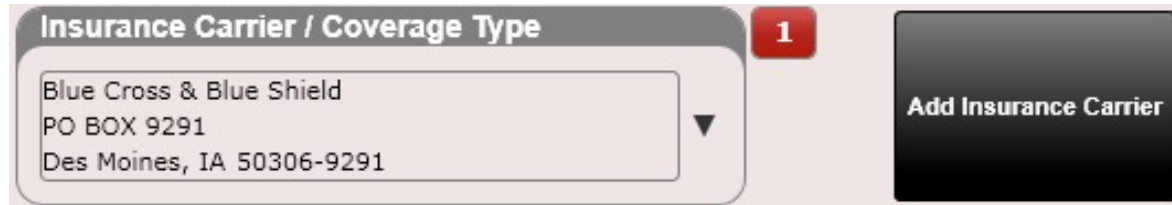
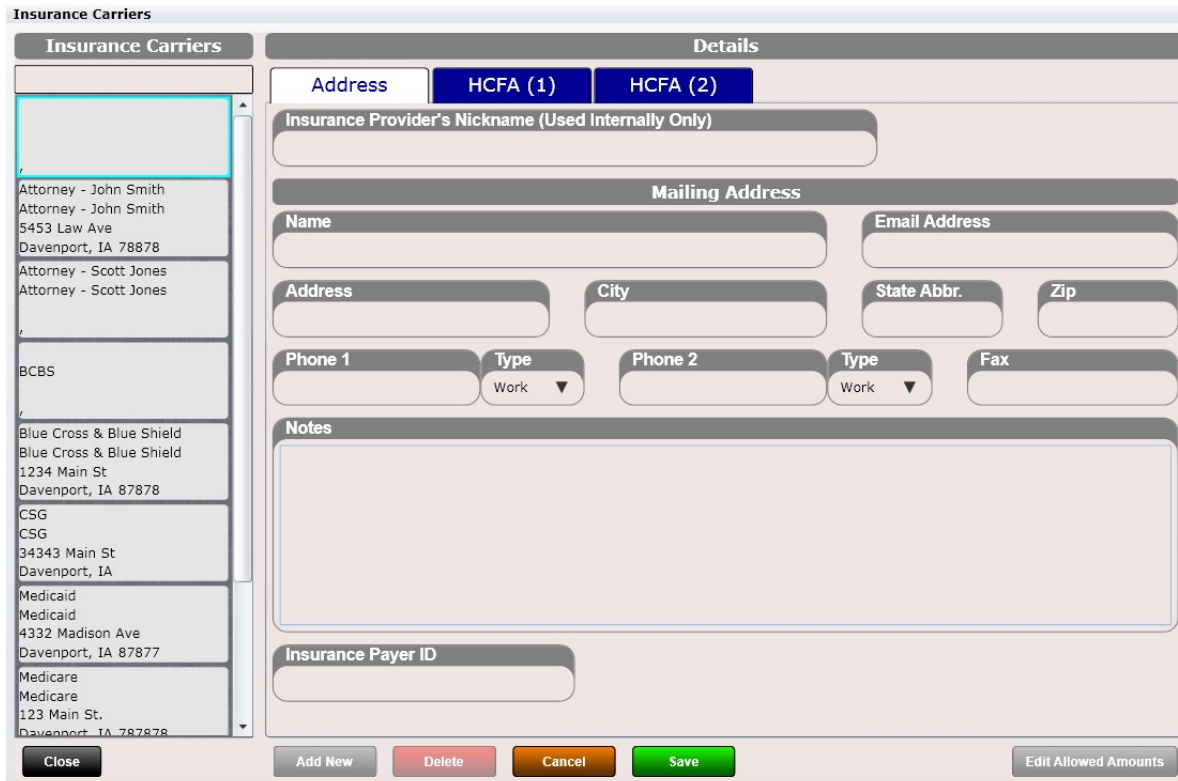
A screenshot of a form field labeled "Another Health Plan Selection" with a red "11d" tag. The dropdown menu is open, showing the text "Always check Yes & if primary paid zero also check No".

Insurance – Add New

Add Insurance Carrier

Select the Insurance Carrier from the drop-down box. If the insurance Carrier you wish to select is not there, click the black “Add Insurance Carrier” button. This will open a dialog box and allow you to create a brand new insurance Carrier. Once complete, click “Save”, then close the dialog and you will be able to select the new insurance carrier from the “Insurance Carrier/Coverage Type” drop down box.

It is also possible to add an insurance Carrier in Settings/Insurance Carriers. This app will take you to the same screen as pictured to the right.

Insurance Carriers

Insurance Carriers

- Attorney - John Smith
Attorney - John Smith
5453 Law Ave
Davenport, IA 78878
- Attorney - Scott Jones
Attorney - Scott Jones
- BCBS
- Blue Cross & Blue Shield
Blue Cross & Blue Shield
1234 Main St
Davenport, IA 87878
- CSG
CSG
34343 Main St
Davenport, IA
- Medicaid
Medicaid
4332 Madison Ave
Davenport, IA 87877
- Medicare
Medicare
123 Main St.
Davenport, IA 78878

Details

Address HCFA (1) HCFA (2)

Insurance Provider's Nickname (Used Internally Only)

Mailing Address

Name Email Address

Address City State Abbr. Zip

Phone 1 Type Phone 2 Type Fax

Work Work

Notes

Insurance Payer ID

Close Add New Delete Cancel Save Edit Allowed Amounts

Insurance – Add Carrier

When adding an insurance carrier, you will notice several text boxes and drop-down boxes. These are important because not every insurance carrier treats these HCFA fields the same. You will need to be familiar with the specific rules of that particular insurance carrier to determine what you select for these boxes.

Address	HCFA (1)	HCFA (2)	Address	HCFA (1)	HCFA (2)
Coverage Type 1 Other			Insured's Signature 13 Signature On File		Diagnosis Print Format 21 Normal
Insured's Name 4 Insured's Name	Insured's Address 7 Insured's Address		Max Diagnosis Pointers 24e 4		Rendering Provider Shaded Area 24i Leave blank
Other Insured's Name 9 Other Insured's Name	Other Insured's Policy/Group Number 9a Other Insured's Policy/Group Number		Accept Assignment 27 Yes		Populate Amount Paid with 29 Insurance paid
Other Insured's DOB and Sex (08/05 only) 9b Other Insured's DOB and Sex	Other Plan/Program Name 9d Other Insured's Plan/Program Name		Populate Facility Address 32 Yes		Populate Facility NPI with 32a Practice's Facility NPI
Insured's Policy/Group # 11 Insured's Policy/Group Number	Insured's DOB and Sex 11a Insured's DOB and Sex				32a Other Content 32a
Insured's Plan/Program Name 11c Insured's Plan/Program Name					Populate Billing NPI with 33a Practice's Billing NPI
					33a Other Content 33a
					Additional Claim Information 19 Leave Blank
					<small>If not 'Blank' will copy into any NEW 'Edit SOAPs'</small>
					Printed Date Format 24a MM/DD/YY
					List Patient Account # 26 No
					Provider Signature 31 Provider Name & Date
					Populate Facility Other ID w/ 32b Blank
					32b Other Content 32b
					Populate Billing Other ID w/ 33b Blank
					33b Other Content 33b

Boxes include Coverage Type (1), List Patient Account # (26), Accept Assignment (27), Printed Date Format (24a), Populate Amount Paid with (29), Provider Signature (31), Populate 32, 32a & 32b (32), Box 32b Content (32b), Box 32b Other ID (32b), Insurance Payer ID, Box 33b Content (33b) and Box 33b Other ID (33b)



Settings – Insurance Carriers

Insurance Carriers are important to set up in ChiroSpring. Set them up once and you can use them over and over for multiple patients. The following information can be entered:

- Name
- Email Address
- Address
- City
- Sate
- Zip
- Phone 1 & Type
- Phone 2 & Type
- Notes
- Insurance Payer ID
 - Optional field but improves accuracy when submitting electronic claims to your clearinghouse. Call the insurance carrier and ask for their Payer ID.

Address Tab

Insurance Carriers

Insurance Carriers	Details	
Attorney - John Smith Attorney - John Smith 5453 Law Ave Davenport, IA 78878 Attorney - Scott Jones Attorney - Scott Jones / BCBS / Blue Cross & Blue Shield Blue Cross & Blue Shield 1234 Main St Davenport, IA 87878 CSG CSG 34343 Main St Davenport, IA Medicaid Medicaid 4332 Madison Ave Davenport, IA 87877 Medicare Medicare 123 Main St. Davenport, IA 787878 State Farm Claims State Farm Claims 234554 Phoenix, AZ 23434	Address	HCFA (1)
	Insurance Provider's Nickname (Used Internally Only) Blue Cross & Blue Shield	
	Mailing Address	
	Name Blue Cross & Blue Shield	Email Address
	Address 1234 Main St	City Davenport
	State Abbr. IA	Zip 87878
	Phone 1 800-884-7788	Type Work
	Phone 2	Type Home
	Notes	
	Insurance Payer ID	
Close	Add New	Delete
	Cancel	Save
	Edit Allowed Amounts	



Settings – Insurance Carriers

HCFA fields are located on the HCFA Tab. Every insurance carrier has different rules on what they want populated on the following HCFA fields.

- 1
- 13
- 21
- 24a
- 24e
- 26
- 27
- 29
- 31
- 32
- 32a
- 32b
- 33a
- 33b
- 9
- 11

HCFA Tabs

Address	HCFA (1)	HCFA (2)
Insured's Signature 13 Signature On File ▼	Diagnosis Print Format 21 Normal ▼	Printed Date Format 24a MM/DD/YY ▼
Max Diagnosis Pointers 24e 4 ▼	Rendering Provider Shaded Area 24i 24j Leave blank ▼	List Patient Account # 26 No ▼
Accept Assignment 27 Yes ▼	Populate Amount Paid with 29 Insurance paid ▼	Provider Signature 31 Provider Name & Date ▼
Populate Facility Address 32 Yes ▼	Populate Facility NPI with 32a Practice's Facility NPI ▼	Populate Facility Other ID w/ 32b Blank ▼
	32a Other Content 32a <input type="text"/>	32b Other Content 32b <input type="text"/>
	Populate Billing NPI with 33a Practice's Billing NPI ▼	Populate Billing Other ID w/ 33b Blank ▼
	33a Other Content 33a <input type="text"/>	33b Other Content 33b <input type="text"/>
	Additional Claim Information 19 Leave Blank ▼ <small>If not 'Blank' will copy into any NEW 'Edit SOAPs'</small>	

Use the drop-down selections to customize each individual insurance carrier.



Settings – Insurance Carriers

When adding an insurance carrier, you will notice several text boxes and drop-down boxes. These are important because not every insurance carrier treats these HCFA fields the same. You will need to be familiar with the specific rules of that particular insurance carrier to determine what you select for these boxes.

Insured's Signature 13	Diagnosis Print Format 21	Printed Date Format 24a
Blank	Normal	MM/DD/YY
Max Diagnosis Pointers 24e	Rendering Provider Shaded Area 24i	List Patient Account # 26
4	Leave blank	No
Accept Assignment 27	Populate Amount Paid with 29	Provider Signature 31
Yes	Insurance paid	Provider Name & Date
Populate Facility Address 32	Populate Facility NPI with 32a	Populate Facility Other ID w/ 32b
Yes	Practice's Facility NPI	Blank
	32a Other Content 32a	32b Other Content 32b
	Populate Billing NPI with 33a	Populate Billing Other ID w/ 33b
	Practice's Billing NPI	Blank
	33a Other Content 33a	33b Other Content 33b
	Additional Claim Information 19	
	Leave Blank	

If not 'Blank' will copy into any NEW 'Edit SOAPs'



Settings – Insurance Carriers

HCFA box 32 by default is populated with any data you put into the 32 located in Settings/Practice Info/Facility Location. This is denoted by the box shown below being marked as “Yes”. However, some insurance companies want you to leave one or more of these fields blank. This can be accomplished by selecting a Yes or No in the boxes below.

- If YES will populate the selected box.
- If NO will leave the selected box blank.

The image shows a software interface element. At the top, there is a dark grey rounded rectangle with the text "Populate Facility Address" in white. To the right of this rectangle is a red square containing the white number "32". Below the dark grey rectangle is a light grey rounded rectangle with a downward-pointing triangle on its right side. A light blue rounded rectangle is overlaid on the light grey one, containing the word "Yes" in black text. Below the light blue rectangle, the word "No" is visible in black text.



Settings – Insurance Carriers

NOTE: If the drop-down selection you are looking for is NOT present for boxes 32a or 32b, 33a or 33b then select “Other Content” from the drop down and populate the appropriate “Other Content” box (see below).

Populate Facility NPI with 32a Other Content ▼	32a	Populate Facility Other ID w/ 32b Other Content ▼	32b
32a Other Content <input type="text"/>	32a	32b Other Content <input type="text"/>	32b
Populate Billing NPI with 33a Other Content ▼	33a	Populate Billing Other ID with 33b Other Content ▼	33b
33a Other Content <input type="text"/>	33a	33b Other Content <input type="text"/>	33b



Settings – Insurance Carriers

Coverage Type (HCFA box 1) allows you to select from the following: Medicare, Medicaid, TRICARE CHAMPUS, CHAMPVA, Group Health Plan, FECA Black Lung or Other.

Coverage Type 1

Other ▼

Medicare

Medicaid 24a

TRICARE CHAMPUS

CHAMPVA 27

Group Health Plan

FECA Black Lung

Other 32

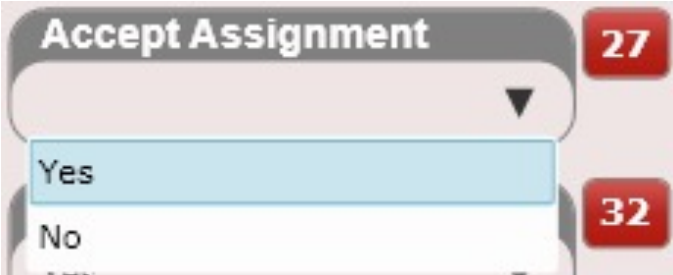
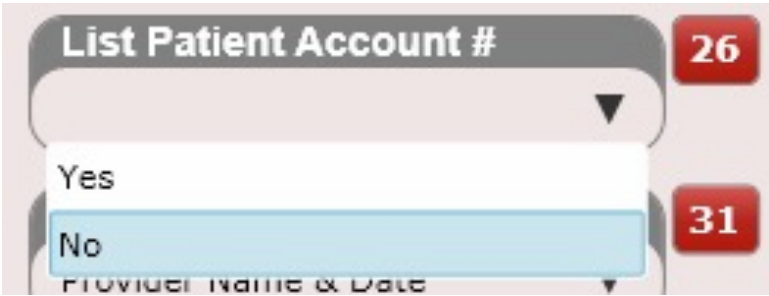


Settings – Insurance Carriers

HCFA box 26 is the patient’s account number. If you want it shown on the HCFA select Yes. If you do not want it shown on the HCFA select “No”. This defaults to no.

HCFA box 27 is “Accept Assignment”. This is either a “Yes” or a “No” and defaults to “No”.

HCFA box 31 is the “Provider’s Signature.” If you want to have the provider’s name displayed select “Provider Name and Date”. Otherwise select “Signature on File” to have “Signature on File” populated in this box. This defaults to “Provider’s Name & Date”.





Settings – Insurance Carriers

HCFA box 32a can be populated with the following fields: Blank, Practice’s Facility NPI, Treating Provider’s NPI, 32a Other Content. You are only making the selections from this drop down here. You will need to add the actual numbers in either the Practice Info app or the User’s app (both found in settings).

To populate “32a Other Content” type the content into the text box labeled “32a Other Content”.

Populate Facility NPI with 32a

Practice’s Facility NPI ▼

- Blank
- Practice’s Facility NPI 32a
- Treating Provider’s NPI
- 32a Other Content 33a

32a Other Content 32a



Settings – Insurance Carriers

HCFA box 32b can be populated with the following fields: Blank, Practice's Facility Other ID, Practice Taxonomy Code, Provider's Taxonomy Code, Provider's License #, Provider's Medicare ID #, Provider's Physician ID #, Provider's Physician Group #. You are only making the selections from this drop down here. You will need to add the actual numbers in either the Practice Info app or the User's app (both found in settings).

To populate "32b Other Content" type the content into the text box labeled "32b Other Content".

Populate Facility Other ID w/ **32b**

32b Other Content ▼

- Blank **32b**
- Practice's Facility Other ID **32b**
- Practice Taxonomy Code
- Provider's Taxonomy Code **33b**
- Provider's License #
- Provider's Medicare ID #
- Provider's Physician ID # **33b**
- Provider's Physician Group #
- 32b Other Content

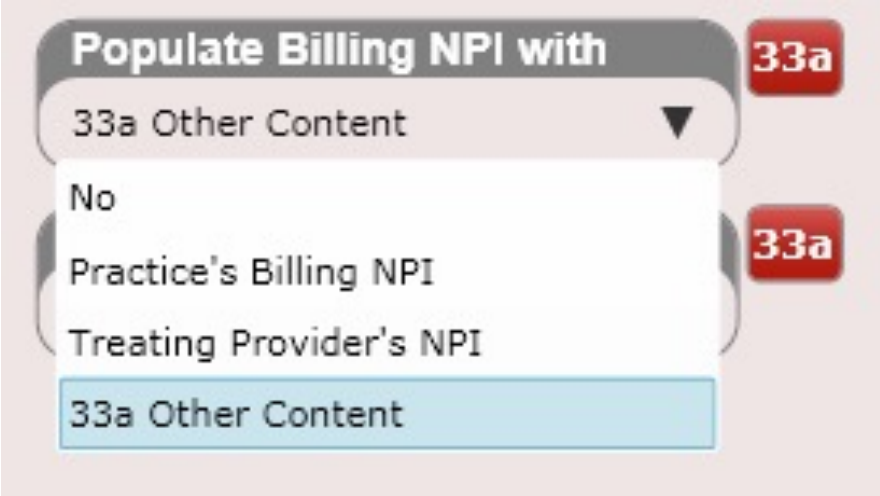
32b Other Content **32b**



Settings – Insurance Carriers

HCFA box 33a can be populated with the following fields: No, Practice’s Billing NPI, Treating Provider’s NPI, 33a Other Content. You are only making the selections from this drop down here. You will need to add the actual numbers in either the Practice Info app or the User’s app (both found in settings).

To populate “33a Other Content” type the content into the text box labeled “33a Other Content”.

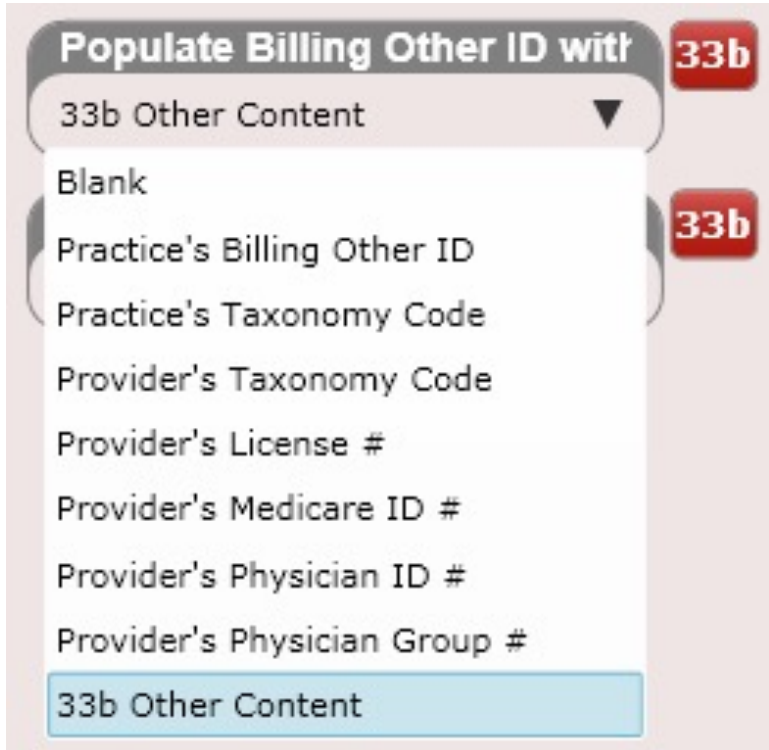




Settings – Insurance Carriers

HCFA box 33b can be populated with the following fields: Blank, Practice’s Billing Other ID, Practice’s Taxonomy Code, Provider’s Taxonomy Code, Provider’s License #, Provider’s Medicare ID #, Provider’s Physician ID #, Provider’s Physician Group #, 33b Other Content. You are only making the selections from this drop down here. You will need to add the actual numbers in either the Practice Info app or the User’s app (both found in settings).

To populate “33b Other Content” type the content into the text box labeled “Box 33b Other Content”.

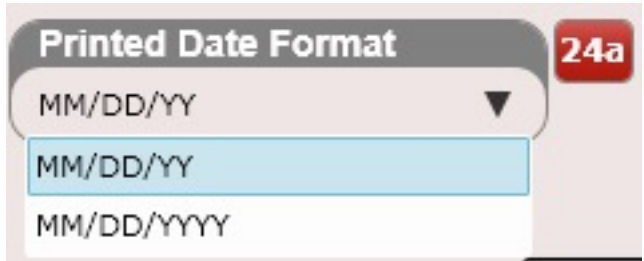




Settings – Insurance Carriers

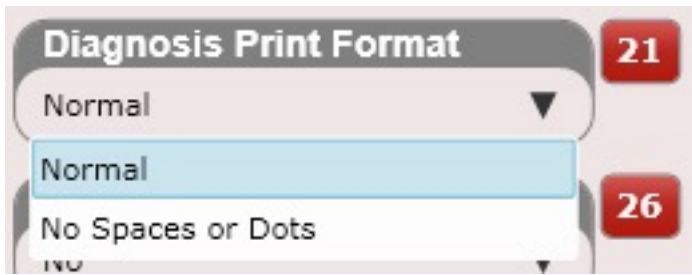
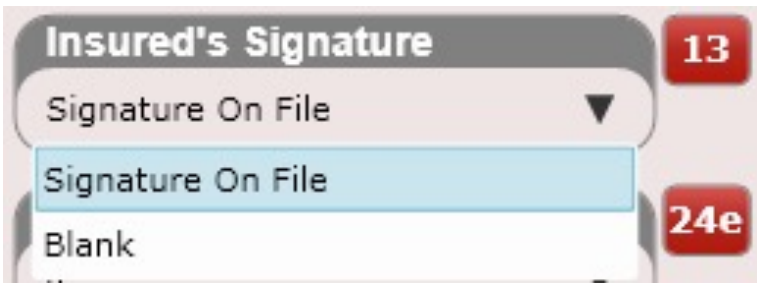
HCFA box 24a defaults to a printed MM/DD/YY format as this is what is required by CMS-1500. However, some insurance companies require all dates on the HCFA to have the same MM/DD/YYYY format when printed. Thus, you can override box 24a here and set it to MM/DD/YYYY.

This change will ONLY affect the Printed HCFA forms.



HCFA box 13 defaults to "Signature on File". However, there are some insurance carriers that want this field left blank. In that case select "Blank".

HCFA box 21 defaults to Normal (e.g. xxx.xx). However, some insurance carriers do not allow a decimal or spaces (e.g. Medicare). Therefore, the option "No Spaces or Dots" will display diagnoses as xxxxx for example.





Settings – Insurance Carriers

The Insurance Payer ID is an optional field. Most insurance carriers have a Payer ID. Populating this number can result in fewer rejected claims as your clearinghouse will have better accuracy in submitting your claims to the correct location.

Insurance Payer ID



Settings – Box 24e

HCFA box 24e defaults to 4. However, there are some insurance carriers that only want 1 diagnosis pointer (e.g. Medicare wants 1).

Option	Label
4	24e
1	29
2	
3	
4	32a



Settings – Medicaid

Address	HCFA (1)	HCFA (2)
Coverage Type		
Medicaid ▼		

For Medicaid populate box 29 with "Insurance Paid". Note, check with your local state to ensure this is correct for your state.

Address	HCFA (1)	HCFA (2)
Insured's Signature 13	Diagnosis Print Format 21	Printed Date Format 24a
Signature On File ▼	No Spaces or Dots ▼	MM/DD/YY ▼
Max Diagnosis Pointers 24e	Rendering Provider Shaded Area 24i	List Patient Account # 26
1 ▼	Provider's taxonomy code 24j	No ▼
Accept Assignment 27	Populate Amount Paid with 29	Provider Signature 31
Yes ▼	Insurance paid ▼	Provider Name & Date ▼
Populate Facility Address 32	Populate Facility NPI with 32a	Populate Facility Other ID w/ 32b
Yes ▼	Practice's Facility NPI ▼	Blank ▼
	32a Other Content 32a	32b Other Content 32b
	<input type="text"/>	<input type="text"/>
	Populate Billing NPI with 33a	Populate Billing Other ID w/ 33b
	Practice's Billing NPI ▼	Blank ▼
	33a Other Content 33a	33b Other Content 33b
	<input type="text"/>	<input type="text"/>



Insurance – Edit Allowed Amounts

Inside the Insurance Carrier’s app is a button that says, “Edit Allowed Amounts”. Clicking this button will open the dialog shown below.

Edit Allowed Amounts

Use this dialog to specify different allowed amounts based on up to four units what the insurance allows for each service or product. If the allowed amount is not known or you do not wish to provide it, just leave the box blank and the software will default a new charge's amount allowed to the charge's price.

Services

Products

	Not Covered	Copy	Co-Ins.	Deduct.	Units - 1	Units - 2	Units - 3	Units - 4
9894								
98940 Manipulation 1-2 Regions Price: \$35.00	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	32.50			
98941 Manipulation 3-4 Regions Price: \$40.00	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	33.75			
98941-AT Manipulation 3-4 Regions (MCARE) Price: \$40.00	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>				
98942 Manipulation 5 Regions Price: \$50.00	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>				
98943 Manipulation Extra-Spinal Price: \$15.00	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>				
98943-51 Manipulation Extra-Spinal Price: \$15.00	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	11.75			



Insurance – Edit Allowed Amounts

Here you can enter the allowed amounts for every charge in your practice **FOR THAT INSURANCE CARRIER** and up to 4 units (as the allowed may be different for 2 units as an example).

	Not Covered	Copay	Co-Ins.	Deduct.	Units - 1	Units - 2	Units - 3	Units - 4
9894								
98940 Manipulation 1-2 Regions Price: \$35.00	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	30.00	55.00	68.00	

This is an extremely powerful feature. Not only that you can specify if that charge is covered by insurance and if so if copay, coinsurance, deductible or a combination of the three are applicable to that charge.

For example, if a patient's insurance carrier does not cover X-Rays you would mark those charges as Not Covered. This way they would immediately be patient's responsibility.

With Allowed Amounts here is an example below.

A patient with a 10% co-insurance is being checked out for a 98941-3-4 region manipulation. The charge amount is \$40, and the allowed amount is \$30. This means the patient will be charged \$3 at the cash register vs. \$4 **had you not entered** the \$30 allowed amount.

Not Covered	Copay	Co-Ins.	Deduct.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Units - 1	Units - 2	Units - 3	Units - 4
30.00			

It's MORE ACCURATE! 😊

Insurance – HCFA Boxes

For completeness, the next few pages will show where these insurance related HCFA boxes can be populated.

Go to the Settings/Practice Info.



Settings

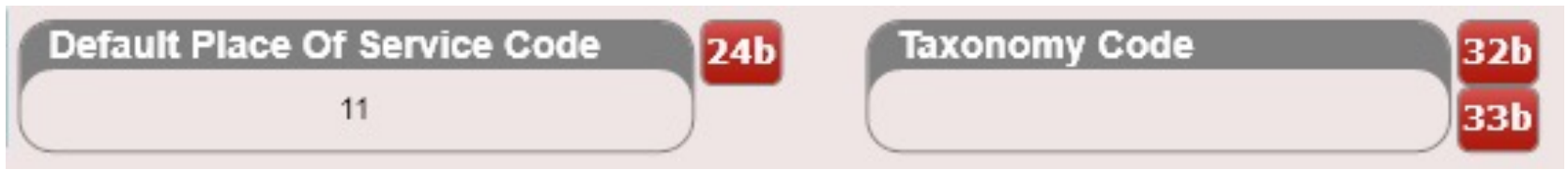


Practice Info



Insurance – HCFA Boxes

The following HCFA boxes are located in the Settings/Practice Info app/General Tab



Default Place of Service (24b) and Taxonomy Code (32b)(33b)



Insurance – HCFA Boxes

The following HCFA boxes are located in the Settings/Practice Info app/Facility Locations Tab

Service Facility Location

Name

Address

City

State

Zip

Phone 1

Type
Work ▼

Phone 2

Type
Home ▼

Fax

Notes

32

Facility NPI #

32a

Facility Other ID #

32b

Box (32), Facility NPI # (32a) and Facility Other ID # (32b)



Insurance – HCFA Boxes

The following HCFA boxes are located in the Settings/Practice Info app/Billing Address Tab

Billing Provider Information 33

Name Spinal Care Chiropractic		Email Address	
Address 1234 State St.	City Davenport	State IA	Zip 52804
Phone 1 563-555-6755	Type Work ▼	Phone 2 563-555-3244	Type Home ▼
		Fax 563-555-2314	
Notes			

Box (33)



Insurance – HCFA Boxes

The following HCFA boxes are located in the Settings/Practice Info app/Billing Address Tab

Billing NPI # Billing NPI #	33a	Billing Other ID #	33b
Federal Tax ID # (EIN)	25		

Billing NPI # (33a), Billing Other ID # (33b), Federal Tax ID # (EIN) (25)



Insurance – HCFA Boxes

The following HCFA boxes are located in the Settings/Users app

NPI # 24j		Taxonomy Code 24i 32b	
<input type="text"/>		<input type="text"/>	
Qual	License # 24i 32b	Qual	Medicare ID # 24i 32b
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	24j 33b		24j 33b
Qual	Physician ID # 24i 32b	Qual	Physician Group # 24i 32b
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	24j 33b		24j 33b

NPI # (24j), Taxonomy Code (24i)(32b)(24j)(33b), License # (24i)(32b)(24j)(33b), Medicare ID # (24i)(32b)(24j)(33b), Physician ID # (24i)(32b)(24j)(33b), Physician Group # (24i)(32b)(24j)(33b)

Federal Tax ID Content 25	Provider's EIN 25	Social Security # 25
Practice EIN ▼	<input type="text"/>	<input type="text"/>
Override Facility NPI 32a	Override Billing NPI 33a	
<input type="text"/>	<input type="text"/>	

Federal Tax ID Content (25), Provider's EIN (25), Social Security # (25), Override Facility NPI (32a), Override Billing NPI (33a)



Insurance – HCFA Boxes

The following HCFA boxes are located in the Settings/Users app/Service & Billing Location Tab

Service Facility Location

32

Override Service Facility Location: Useful for practices with multiple locations. This information applies only to this user and the check box must be checked in order to populate this information onto the HCFA.

Name

Edit User

Email Address

Address

City

State

Zip

Phone 1

Type

▼

Phone 2

Type

▼

Fax

Use this box to override box 32 on the HCFA form. You must check the “Override Service Facility Location” checkbox to use this information.

Note: This information is NOT needed unless a provider is practicing OUTSIDE of your general practice location. If you populate these fields, you will need to CHECK the “Override Service Facility Location” or “Override Billing Provider Location”.



Insurance – HCFA Boxes

The following HCFA boxes are located in the Settings/Users app/Service & Billing Location Tab

Billing Provider Location

33

Override Billing Provider Location: Useful for practices with multiple locations. This information applies only to this user and the check box must be checked in order to populate this information onto the HCFA.

Name

Address

City

Phone 1

Type
▼

Phone 2

Type
▼

Email Address

State

Zip

Fax

Use this box to override box 33 on the HCFA form. You must check the “Override Service Facility Location” checkbox to use this information.

Note: This information is NOT needed unless a provider is practicing OUTSIDE of your general practice location. If you populate these fields, you will need to CHECK the “Override Service Facility Location” or “Override Billing Provider Location”.

Insurance – Patient Responsibility & Annual Limits



Primary - Chad A Thompson TherapyTHOCH DOB: 12/12/1957 Age: 59

CPT copyright 2013 American Medical Association. All rights reserved.

- Insured's Info
- Policy Info
- Patient Responsibility and Annual Limits
- Adjuster
- Card Image

This page sets the default values for Copay, Co-insurance, and Deductible. These values will be used to estimate charges when actual (reconciled) values for a visit's charges are not available. Changing these values will not affect visit charges that have already been billed to insurance or reconciled.

Use this amount allowed?

Visit Amount Allowed

0.00

Check to specify the insurance has a maximum allowed amount per visit.

Use this copay?

Copay

20.00

When checked, this copay will be displayed and if copay estimating is enabled for the practice then is also used to estimate the patient's responsibility for any insurance charges.

Use this co-insurance?

Co-ins. %

10.00

When checked, this co-insurance will be displayed and if co-insurance estimating is enabled for the practice then is also used to estimate the patient's responsibility for any insurance charges.

Use this deductible?

Deductible Reset Date

Jan 1



When checked, displays deductible information. Enter the deductible reset date to specify the insurance plan has a deductible. Clear out (red 'X') deductible reset date to specify the insurance plan does not have a deductible.

Deductible Met History



The Deductible Met History box tracks the approximate date the deductible has been met each year. When reconciling insurance claims, the user may mark the deductible as being met. In cases where an error is made, the add and remove buttons allow modifying this information.

Add

Remove

Visit & Monetary Limit Reset Date

Jan 1



Annual Chiropractic Monetary Limit

Allowed

5000.00

Used Outside

0.00

Total Used

0.00

Used Here

0.00

Annual Chiropractic Visit Limit

Allowed

20

Used Outside

5

Total Used

5

Used Here

0

Annual Therapy Visit Limit

Allowed

10

Used Outside

0

Total Used

0

Used Here

0

Deductible

Annual Deductible Amt

3000.00

Used Outside

0.00

Used Here

0.00

Remaining

3000.00

Close

Insurance – Patient Responsibility & Annual Limits



For every insurance case you create you can add the patient's copay, co-insurance or deductible information. This can be done for the patient's primary, secondary and tertiary insurances.

There are some key points you must understand to have a firm handle on setting your patient's member responsibility.

Patient Responsibility and Annual Limits

In Dashboard/Insurance select the "Patient Responsibility and Annual Limits tab. Here you can record the following information:

- **Patient Responsibility**
 - Copay
 - Co-Insurance %
- **Patient Deductible**
 - If the patient has a deductible select the Deductible reset date.
 - If the patient does not have a deductible leave blank.
 - If the deductible has been met create a deductible met date by clicking the green "Add" button. An approximate date is okay.
 - Record the annual deductible amount also. The software will then deduct patient responsibility and estimate when the deductible is met. You will be prompted at check-in if the software thinks the deductible has been met. The prompt will allow you to officially mark the deductible as met at this time.

Located in
Dashboard/Insurance



Insurance – Patient Responsibility & Annual Limits



Patient Responsibility and Annual Limits

In Dashboard/Insurance select the “Patient Responsibility and Annual Limits tab. Here you can record the following information:

- **Visit Amount Allowed**
 - This field is not often used. However, it can be extremely beneficial. We will describe this field in detail on subsequent pages but in general this box allows you to indicate the maximum allowed amount per visit for a patient’s insurance.

Use this amount allowed?

Visit Amount Allowed

65.00

Check to specify the insurance has a maximum allowed amount per visit.

Remember, you must ensure the box is checked to turn ON the feature for your patient. If the box is unchecked the software will not use the Visit Amount Allowed when performing charge calculations at checkout.

Located in
Dashboard/Insurance





Settings Practice Info



Insurance – Copay – Global Settings

Options for Estimating Patient Member Responsibility

Before you create even a single insurance case and assign copays, co-insurances or deductibles it is **VERY IMPORTANT** that you understand the “Options for Estimating Patient Member Responsibility” found in Settings/Practice Info. Essentially there are three dropdown boxes that allow you to turn “ON” or “OFF” if your practice will be using Copays, Co-Insurances or Deductibles to calculate patient member responsibility. By default, these are all “Yes”.

Found in Settings/Practice Info/Charge Options

Practice Info

- General
- General 2
- Facility Locations
- Billing Address
- Logo
- Charge Options**
- Integrated Payments
- Body Orientation

Options for Estimating Patient Member Responsibility (PMR)

ChiroSpring provides the ability to estimate a charge's PMR (copay, co-insurance, deductible, and amount allowed (amount allowed is the basis used to calculate these values)). When a user adds a new charge to a visit, the charge always defaults to estimating PMR. The options below allow the practice to specify which PMR values will be estimated. Once a charge is billed or reconciled, estimating of the charge's PMR is turned off. When estimating is off, the user may freely enter the actual PMR values, from a claim remittance for example, without the software re-estimating these values.

<p>Estimate Copay?</p> <p>Yes ▼</p>	<p>If 'Yes' then the copay selected in the patient's insurance case is used to estimate member responsibility. If 'No' then copay will not be estimated regardless of selection in patient's insurance case.</p>
<p>Estimate Co-insurance?</p> <p>Yes ▼</p>	<p>If 'Yes' then the co-insurance selected in the patient's insurance case is used to estimate member responsibility. If 'No' then co-insurance will not be estimated regardless of selection in patient's insurance case. Co-insurance is calculated using the charge's allowed amount.</p>
<p>Estimate Deductibles?</p> <p>Yes ▼</p>	<p>If 'Yes' then the deductible selected in the patient's insurance case is used to estimate member responsibility. If 'No' then deductible will not be estimated regardless of selection in patient's insurance case.</p>



Settings Practice Info

Insurance – Copay – Global Settings



Copay

You can determine if you are or are not accepting copay at your Practice in Settings/Practice Info/Charge Options.

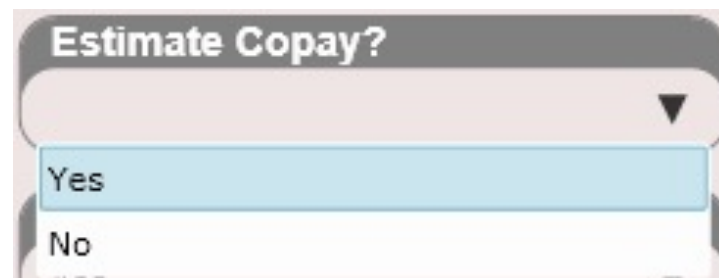
Estimate Copay?

YES

- The patient's selected Copay will be used to calculate member responsibility.
- The patient's selected Copay will be displayed when you check in a patient in the "Member Responsibility" box.

NO

- Copay will not be used to calculate member responsibility no matter what. This is true even if you enter a copay in for a patient and check the box next to copay in the patient's insurance plan screen.
- The patient's selected Copay will be displayed when you check in a patient in the "Member Responsibility" box but will not be used to calculate patient member responsibility.
- If no copay box is checked in the patient's insurance plan no copay information will be displayed.





Settings Practice Info

Insurance – Co-insurance – Global Settings



Co-insurance

You can determine if you are or are not accepting co-insurance at your Practice in Settings/Practice Info/Charge Options.

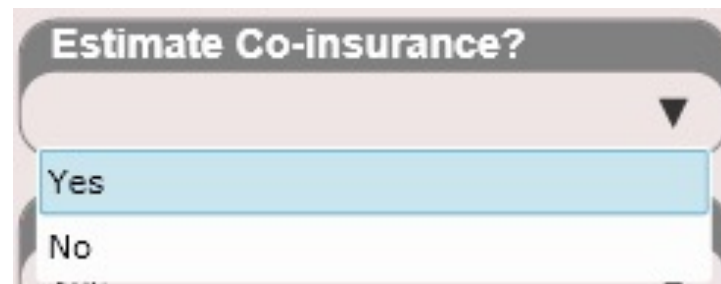
Estimate Co-insurance?

YES

- The patient's selected Co-insurance will be used to calculate member responsibility.
- The patient's selected Co-insurance will be displayed when you check in a patient in the "Member Responsibility" box.

NO

- Co-insurance will not be used to calculate member responsibility no matter what. This is true even if you enter a co-insurance in for a patient and check the box next to "Use this co-insurance" in the patient's insurance plan screen.
- The patient's selected Co-insurance will be displayed when you check in a patient in the "Member Responsibility" box but will not be used to calculate patient member responsibility.
- If no co-insurance box is checked in the patient's insurance plan no co-insurance information will be displayed.





Settings Practice Info

Insurance – Deductible – Global Settings



Deductible

You can determine if you are or are not accepting deductibles at your Practice in Settings/Practice Info/Charge Options.

Estimate Deductibles?

YES

- The patient's selected Deductible will be used to calculate member responsibility.
- The patient's selected Deductible will be displayed when you check in a patient in the "Member Responsibility" box. It will display either "Deductible Met" or "Deductible Not-Met".

NO

- Deductible will not be used to calculate member responsibility no matter what. Even if you enter a deductible reset date and check the "Use this deductible" for a patient.
- The patient's selected Deductible will be displayed when you check in a patient in the "Member Responsibility" box but will not be used to calculate patient member responsibility.
- If no Deductible box is checked in the patient's insurance plan no Deductible information will be displayed.

The image shows a screenshot of a software interface. At the top, there is a dark grey header with the text "Estimate Deductibles?" in white. Below the header is a light grey dropdown menu with a downward-pointing triangle on the right side. The dropdown menu is open, showing two options: "Yes" (highlighted in light blue) and "No" (in white).



Patient Responsibility and Annual Limits

Here you can record the following information:

Use this amount allowed?

Visit Amount Allowed

65.00

Use this copay?

Copay

20.00

Use this co-insurance?

Co-ins. %

20.00

Use this deductible?

Deductible Reset Date

Jan 1 ▼ **X**

Visit Amount Allowed

- Use this box if an insurance has a maximum allowed amount per visit. There are specific details on this box on subsequent pages.

Copay

- By default, this is set to zero. This means the patient is responsible for nothing and the insurance is responsible for everything. If you know the patient's copay, enter it in here.
- Check the "use this copay" box if you want to use the copay to calculate patient charges.

Co-insurance

- By default, the co-insurance percent is set to zero. If you know the patient's co-insurance percent, enter it here.
- Check the "use this coinsurance" box if you want to use the co-insurance to calculate patient charges.

Deductible Reset Date

- If the patient has a deductible, enter the deductible reset date. When the deductible is met, mark it as met either in the insurance plan or when reconciling a claim remittance.
- If you want the deductible to be used when calculating patient charges (e.g. the patient will owe 100%) make sure you also check the "use this deductible" check box." If this box is left unchecked the patient's deductible will not be used to calculate their charges.

Dashboard/Insurance – Patient Responsibility & Annual Limits

Insurance – Visit Amount Allowed



Visit Amount Allowed

- This box is used in instances where an insurance has a maximum allowed per visit. Although this box may seem complex, understanding it can have huge advantages to correctly calculating what your patient owes at checkout. See the following pages for examples on how this box assists in calculating your patient's member responsibility in the event that their insurance has a visit maximum allowed limit.

Use this amount allowed?

Visit Amount Allowed

65.00

Check to specify the insurance has a maximum allowed amount per visit.



Dashboard/Insurance – Patient Responsibility & Annual Limits

Insurance – Visit Amount Allowed

Visit Amount Allowed Example

Example 1: Patient has a 20% co-insurance and the insurance has a maximum of \$65 per visit.

If Co-Insurance is set at 20% and Visit Amount Allowed is **NOT USED**.

- If a day's services add up to \$130 by the patient's contracted rate and the patient has a 20% co-insurance, ChiroSpring would ledger that the patient owes \$26.00. This is calculated by (0.2×130) .

<input checked="" type="checkbox"/> Use this co-insurance?	<input type="checkbox"/> Use this amount allowed?
Co-ins. %	Visit Amount Allowed
20.00	0.00

Visit Total: \$130
Calculated Total: \$26

If Co-Insurance is set at 20% and Visit Amount Allowed **IS USED (set at \$65)**.

- If a day's services add up to \$130 by the patient's contracted rate and the patient has a 20% co-insurance, ChiroSpring would ledger that the patient owes \$13.00. This is calculated by (0.2×65) . Remember we set the visit allowed amount at \$65 in this example so instead of ChiroSpring using the actual VISIT TOTAL to calculate the patient's responsibility we are now using the "Visit Allowed Amount" which is \$65 in this example.

<input checked="" type="checkbox"/> Use this co-insurance?	<input checked="" type="checkbox"/> Use this amount allowed?
Co-ins. %	Visit Amount Allowed
20.00	65.00

Visit Total: \$130
Calculated Total: \$13



Dashboard/Insurance – Patient Responsibility & Annual Limits

Insurance – Visit Amount Allowed

Visit Amount Allowed Example

Example 2: Patient has a \$20 copay and the insurance has a maximum of \$65 per visit.

If Copay is set at \$20 and Visit Amount Allowed is **NOT USED**.

- If a day's services add up to \$130 by the patient's contracted rate and the patient has a \$20 copay, ChiroSpring would ledger that the patient owes \$20.00. In this example the copay trumps the visit allowed amount so the patient still owes \$20. Thus for copay it does not truly matter if you use the Visit Amount Allowed.

Use this copay?

Copay

20.00

Use this amount allowed?

Visit Amount Allowed

0.00

Visit Total: \$130
Calculated Total: \$20

If Copay is set at \$20 and Visit Amount Allowed **IS USED (set at \$65)**.

- If a day's services add up to \$130 by the patient's contracted rate and the patient has a \$20 copay, ChiroSpring would ledger that the patient owes \$20.00. In this example the copay trumps the visit allowed amount so the patient still owes \$20. Thus for copay it does not truly matter if you use the Visit Amount Allowed.

Use this copay?

Copay

20.00

Use this amount allowed?

Visit Amount Allowed

65.00

Visit Total: \$130
Calculated Total: \$20

Dashboard/Insurance – Patient Responsibility & Annual Limits

Insurance – Visit Amount Allowed



Visit Amount Allowed Example

Example 3: Patient has not met their deductible and the insurance has a maximum of \$65 per visit.

If Deductible has not been met and Visit Amount Allowed is **NOT USED**.

- If a day's services add up to \$130 by the patient's contracted rate and the patient has not met their deductible, ChiroSpring would ledger that the patient owes \$130.00. As deductible has not been met the patient is responsible for 100% of the insurance contracted charges

Deductible Not Met

A screenshot of a form. At the top, there is a checkbox that is unchecked, followed by the text "Use this amount allowed?". Below this is a dark grey rounded rectangle containing the text "Visit Amount Allowed" in white. Underneath that is a light grey rounded rectangle containing the text "0.00" in black.

Visit Total: \$130
Calculated Total: \$130

If Deductible has not been met and Visit Amount Allowed **IS USED (set at \$65)**.

- If a day's services add up to \$130 by the patient's contracted rate and the patient has not met their deductible, ChiroSpring would ledger that the patient owes \$65.00.

Deductible Not Met

A screenshot of a form. At the top, there is a checkbox that is checked, followed by the text "Use this amount allowed?". Below this is a dark grey rounded rectangle containing the text "Visit Amount Allowed" in white. Underneath that is a light grey rounded rectangle containing the text "65.00" in black. A red arrow points from the top right towards the checked checkbox.

Visit Total: \$130
Calculated Total: \$65

Dashboard/Insurance – Patient Responsibility & Annual Limits

Insurance - Copay



Every patient situation is different. ChiroSpring not only allows you to record a patient’s copay but also allows you to either USE or NOT-USE it to calculate the patient’s charges. There are some cases when a patient may have primary and secondary insurance, both with copays. However, only the secondary copay should be used to calculate the patient charges, for example. Using the “use this copay” check box you can either turn the copay ON or OFF.

Copay

- By default, this is set to zero. This means the patient is responsible for nothing and the insurance is responsible for everything. If you know the patient’s copay, enter it in here.
- Check the “use this copay” box if you want to use the copay to calculate patient charges.
- Leave the “use this copay” box blank if you do not want to use the copay to calculate patient charges

The check box is essentially an “On/Off” switch. If not checked the copay will not be used. This allows you to record a patient’s copay information accurately and gives you the ability to use or not use it.

A screenshot of a software interface for entering copay information. On the left, there is a checkbox with a checkmark inside, followed by the text "Use this copay?". Below this is a rounded rectangular input field with a dark grey header containing the word "Copay" and a light grey body containing the number "20.0000". To the right of the input field, there is a block of orange text: "When checked, this copay will be displayed and if copay estimating is enabled for the practice then is also used to estimate the patient's responsibility for any insurance charges."

Dashboard/Insurance – Patient Responsibility & Annual Limits

Insurance – Co-insurance



Every patient situation is different. ChiroSpring not only allows you to record a patient’s coinsurance but also allows you to either USE or NOT-USE it to calculate the patient’s charges. There are some cases when a patient may have primary and secondary insurance, both with coinsurances. However, only the secondary coinsurance should be used to calculate the patient charges, for example. Using the “use this co-insurance” check box you can either turn the co-insurance ON or OFF.

Co-insurance

- By default, this is set to zero. This means the patient is responsible for nothing and the insurance is responsible for everything. If you know the patient’s co-insurance, enter it in here.
- To have a patient on an insurance plan with 100% co-insurance (they owe everything up front) enter “100” into the co-ins box.
- Check the “use this co-insurance” box if you want to use the co-insurance to calculate patient charges.
- Leave the “use this co-insurance” box blank if you do not want to use the co-insurance to calculate patient charges.

The check box is essentially an “On/Off” switch. If not checked the co-insurance will not be used. This allows you to record a patient’s co-insurance information accurately and gives you the ability to use or not use it.

A screenshot of a software interface. On the left, there is a checkbox with a checkmark inside, followed by the text "Use this co-insurance?". Below this is a rounded rectangular input field with a dark grey header containing the text "Co-ins. %" and a light grey body containing the text "20.00". To the right of the input field, there is a block of orange text that reads: "When checked, this co-insurance will be displayed and if co-insurance estimating is enabled for the practice then is also used to estimate the patient's responsibility for any insurance charges."

Dashboard/Insurance – Patient Responsibility & Annual Limits

Insurance - Deductible



Deductible

By default, the deductible field is left blank. This indicates the patient does NOT have a deductible. If you wish to indicate a patient DOES have a deductible, you will need to populate the deductible reset date. When this date is present, and the “Use this deductible” box is checked, the patient will be charged the FULL amount for all charges until the deductible has been met.

- The deductible can be marked as met in two ways:
 - By clicking the green “Add” button at the bottom of the deductible list box
 - Within the “Reconcile app” when you are reconciling a patient charge
- You will also notice a check box that says, “Use this deductible.” This allows you to enter in a patient’s deductible reset date but also NOT use it to calculate charges at the cash register. This gives you extra flexibility on how you want to manage your patient’s individual insurance plan.
 - Check “Use this deductible” if you want the deductible to be applied (e.g. the patient will be charged for 100% for their charges)
 - Un-Check “Use this deductible” if you do NOT want to apply the deductible at the cash register.

The check box is essentially an “On/Off” switch. If not checked the deductible will not be used. This allows you to record a patient’s deductible information accurately and gives you the ability to use or not use it.

Use this deductible?

Deductible Reset Date

Jan 1 ▼ **X**

When checked, displays deductible information; if not checked then assumes plan has no deductible. Enter the deductible reset date to specify the insurance plan has a deductible. Clear out (red 'X') deductible reset date to specify the insurance plan does not have a deductible.

The screenshot shows a user interface for entering deductible information. It features a checked checkbox labeled "Use this deductible?". Below it is a section titled "Deductible Reset Date" with a text input field containing "Jan 1" and a dropdown arrow. To the right of the input field is a red "X" icon. A red text box on the right provides instructions: "When checked, displays deductible information; if not checked then assumes plan has no deductible. Enter the deductible reset date to specify the insurance plan has a deductible. Clear out (red 'X') deductible reset date to specify the insurance plan does not have a deductible."

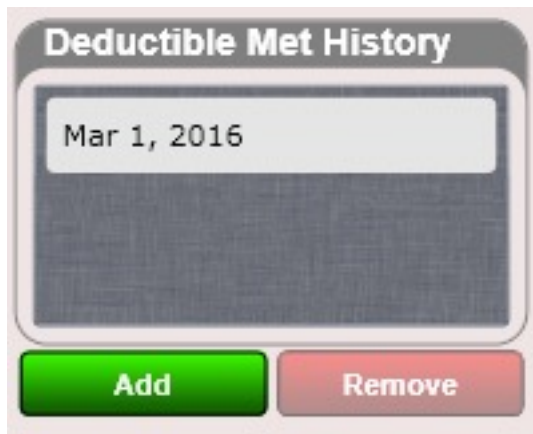
Dashboard/Insurance – Patient Responsibility & Annual Limits

Insurance - Deductible



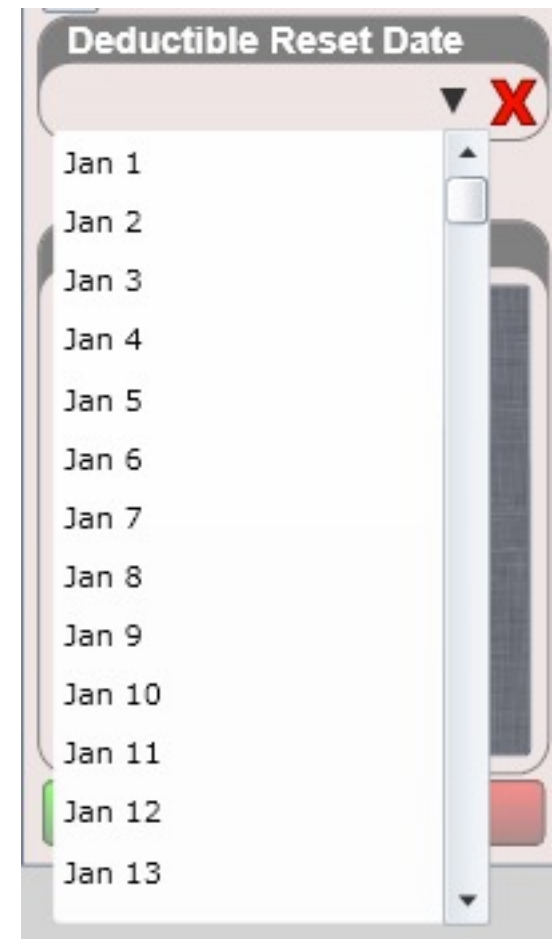
The deductible can be marked as MET in two ways.

- Create a deductible MET DATE by clicking the Green “Add” button. In the example below the deductible was met Nov 5, 2013.
- When reconciling a visit if you notice on the claim remittance the deductible is zero click the “Deductible Met” button at the bottom of the screen. This will mark the deductible met. The next page contains more details on this feature.



To show that a patient DOES HAVE a deductible you will need to select the deductible reset date (shown to the right). If a patient has a deductible, they will be responsible for ALL charges at the cash register (assuming you also selected the “Use Deductible” check box).

If a deductible is Met, the patient will no longer be charged 100% for their charges.



Dashboard/Insurance – Patient Responsibility & Annual Limits

Insurance - Deductible



After you have selected a deductible reset date you can then enter the deductible information. ChiroSpring will calculate when the deductible has been ESTIMATED as met. When you check-in your patient you will be prompted to MARK THE DEDUCTIBLE AS MET if the patient has paid more than their deductible for this year.

Deductible	
Annual Deductible Amt	Used Outside
3000.00	200.00
Used Here	Remaining
0.00	2800.00

Information - Deductible Met for this year ✕

Per our estimates this patient has met their deductible. Would you like to mark it as Met now?

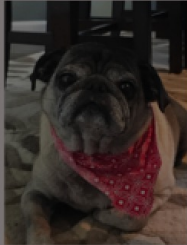
Dashboard/Insurance – Patient Responsibility & Annual Limits Insurance - Deductible



Chad A Thompson

Select Visit Insurance Case: BLUE CROSS Edit Insurance

Patient Portal: Enrolled Appt Reminder: Declined Fee Schedule: Insurance



Insurance Carriers	Chiro Visits	Therapy	Chiro Amt
Primary: Blue Cross/Blue Shield	5 of 20	0 of 10	\$0 of \$5,000
Secondary:			
Tertiary:			

Member Responsibility	
Deductible	\$5,000 of \$3,000 - Not Met
Copay	\$20.00
Co-insurance	0%

Reason for Visit: Adjustment

Reason/Visit Notes: Want's Massage Every Visit

Treatment Plan: 2x per week for 7 week(s)
8 of 14 completed

Account Information: Previous Balance: \$-761.82

Prefix: [] First: Chad Last: [] Middle: [] Suffix: [] Nickname: []

DOB: 12/12/1957 X

Email Address: chadthompson301@gmail.com

Address: 123 Sunny Dr City: Davenport State Abbr.: IA Zip: 54356

Phone 1: 555-623-6222 Type: Mobile

Phone 2: 556-897-8554 Type: Home

Fax: []

Notes: []

Clinical Summary: Pt. Requested

Message Contact: Voice - Phone 1

Preferred Location: Main

Is Pregnant: No

Used in Patient List app

Save Changes & Check In Cancel

Information - Deductible Met for this year

Per our estimates this patient has met their deductible. Would you like to mark it as Met now?

Yes No

Dashboard/Insurance – Patient Responsibility & Annual Limits

Out of Pocket Max - What to Do



ChiroSpring can easily support those situations when a patient has met their required out of pocket expense and are no longer responsible for paying co-pay, co-insurance, or deductible fees.

Under the Patient’s Dashboard, inside the Insurance Case app, you’ll find the primary, secondary, and tertiary insurance listings. When editing the appropriate insurance, you’ll find a Patient Responsibility and Annual Limits tab. This tab will display the options to apply the patient’s Co-pay, Co-Insurance, and Deductible. When any of these check boxes is selected, ChiroSpring will include that requirement in its patient calculations. If the patient eventually meets their required out of pocket expense, simply un-check these boxes. Now that these boxes are unchecked the software will calculate your patient owes \$0.00 for all insurance charges.



Stop Managers

You may also want to create a stop manager (pop up alert) that triggers after the benefits reset (typically after December 31). To do this, access the Stop Manager tile from the patient dashboard. Click “Add New” and type in something like “First of the year, turn back on patient benefits by selecting the Copay check box”. Then select a trigger date of January 1 (and the appropriate year). Then select where you would like the stop manager to trigger (e.g. Check-in). Now when you see your patient on or after this date the stop manager will notify you to re-check the appropriate copay, coinsurance or deductible boxes.

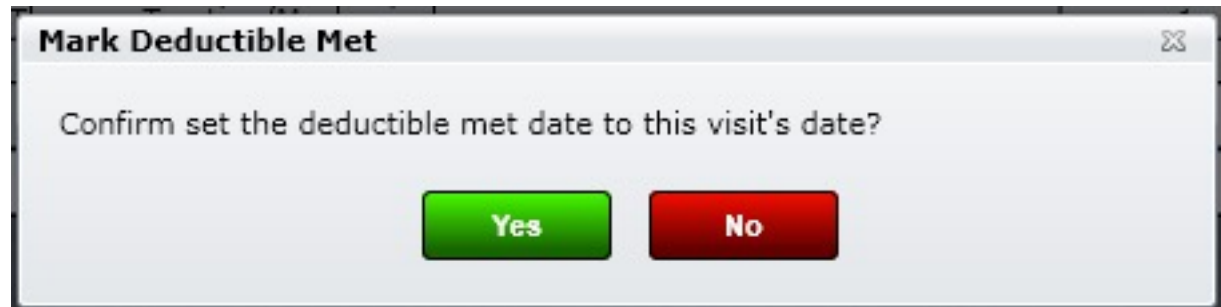
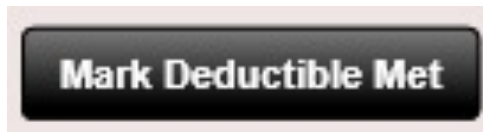
A screenshot of the Insurance Case app interface. It shows a list of insurance settings with three red circles highlighting checkboxes: "Use this copay?", "Use this co-insurance?", and "Use this deductible?". Below these are fields for "Copay" (0.00), "Co-ins. %" (0.00), and "Deductible Reset Date" (with a red X icon). At the bottom, there is a "Deductible Met History" section with "Add" and "Remove" buttons, and an "Annual Deductible Amt" field (0.00).

Mark Deductible Met When Reconciling

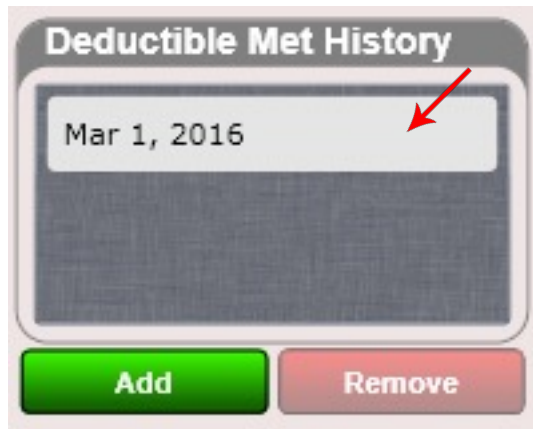
This section is taken from the RECONCILE section of this manual

Here we will show you the steps to Mark a Deductible Met while reconciling a charge.

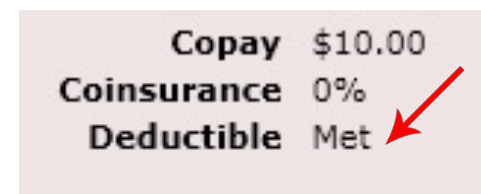
After the deductible fields are marked as 0.00 and you have balanced the charges click the black “Mark Deductible Met” button at the bottom of the screen. A dialog box will open asking if you are sure you want to mark the patient’s deductible as met.



Select “Yes” from the dialog to confirm the deductible as met.



If you wish to confirm that the deductible has in fact been marked as met, go to the patient’s dashboard and click on the insurance tile. The summary screen will show the deductible as met. Also, if you click the EDIT button on the insurance and navigate to the “Patient Responsibility and Annual Limits” tab you will see the Deductible Met Date in the “Deductible Met History” list box (shown to the right).





Insurance – Copay/Coinsurance/Deductible

Note that the copay, coinsurance or deductible you selected the check box for will show a red dot next to them on the insurance case summary screen (see below). In this example the patient's Primary Insurance will be using the Copay, Coinsurance and Deductible to estimate their patient charges.

As a reminder, you can only select one copay, one coinsurance or one deductible for an insurance case even if the patient has multiple insurances. However, you can select a copay from primary and a coinsurance from secondary if you wish, or vice versa.

Primary Insurance				Edit
Carrier	Wellmark Blue Cross & Blue Shield	Provider Phone	555-446-4474	<input checked="" type="checkbox"/> Copay \$20.00
Plan Name	Blue Cross and Blue Shield	Claim Type	Export	<input checked="" type="checkbox"/> Coinsurance 10%
Insured's ID #	8797987	Policy Group #	987987987	<input checked="" type="checkbox"/> Deductible Met
Employer/School	Primary School	Relation to Insured	Self	

Secondary Insurance				Add	Delete	Edit
Carrier	Medicaid	Provider Phone	555-433-3322	Copay	\$0.00	
Plan Name	Medicaid	Claim Type	Export	Coinsurance	0%	
Insured's ID #	89798797	Policy Group #		Deductible	None	
Employer/School	Secondary School Name	Relation to Insured	Self			



Insurance – Visit & Monetary Limits

Also, on the “Patient Responsibility and Annual Limits” tab is a dropdown box called “Visit & Monetary Limit Reset Date.” If you select a reset date you will THEN have boxes appear allowing you to enter:

- Annual Chiropractic Monetary Limit
- Annual Chiropractic Visit Limit
- Annual Therapy Visit Limit
- Deductible

ChiroSpring keeps Chiropractic and Therapy visit counters separate as most insurances also separate these visit types.

POWER TIP: Patients scheduled to a chiropractor will automatically increment one unit per visit for chiropractic visits. Patients scheduled to a massage therapist, physical therapist or acupuncturist will automatically increment one unit per visit for therapy visits. When writing the SOAP note on the Charges Tab you can change these counters manually.

You can also change the default settings on a per provider basis for both the chiropractic visit counter and the therapy visit counter. Settings/Users/Provider Info

Visit & Monetary Limit Reset Date	
Jan 1	▼ X

Annual Chiropractic Monetary Limit	
Allowed	Used Outside
5000.00	0.00
Total Used	Used Here
0.00	0.00

Annual Chiropractic Visit Limit	
Allowed	Used Outside
20	5
Total Used	Used Here
5	0

Annual Therapy Visit Limit	
Allowed	Used Outside
10	0
Total Used	Used Here
0	0

Deductible	
Annual Deductible Amt	Used Outside
3000.00	5000.00
Used Here	Remaining
0.00	-2000.00



Insurance – Visit & Monetary Limits

You can verify visit counts in four areas of the software

- New Appointment
- Check-in
- Edit SOAP – Care Plan tab
- Quick Info dialog (right click on a patient on the front desk to see this dialog)

If visits are over the limit they will be shown in yellow (see image below).



Chad Thompson

Select Visit Insurance Case

● Blue Cross / Medicare ▼

Edit Insurance

Appt Reminder

Text (Mobile)

Insurance Carriers		Chiro Visits	Therapy	Chiro Amt
Primary	Blue Cross & Blue Shield	49 of 20	3 of 15	\$2,328 of \$0
Secondary	Medicare			
Tertiary				



Insurance – Visit & Monetary Limits

Pictured to the right are the visit counters within the SOAP note for both chiropractic and therapy visits (below the charges list box). Again, patients scheduled to a chiropractor will automatically increment one unit per visit for chiropractic visits by default, and this box will be marked “YES”. Patients scheduled to a massage therapist, physical therapist or acupuncturist will automatically increment one unit per visit for therapy visits and thus the Therapy Visit box will be marked “YES”.

When writing the SOAP note on the Charges Tab you can change these counters manually by selecting Yes or No from the drop-down menu.

Power Tip: You can set the default status per provider for these visit counters in Settings/Users/Provider Info

Charges

98941	Manipulation 3-4 Regions	1 Units
■ PRC:	\$30.00	DISC: \$0.00
97012	Therapy-Traction/Mechanical	1 Units
■ PRC:	\$20.00	DISC: \$0.00

Cash Charge Claimable Charge

Chiro Visit **Therapy Visit**

My Treatments Default as a 'Chiro Visit'?
Yes

My Treatments Default as a 'Therapy Visit'?
No

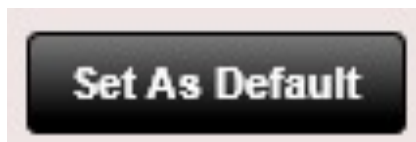


Insurance – Default Insurance Case

Setting a Default Insurance case is important. It does two things.

- Moves the insurance case to the top of the “Open Cases” list box
- This case is automatically selected when you check in a patient

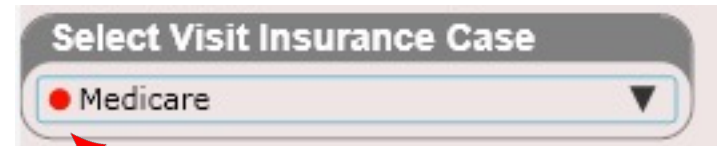
To set the default insurance case click on the insurance case in the “Open Cases” list box. Then click the black “Set as Default” button at the bottom. Then click “Save.” You will notice a red bar on the far right of the default insurance case.



Default insurance cases are denoted by a red dot. You will have the ability to change a patient’s insurance case when scheduling an appointment, during check in, when writing the SOAP (on the Intro Tab), and at checkout. Pictured to the right you can easily see that Medicare is the default insurance case.



Red bar indicates default insurance case.



Red dot indicates default insurance case.

Insurance – Add New

Adjuster

Often times an insurance will have an adjuster associated with the case. This is often the case with Auto Accident cases or Workman's Comp cases. Using the "Adjuster" tab located inside the insurance plan you can enter the adjuster information.

Insured's Info
Policy Info
Patient Responsibility and Annual Limits
Adjuster
Card Image

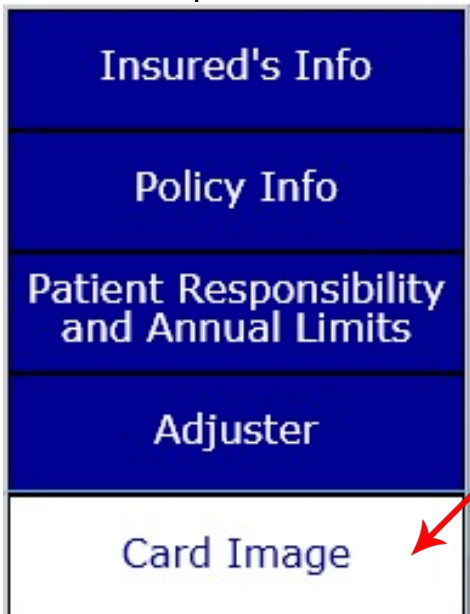
Company Name					
Prefix	First	Last	MI	Suffix	Nickname
DOB	Age	Sex	SSN	Email Address	
Address		City	State	Zip	
Phone 1	Type	Phone 2	Type	Fax	
Home		Home			
Notes					

Insurance – Add New

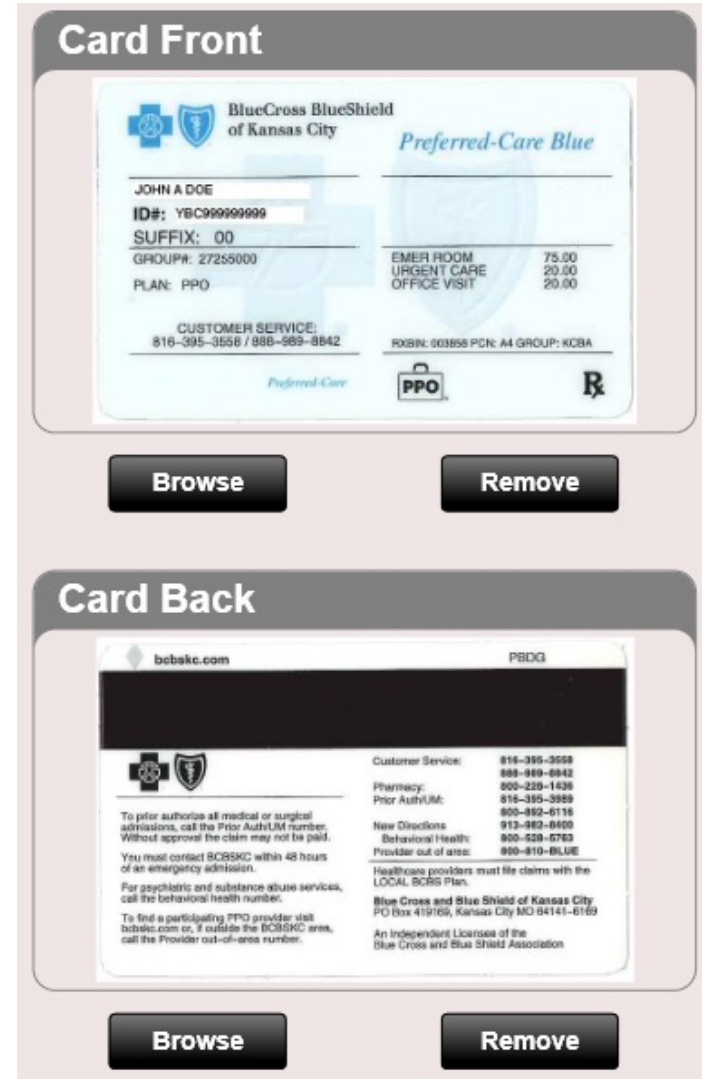
Card Image

Insert a scanned image of the insurance card front or back. To add an image click the Browse button and select the image. To remove an image click the Remove button.

The image MUST be a .PNG or .JPEG. PDF is not supported here. Make sure you scan your images as a small file. Large files will be automatically converted to small files when uploading to conserve cloud space.



Power Tip: Use our mobile app to snap a picture of the insurance card. This directly imports into ChiroSpring.



Insurance – Add New

Card Image

- ChiroSpring recommends the use of a card-scanner. These scanners are designed specifically to quickly scan the front and back of insurance cards, ID cards, or business cards. They perform a high-quality scan on only the necessary card information and minimize the resulting graphic file size. While ChiroSpring allows import of up to 150kb per scan, many card-scanners produce quality images with file size near or under 100kb.
- An Internet search will turn up a variety of card-scanners at various price points and with various features. ChiroSpring recommends finding one that produces quality images at a file size of under 150kb per image. Many on the market should be able to satisfy those simple requirements. And although we don't have any familiarity with this product or company, we know of several chiropractors who've chosen a scanner from the website below.
- <http://www.ambir.com/product-category/scanners/card-scanners/>



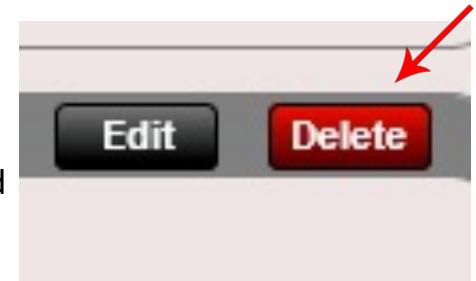
Duplex Card Scanner w/ AmbirScan (DS687ix-AS)

\$329.95

Insurance - Edit

To edit an insurance, select an insurance case, then click the black “Edit” button on the insurance you wish to edit (primary, secondary or tertiary).

You will notice a **WARNING in RED** at the bottom of the Insurance Summary screen. Read it carefully. It is stating that ANY change you make to an insurance will affect ALL previous claims associated with that insurance case. Therefore, If there is a change such as a new ID number, do NOT delete the old ID number and replace with the new ID number. Instead, close that insurance case by clicking the “Close” button at the top and then create a NEW insurance case.



If you are making a small change such as correcting a spelling error, you can do this without issue.

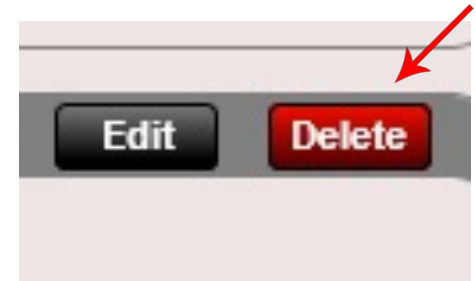
CAUTION: Edit insurances carefully! Any changes made will affect ALL previous claims referencing that insurance. Generally, create a new Insurance Case if a patient changes a primary, secondary, and/or tertiary insurance plan. Any other changes should be carefully analyzed to determine what affect they might have on previously submitted or unsubmitted claims.

Insurance - Delete

To delete an insurance, open the Insurance summary screen. Then click the red “Delete” button on the insurance you wish to delete (primary, secondary or tertiary).

NOTE: Deleting an insurance will affect ALL visits associated with that insurance case. Therefore, proceed with caution. If you have already billed this insurance even for one visit you should NOT delete the insurance. If the patient now has a new insurance the correct procedure is to close the existing insurance case by clicking the “Close” button at the top and then creating a new insurance case. The new insurance case will then contain the new insurance information.

You cannot delete a primary insurance as a minimum requirement for an insurance case is a primary insurance.



CAUTION: Edit insurances carefully! Any changes made will affect ALL previous claims referencing that insurance. Generally, create a new Insurance Case if a patient changes a primary, secondary, and/or tertiary insurance plan. Any other changes should be carefully analyzed to determine what affect they might have on previously submitted or unsubmitted claims.



Insurance Case – Default Case

As previously mentioned, you also have the ability of selecting which insurance case is the default case for that patient. To set the default case select it, then click the “Set as Default” button. Then save changes.

The Default Case will be auto-selected when you check in your patient.



Here the CSG case is default as indicated by the red bar on the right.

Insurance Cases - Tom Andresen

Open Cases

CSG
Start Date: Aug 6, 2014

Cash
Start Date: Aug 6, 2014

Closed Cases

Blue Cross/Medicare
Oct 23, 2014 to Mar 22, 2016

A red arrow points from the right side of the screen towards a vertical red bar on the right edge of the CSG case entry in the 'Open Cases' section.

Insurance Case – Close

By default, when creating a new insurance case, it is marked open (IE the “Open Case” button is greyed out). If the patient has a change in insurance and the current insurance case is no longer valid simply click on that case, then click on the “Close Case” button followed by saving changes. This will close the case and move it from the Open Cases list box to the Closed Cases list box and will also grey out the “Close Case” button.

Even though you may not use it, Cash cases cannot be closed. This allows the software to charge patients who have no other open cases.

This depicts a case that is OPEN



This depicts a case that is CLOSED



Here the Blue Cross/Medicare case is OPEN



Here the Blue Cross/Medicare case is CLOSED





Insurance Case – Close

If you wish to Open a case that is closed, first select the case from the “Closed Cases” list box. Then click the “Open Case” button followed by saving changes. The case is now open.

What do the statuses Open and Closed mean? Open of course means the case is active and can be selected as an option when treating the patient. If the case is closed, it simply will not appear as a selectable option when treating the patient. If you close a case and there are still outstanding charges or non-submitted charges, do not worry. Those charges will STILL be applied to that insurance case despite the closed status. If you wish to assign those visits to a new or different insurance case, you can do so by going to the Visits Tile in the Dashboard. Here you select the visit(s) you wish to change the insurance case on. You will see an Insurance Case box. Using the drop down you can select a new insurance case. More on this process later.

Open Case

Close Case

Closed Cases

Blue Cross/Medicare

Oct 23, 2014 to Mar 22, 2016

Insurance Case – Start Date & End Date



When creating an insurance case, you MUST enter in a start date. If you forget you will be prompted to create a start date.

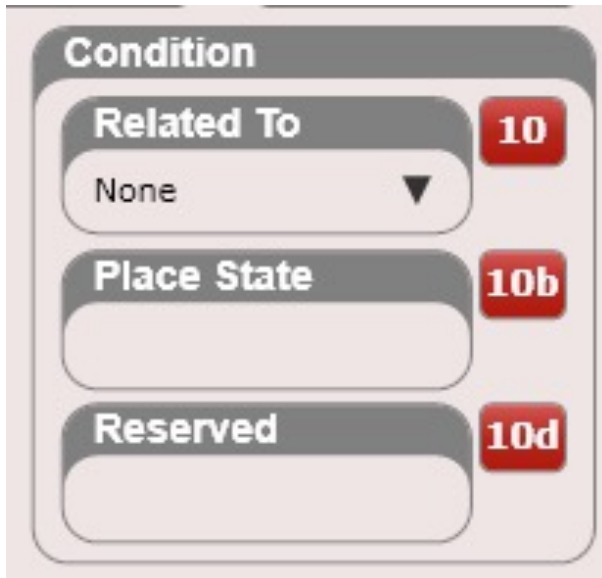
The start date must be the same as or older than any visits you wish to use this insurance case with.

A screenshot of a software interface showing two input fields for dates. The first field is labeled "Start Date" and contains the text "01-01-2015". To its right is a small calendar icon with the number "15" and a red "X" next to it. A red arrow points from the top of this field towards the "End Date" field. The second field is labeled "End Date" and contains the text "<MM-dd-yyyy>". To its right is a similar calendar icon with the number "15" and a red "X".

Let's say you want to re-bill a visit for June 1, 2016. When you create the new insurance case, ensure that the Start Date is OLDER than June 1, 2016. In this example we have chosen 5/25/2016. You could just as easily have chosen 1/1/2016. Changing the start and end dates do NOT affect any charges. They only ALLOW you to USE this insurance case within the Start Date and End Date range. We will go over how to change an insurance case for a visit later.

Insurance Case – HCFA Fields

When you create an insurance case you may need to populate HCFA fields 10, 10b and 10d. These fields will be tied to every visit that uses that insurance case. You can also populate “Other Claim ID” here which is box 11b.

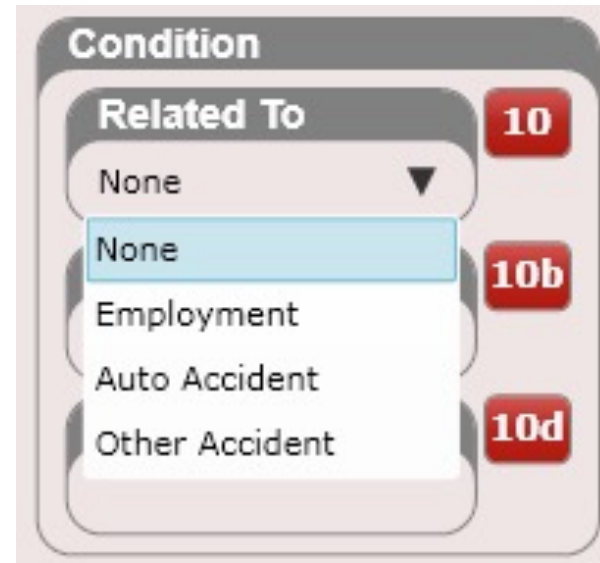


Condition

Related To **10**
None ▼

Place State **10b**
[Empty text box]

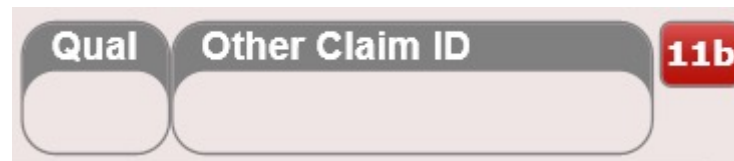
Reserved **10d**
[Empty text box]



Condition

Related To **10**
None ▼

- None **10b**
- Employment
- Auto Accident
- Other Accident **10d**



Qual **Other Claim ID** **11b**
[Empty text box] [Empty text box]

Insurance Case – Attorney

You can also add attorney information to an insurance case. Click the green “Select” button to add a new attorney. Use the “Remove” button to clear out the selected attorney.

Attorney Select Remove

Name: Tom Smith
Phone: 555-555-3333
Fax: 555-444-3333
Email: tomsmith@gmail.com
Address: 123 Madison Ave

You can add Attorneys here or also by using the Attorneys app located in Settings.



Attorneys

Select Attorney

Scott Jones

Tom Smith

Add New Edit Existing

Select Cancel



Insurance Case – Charge Report

Often you may need to submit a list of every charge for an insurance case to an insurance carrier or attorney. ChiroSpring has you covered with the “Charge Report”. At the bottom of the insurance case summary screen is a button called “Charge Report”. Click this button and the dialog to the right will open.

Select which fields you want populated on the report and press “OK”. The report will generate.



Select Optional Report Columns

- Amount Charged
- Co-Insurance
- Copay
- Deductible
- Diagnosis
- Facility NPI Number
- Insurance Owes
- Insurance Paid
- Insurance Savings
- Insurance Writeoff
- Patient Owes
- Patient Paid
- Patient Writeoff
- Total Owed

Select All Clear All OK Cancel

Set as Default

Spinal Care Chiropractic
1234 State St.
Davenport, IA 52804
563-555-6755
spinalcare@gmail.com

Insurance Case Charge Report

For: Randy Thompson
Insured ID: 87987987
Group:
Wellmark Blue Cross & Blue Shield
1233 Madison Ave
Davenport, IA 52804

Date	Description	Units	Amount Charged	Ins. Savings	Ins. Paid	Ins. Writeoff	Ins. Owes	Copay	Co-Ins.	Deduct.	Patient Paid	Patient Owes
03/14/14	98941 - Manipulati	1	40.00	10.00	10.00	0.00	0.00	20.00	0.00	0.00	20.00	0.00
03/14/14	97012 - Therapy-T	1	20.00	5.00	15.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
03/18/14	98941 - Manipulati	1	40.00	10.00	10.00	0.00	0.00	20.00	0.00	0.00	20.00	0.00
03/18/14	97012 - Therapy-T	2	40.00	25.00	15.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Totals:			140.00	50.00	50.00	0.00	0.00	40.00	0.00	0.00	40.00	0.00

#Care Plans (Dashboard)





Care Plans

Use ChiroSpring's Care Plan feature to create and manage care plans for your patient. Here are the notable features.

- Create Care Plan templates making it easy to add a care plan for a patient
- Provide discount on pay up front or recurring payment and generate an estimate
- Track # of units used and remaining
- Take care plan payment which can only be applied to care plan charges



Care Plans

Create Care Plans in Dashboard/Care Plans. There are three tabs.

- **Care Plan**
 - Create the Care Plan name, charges and number of units, start and end date and determine if you want to use the checkbox for balancing out unused care plan charges when the end date is reached.
- **Insurance**
 - Determine if insurance will be used. Use the up/down arrows on each charge on the estimated number of units insurance will apply to. Then indicate the estimated total number of visits the insurance will be used for. Remember, this is an estimate.
- **Estimate**
 - Specify if the patient will pay up front or use recurring payments. Set a discount and indicate if there is any down payment. When complete click the 'View Agreement' button. Print this and have your patient sign. You can customize the agreement in Settings/Care Plans.



Care Plans – Care Plan

Create a care plan name. Then click the 'Edit' button to add charges to your care plan. Use the up/down arrows to set the number of units for each charge.

We also recommend creating a care plan template in Settings/Care Plans. Then use the 'Add From Template' button to preload the care plan.

Care Plans - Brady E Albery ALBBR000 DOB: 12/16/1979 Age: 41 INS: BCBS CPT copyright: 2020 American Medical Association. All rights reserved.

Care Plan Insurance Estimate

Active Care Plans ?

Care Plan Name: Care Plan

Start Date: 10-31-2020 15 X End Date: 12-31-2020 15 X

Remove Patient Care Plan Balance At Care Plan End Date (e.g. The software will create a "Care Plan Balance Remainder" charge that will balance out the remaining Care Plan charges. Thus the patient will not be left with a credit.)

Care Plan Summary

Description	Units	Amount	Used	Remaining
98941 Manipulation 3-4 Regions	10	40.00	7	3
97035 Therapy-Ultrasound	5	25.00	5	0
99204-25 New Patient Comprehensive Examinat	1	110.00	0	1

Charges

98941 Manipulation 3-4 Regions 10 Units PRC: \$40.00

97035 Therapy-Ultrasound 5 Units PRC: \$25.00

99204-25 New Patient Comprehensive 1 Units PRC: \$110.00

Close Dock Set As Default Activate Plan Close Plan Add From Template Add New Delete Cancel Save

Front Desk Provider View Patient Flow Thursday, Dec 17, 2020 11:00 PM Dr. Brian Albery Log Out KB



Care Plans - Insurance

The Insurance tab allows you to specify if insurance will be used. If yes check the box 'Patient wants to use insurance'.

Then specify the number of units for each care plan charge that would be covered under insurance. As an example, the care plan might have 10 adjustments. However, only 7 are covered by insurance. Therefore, in this example you would set 7 units on this screen.

Finally make sure you set the Estimated Insurance Visits box. There could be cases when you do multiple services in one visit. For estimation, the number of planned insurance visits must be specified.

Care Plans - Brady E Albery ALBBR000 DOB: 12/16/1979 Age: 41 INS: BCBS CPT copyright 2020 American Medical Association. All rights reserved.

Care Plan Insurance Estimate

Patient wants to use insurance

Specify the number of units covered by insurance for each charge in the Care Plan.

Charges Edit

98941 Manipulation 3-4 Regions PRC: \$40.00	7 Units
97035 Therapy-Ultrasound PRC: \$25.00	0 Units
99204-25 New Patient Comprehensive Examination PRC: \$110.00	0 Units

Insurance Case
BCBS

Insurance Carrier
BCBS, 12345 Prospect Way, Davenport, IA 52748

Copay
10.00

Co-insurance %
0

Deductible
None

Estimated Insurance Visits ?
7

View Amount Allowed

Close Dock Set As Default Activate Plan Close Plan Add From Template Add New Delete Cancel Save

Front Desk Provider View Patient Flow Thursday, Dec 17, 2020 11:00 PM Dr. Brian Albery Log Out KB



Care Plans - Estimate

The Estimate tab allows you to specify any discount percent and select which payment method the patient will be using (up front or recurring).

For recurring determine the number of payments and if there is any down payment.

If you want to repeat a care plan (typical with a monthly care plan club) then create a Group Name, set the start date (for the first repeat) and indicate the frequency and number of times.

When your care plan is complete save changes, then click 'View Agreement'.

Print and have your patient sign. You can save a copy in the patient's Documents tile.

Care Plans - Brady E Albery ALBBR000 DOB: 12/16/1979 Age: 41 INS: BCBS CPT copyright 2020 American Medical Association. All rights reserved.

Care Plan Insurance **Estimate**

Selected Payment Method
Upfront

Estimate One Upfront Payment

Insurance Payment	70.00
Discount %	30
Cash Payment	248.50
Total Payment (Cash + Insurance)	318.50

Repeat Care Plan

Group Name

Start Date
01-01-2021

Frequency
Monthly for 0 Times

Create Care Plans

View Agreement

Close Dock Set As Default Activate Plan Close Plan Add From Template Add New Delete Cancel Save

Front Desk Provider View Patient Flow **Thursday, Dec 17, 2020 11:01 PM** **Dr. Brian Albery** Log Out KB



Care Plans – Print Estimate

View Agreement

CPT copyright 2020 American Medical Association. All rights reserved.

Practice Name
Address
City, State Zip
Phone1
Email1
Tax ID

For: Brady E Albery
DOB: 12/16/1979
Start Date: 10/31/2020
End Date: 12/31/2020
12345 Prospect Way
Davenport, IA 52748

Care Plan Estimate

We have created a custom Care Plan for you.

Insurance:

Insurance Carrier: BCBS

● Copay: \$10.00

Coinsurance: 0%

Deductible: None

Services Provided and Cost Analysis

Service/Product	Total Units	Ins. Units	Price	Total
98941 Manipulation 3-4 Regions	10	7	40.00	190.00
97035 Therapy-Ultrasound	5	0	25.00	125.00
99204-25 New Patient Comprehensive Examination	1	0	110.00	110.00

Total Before Discount: \$425.00

Pay Monthly (15% Savings): \$371.75

Pay in Full (30% Savings): \$318.50

Note: Discount only applies to non-insurance units.

Options for Savings

Monthly Payment - Card auto debited each month

Discount: 15%

Estimated Savings: \$53.25

Down Payment Today: \$0.00

Monthly Payment: \$74.35

Close

Dock

Print

Front Desk

Provider View

Patient Flow

Thursday, Dec 17, 2020

11:01 PM

Dr. Brian Albery

Log Out

KB



Care Plans - Tracking

When your care plan is created you can track it in multiple places. ChiroSpring makes it easy to see how many units have been used and how many remain.

- Check In Dialog
- Quick Info Dialog
- Edit SOAP Intro Tab
- Edit SOAP Charges Tab
 - Select the Care Plan Charges Tab above the charges grid
- Dashboard/Care Plan tab

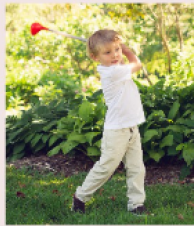


Care Plans – Check In Dialog

General | **Care Plan**

Brady E Albery

Select Visit Insurance Case: BCBS Edit Insurance Patient Portal: Not Enrolled Appt Reminder: Text (Mobile) Fee Schedule: Cash



Insurance Carriers	Chiro Visits	Therapy	Chiro Amt
Primary: 3456 WELCOME WAY	20 of 20	1 of 10	\$1,865 of \$0
Secondary			
Tertiary			

Member Responsibility	
Deductible	None
Copay	\$20.00
Co-insurance	0%

Reason for Visit	Reason/Visit Notes	Treatment Plan	Account Information
Adjustment Edit		3x per week for 4 week(s) to 12/2/2020 2x per week for 4 week(s) to 1/27/2021 11 of 20 completed	Previous Balance: \$20.00

Preferred Provider: Dr. Brian Albery

Care Plan Details

Care Plan: Care Plan (10/31/2020 - 12/31/2020) X

Description	Units	Amount	Used	Remaining
98941 Manipulation 3-4 Regions	10	40.00	7	3
97035 Therapy-Ultrasound	5	25.00	5	0
99204-25 New Patient Comprehensive Examination	1	110.00	0	1

Save Changes & Check In Cancel



Care Plans – Edit SOAP Intro Tab

SOAP Note - Brady E Albery ALBBR000 DOB: 12/16/1979 Age: 41 Ins: BCBS CPT copyright 2020 American Medical Association. All rights reserved. Visit: 12/17/2020 23:15 PM

Intro Condition MIST Complaint ROS Pt. Intake Free Text

S Copy Data ? Copy From Previous Visit

O Print Report Setting ? SOAP Report

A Patient Owes \$40.00

P Scheduled to Provider Dr. Brian Albery

Rendering Provider **24j** Dr. Brian Albery

SOAP Signed by Not Signed

Appointments **History**

- Completed Canceled
- Missed Rescheduled
- Future Signed SOAP

Dec 29, 2020 - 10:00 AM Tue Dr. Brian Albery Scheduled

Dec 29, 2020 - 9:00 AM Tue

SOAP Note Header Title

Reason for Visit **Edit** Adjustment

Appointment Note **Edit**

Visit Date & Time **24a** Dec 17, 2020 11:15 PM

Treatment Plan ? 3x per week for 4 week(s) 12/2/2020 to 2x per week for 4 week(s) 1/27/2021 11 previously completed 20 total

Condition Case Description ? Low Back Pain from Shoveling

Last Re-Evaluation ? Date 11/27/2020 Visits since 15 Patient had re-evaluation today **Yes** **No**

Visits - Primary Ins. Chiropractic 21 of 20 Therapy 1 of 10

Visits - Secondary Ins. Chiropractic Therapy

Care Plan **24j** Care Plan (10/31/2020 - 12/31/2020)

Description	Units	Amount	Used	Remaining
98941 Manipulation 3-4 Regions	10	40.00	7	3
97035 Therapy-Ultrasound	5	25.00	5	0
00204-25 New Patient Comprehensive E	1	110.00	0	1

Images

HCFA Visit Related Fields **16** **18** **19** **22** **23** **24b** **24c** **24h**

Close Dock Save Save & Sign Back Next Preview Dashboard

Front Desk Provider View Patient Flow Thursday, Dec 17, 2020 11:16 PM Dr. Brian Albery Log Out KB



Care Plans – Edit SOAP Charges Tab

The Edit SOAP Charges tab not only makes it easy to see how many units remain. It also allows you to click the 'Add' button to add these care plan charges.

Care Plan charges will appear orange.

Remember, when you take payment there is a check box for "Care Plan Payment". Only Care Plan money can be applied to a Care Plan charge. This distinction is reflected in the patient Ledger.

SOAP Note - Brady E Albery ALBBR000 DOB: 12/16/1979 Age: 41 Ins: BCBS CPT copyright 2020 American Medical Association. All rights reserved. Visit: 12/17/2020 23:15 PM

Charges Free Text Care Plan Treatment Wrap Up CPOE

Charges

98941 Manipulation 3-4 Regions 1 Units

PRC: \$40.00 DISC: \$12.00

Charges Care Plan Charges

Charge Code	Description	Remaining Cash Units	Remaining Insurance Units	Action
98941	Manipulation 3-4 Regions	2 of 3	0 of 7	ADD
97035	Therapy-Ultrasound	0 of 5	0 of 0	ADD
99204-25	New Patient Comprehensive Examination	1 of 1	0 of 0	ADD

Legend: ■ Cash Charge ■ Claimable Charge ■ Care Plan

Chiro Visit: Yes Therapy Visit: No

Buttons: Close, Dock, Save, Save & Sign, Back, Next, Preview, Dashboard, Front Desk, Provider View, Patient Flow, Thursday, Dec 17, 2020 11:17 PM, Dr. Brian Albery, Log Out, KB



Care Plans – Quick Info Dialog

Quick Info - Brady E Albery ALBBR000 DOB: 12/16/1979 Age: 41 INS: BCBS CPT copyright 2020 American Medical Association. All rights reserved.

General | Care Plan

Care Plan Name: Care Plan Start Date: 10/31/2020 End Date: 12/31/2020

Description	Units	Amount	Used	Remaining
98941 Manipulation 3-4 Regions	10	40.00	8	2
97035 Therapy-Ultrasound	5	25.00	5	0
99204-25 New Patient Comprehensive Examination	1	110.00	0	1

Close Print Dashboard

Front Desk Provider View Patient Flow **Thursday, Dec 17, 2020 11:17 PM** Dr. Brian Albery Log Out KB



Care Plans - Dashboard

Profile - Brady E Albery ALBBR000 DOB: 12/16/1979 Age: 41 INS: BCBS

Personal Info

Care Plan Name Care Plan **Start Date** 10/31/2020 **End Date** 12/31/2020

Demographics

Care Plan
Care Plan

Profile Picture

Driver License Image

Hobbies


Emergency Contact

Employment Info

Primary Care Provider

Acknowledgements

Payment Methods



Description	Units	Amount	Used	Remaining
98941 Manipulation 3-4 Regions	10	40.00	8	2
97035 Therapy-Ultrasound	5	25.00	5	0
99204-25 New Patient Comprehensive Examination	1	110.00	0	1

Close Save Dashboard



Care Plans - Ledger

The patient Ledger will show which charges are Care Plan charges by displaying an orange square. See red arrow.

You will also see two separate totals:

- Care Plan Details
- Non-Care Plan Details

As mentioned, only care plan payments can be applied to care plan charges. This allows you the ability to easily manage care plans and their payments. As an example, if a patient paid \$1,000 for their care plan you would not want that money applying to random things like a Biofreeze or supplements.

Ledger - Brady E Albery ALBBR000 DOB: 12/16/1979 Age: 41 INS: BCBS CPT copyright: 2020 American Medical Association. All rights reserved.

Pt. Charges Pt. Payments Pt. Scheduled Payments Show Show All Show All Charges

Date	C-P	Description	Units	Amount	Hold	Claim	Allowed	Pri. Paid	Sec. Paid	Ter. Paid	Copay	Co-ins.	Deduct.	Pt. Paid	Pt. Owes
12/17/20	■	98941 Manipulation 3-4 Regions	1	28.00	No	No	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	28.00
12/17/20		98941 Manipulation 3-4 Regions	1	40.00	No	Yes	40.00	0.00	0.00	0.00	20.00	0.00	0.00	0.00	20.00
12/17/20		97110 Therapy-Therapeutic Exercise	1	40.00	No	Yes	40.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
12/15/20		98941 Manipulation 3-4 Regions	1	40.00	No	Yes	40.00	0.00	0.00	0.00	20.00	0.00	0.00	20.00	0.00
12/15/20		97035 Therapy-Ultrasound	1	25.00	No	Yes	25.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
12/15/20		72080 X-ray Thocacolumbar Spine-AP/L	1	65.00	No	Yes	65.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
12/15/20		1036 Ultima 5 Digital TENS Unit with Tir	1	86.40	No	No	0.00	0.00	0.00	0.00	0.00	0.00	0.00	86.40	0.00
12/15/20		1000 Biofreeze Cryospray -8 Oz	1	19.44	No	No	0.00	0.00	0.00	0.00	0.00	0.00	0.00	19.44	0.00
12/15/20		98941 Manipulation 3-4 Regions	1	40.00	No	Yes	40.00	0.00	0.00	0.00	20.00	0.00	0.00	20.00	0.00
12/15/20		97035 Therapy-Ultrasound	1	25.00	No	Yes	25.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
12/14/20		98941 Manipulation 3-4 Regions	1	40.00	No	Yes	40.00	0.00	0.00	0.00	20.00	0.00	0.00	20.00	0.00

Charge Details

Totals Details

Care Plan Details

Pt. Charges	Pt. Payments	Unapplied	Pt. Owes	Ins. Owes	Ins. Paid
\$199.00	\$377.00	\$206.00	-\$178.00	\$176.50	\$0.00

Non-Care Plan Details

Pt. Charges	Pt. Payments	Unapplied	Pt. Owes	Ins. Owes	Ins. Paid
\$24,850.31	\$24,830.31	\$0.00	\$20.00	\$32,057.25	\$359.33

Edit Charge Visit Charges View Payments View Remittances Edit Transaction

Close Dock Print Ledger Load More

Front Desk Provider View Patient Flow Monday, Dec 21, 2020 2:06 PM Dr. Brian Albery Log Out KB



Care Plans - Ledger

On the Pt. Payments tab you can also see which payments are Care Plan payments. This is specified by the black square in the C-P column.

You can also set the color for Care Plan payments in Settings/Practice Info/Payment Colors.

Ledger - Brady E Albery ALBBR000 DOB: 12/16/1979 Age: 41 INS: BCBS CPT copyright 2020 American Medical Association. All rights reserved.

Pt. Charges Pt. Payments Pt. Scheduled Payments Show All Payments

Date	C-P	Facility	Payer	Method	Card/Check Number	Paid	Note	Status	Assigned	Unapplied
12/15/20		Spinal Care Chirc	Brady E Albery	Cash		145.84		Paid	145.84	0.00
12/14/20		Spinal Care Chirc	Brady E Albery	Cash		39.44		Paid	39.44	0.00
12/10/20		Spinal Care Chirc	Brady E Albery	Cash		169.78		Paid	169.78	0.00
12/07/20		Spinal Care Chirc	Brady E Albery	Cash		10.00		Paid	10.00	0.00
12/07/20		Spinal Care Chirc	Brady E Albery	Credit Card		50.00		Paid	50.00	0.00
12/02/20		Spinal Care Chirc	Brady E Albery	Cash		31.34		Paid	31.34	0.00
12/02/20		Spinal Care Chirc	Brady E Albery	Cash		39.44		Paid	39.44	0.00
12/01/20		Spinal Care Chirc	Brady E Albery	Cash		115.60		Paid	115.60	0.00
11/30/20		Spinal Care Chirc	Brady E Albery	Cash		131.34		Paid	131.34	0.00
11/27/20		Spinal Care Chirc	Brady E Albery	Cash		37.28		Paid	37.28	0.00
11/25/20	■	Spinal Care Chirc	Brady E Albery	Cash		318.50		Paid	318.50	206.00
11/23/20		Spinal Care Chirc	Brady E Albery	Cash		61.04		Paid	61.04	0.00

■ Care Plan Payment ■ Fully Applied Payment ■ Under Applied Payment ■ Over Applied Payment **Payment Receipt**

Care Plan Details

Pt. Charges	Pt. Payments	Unapplied	Pt. Owes	Ins. Owes	Ins. Paid
\$199.00	\$377.00	\$206.00	\$-178.00	\$176.50	\$0.00

Non-Care Plan Details

Pt. Charges	Pt. Payments	Unapplied	Pt. Owes	Ins. Owes	Ins. Paid
\$24,850.31	\$24,830.31	\$0.00	\$20.00	\$32,057.25	\$359.33

Add Payment **Delete** **Edit**
Add OpenEdge Payment **Apply to Charges** **Print**

Close **Dock** **Print Ledger** **Load More**

Front Desk Provider View Patient Flow **Monday, Dec 21, 2020** **2:06 PM** **Dr. Brian Albery** Log Out KB



Care Plans – Payment

When adding a payment make sure you check the “Care Plan Payment” dialog if this is a Care Plan Payment. This money can then only be applied to Care Plan Charges.

Enter Payment

Payment Info **Assign Payment**

Cash
Credit Card
Check
Return
Writeoff
Transfer
Care Credit
Gift Card
Billing Dept.

Patient is paying by cash or debit card.
This date reflects payment date on reports

Payment Date
12-21-2020

Facility Location
Spinal Care Chiropractic

Payer
Brady E Albery

Amount
500.00 Care Plan Payment

Comments

1 2 3
4 5 6
7 8 9
. 0 Cl

Once a payment is entered it is strongly recommended that its payment amount be applied to charges it will pay for. This is for accurate book-keeping. If the Auto-Apply Payments setting is enabled in Practice Settings then ChiroSpring will do this for you when you save your changes. To manually apply a payment select the payment, then select "Apply Payment".

OK Cancel

#Condition Cases (Dashboard)





Dashboard – Condition Cases

All patient conditions are tracked in ChiroSpring. More details will be provided in the Edit SOAP section on how to create or edit a condition case.

The condition case tile lists all of the patient's conditions. Here you can find the condition's primary diagnosis, the date range, who originally created the condition case and a brief description of the condition.

This information can be useful to see how many past conditions the patient has had, or if you need to print SOAP notes for a particular condition you can use the date range provided here to let you know which SOAP notes to print.

Condition Cases - Tom Andresen ANDT0000 DOB: 01/12/1990 Age: 26 INS: CSG

Conditions for Provider Type Chiropractor ▼	Original Condition Primary Diagnosis 723.1 Cervicalgia
723.1 Cervicalgia 8/6/2014 to Present	Date Range 8/6/2014 to Present
	Created By Dr. Brian DC
	Description of Condition



Dashboard – Condition Cases

Conditions for Provider Type

Chiropractor ▼

- Acupuncturist
- Chiropractor
- Massage Therapist
- Medical Doctor / Nurse Practitioner
- Nurse
- Physical Therapist



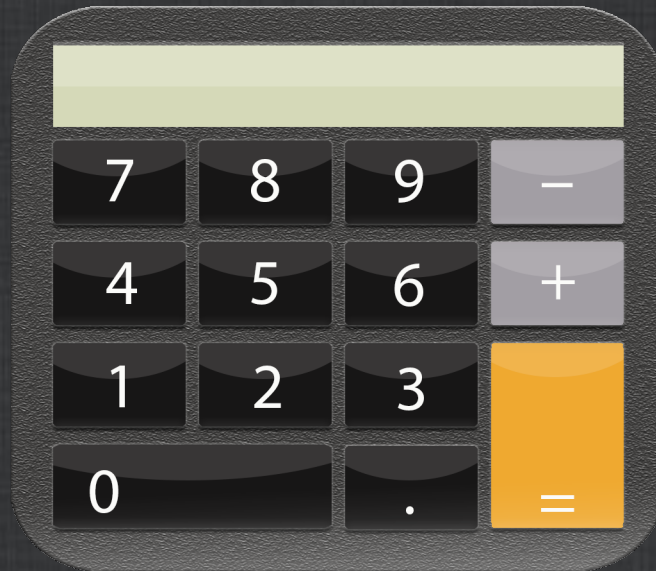
Power Tip: Condition cases are separated by provider type. To see a list of condition cases for a different provider type select the provider type from the drop-down list.

Note: Only one active condition case can be created at any given time. If you wish to create a new condition case your previous condition case will close. Creating a new condition case can be done in the SOAP Note by:

- Click the “New Condition” button at the bottom of the Condition Tab within the SOAP note.



#Ledger (Dashboard)





Ledger

The patient ledger is a one stop shop for seeing every **charge** or **payment** that that patient has ever had. At the top of the ledger, you will see three tabs: Pt. Charges, Pt. Payments and Scheduled Credit Card Payments.



The ledger also allows you to perform the following functions

Pt. Charges Tab

- View charge details
- Edit charges (including delete)
- Edit cash register transactions (change date or provider)
- Print a patient ledger
- View a group of charges associated with a visit
- View payments that have been applied to a charge
- View remittances associated with a charge
- View a patient's total charges, payments, unapplied and owed amounts
- View the amount insurance owes for that patient

Pt. Payments Tab

- Add a payment
- Delete a payment
- Edit a payment
- apply a payment to charges
- Print a patient ledger



Ledger

The patient ledger is a one stop shop for seeing every **charge** or **payment** that that patient has ever had. At the top of the ledger, you will see three tabs: Pt. Charges, Pt. Payments and Scheduled Credit Card Payments.



Scheduled Credit Card Payments

This section allows you to create a scheduled payment for your patient with the option to set it to repeat. You can process the payment from this tab or use the Process Payments app in Launcher to process payments for all patients.

Ledger – Pt. Charges



Ledger - Brady E Albery ALBBR000 DOB: 12/16/1979 Age: 41 INS: BCBS CPT copyright 2020 American Medical Association. All rights reserved.

Pt. Charges
Pt. Payments
Pt. Scheduled Payments
Show Show All
 Show All Charges

Date	C-P	Description	Units	Amount	Hold	Claim	Allowed	Pri. Paid	Sec. Paid	Ter. Paid	Copay	Co-ins.	Deduct.	Pt. Paid	Pt. Owes
12/17/20		98941 Manipulation 3-4 Regions	1	28.00	No	No	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	28.00
12/17/20		98941 Manipulation 3-4 Regions	1	40.00	No	Yes	40.00	0.00	0.00	0.00	20.00	0.00	0.00	0.00	20.00
12/17/20		97110 Therapy-Therapeutic Exercise	1	40.00	No	Yes	40.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
12/15/20		98941 Manipulation 3-4 Regions	1	40.00	No	Yes	40.00	0.00	0.00	0.00	20.00	0.00	0.00	20.00	0.00
12/15/20		97035 Therapy-Ultrasound	1	25.00	No	Yes	25.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
12/15/20		72080 X-ray Thocacolumbar Spine-AP/L	1	65.00	No	Yes	65.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
12/15/20		1036 Ultima 5 Digital TENS Unit with Tir	1	86.40	No	No	0.00	0.00	0.00	0.00	0.00	0.00	0.00	86.40	0.00
12/15/20		1000 Biofreeze Cryospray -8 Oz	1	19.44	No	No	0.00	0.00	0.00	0.00	0.00	0.00	0.00	19.44	0.00
12/15/20		98941 Manipulation 3-4 Regions	1	40.00	No	Yes	40.00	0.00	0.00	0.00	20.00	0.00	0.00	20.00	0.00
12/15/20		97035 Therapy-Ultrasound	1	25.00	No	Yes	25.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
12/14/20		98941 Manipulation 3-4 Regions	1	40.00	No	Yes	40.00	0.00	0.00	0.00	20.00	0.00	0.00	20.00	0.00

Charge Details

Totals
Details

Care Plan Details

Pt. Charges \$199.00	Pt. Payments \$377.00	Unapplied \$206.00	Pt. Owes \$-178.00	Ins. Owes \$176.50	Ins. Paid \$0.00
--------------------------------	---------------------------------	------------------------------	------------------------------	------------------------------	----------------------------

Non-Care Plan Details

Pt. Charges \$24,850.31	Pt. Payments \$24,830.31	Unapplied \$0.00	Pt. Owes \$20.00	Ins. Owes \$32,057.25	Ins. Paid \$359.33
-----------------------------------	------------------------------------	----------------------------	----------------------------	---------------------------------	------------------------------

Edit Charge
Visit Charges
View Payments
View Remittances
Edit Transaction

Close
Dock
Print Ledger
Load More



Ledger

When you look at your ledger you may see multiple colors (as shown on the previous page). These colors are indicative of the charges “Billing State”. This can be extremely useful such that at a glance you know which charges are still being billed to insurance (e.g. primary could be blue, secondary could be red) or which charges are reconciled (shown in orange).

To change the Billing State colors, go to Settings/Practice Info/Charge Options

Billing Colors

Billing State Colors

Bill Primary Preview Text

Bill Secondary Preview Text

Bill Tertiary Preview Text

Cash Preview Text

Primary Billed Preview Text

Secondary Billed Preview Text

Tertiary Billed Preview Text

Reconciled Preview Text

Not Signed Preview Text

Ledger – Pt. Payments



Ledger - Brady E Albery ALBBR000 DOB 12/16/1979 Age: 41 INS: BCBS CPT copyright 2020 American Medical Association. All rights reserved.

Pt. Charges
Pt. Payments
Pt. Scheduled Payments
Show All Payments ▼

Date	C-P	Facility	Payer	Method	Card/Check Number	Paid	Note	Status	Assigned	Unapplied
12/15/20		Spinal Care Chirc	Brady E Albery	Cash		145.84		Paid	145.84	0.00
12/14/20		Spinal Care Chirc	Brady E Albery	Cash		39.44		Paid	39.44	0.00
12/10/20		Spinal Care Chirc	Brady E Albery	Cash		169.78		Paid	169.78	0.00
12/07/20		Spinal Care Chirc	Brady E Albery	Cash		10.00		Paid	10.00	0.00
12/07/20		Spinal Care Chirc	Brady E Albery	Credit Card		50.00		Paid	50.00	0.00
12/02/20		Spinal Care Chirc	Brady E Albery	Cash		31.34		Paid	31.34	0.00
12/02/20		Spinal Care Chirc	Brady E Albery	Cash		39.44		Paid	39.44	0.00
12/01/20		Spinal Care Chirc	Brady E Albery	Cash		115.60		Paid	115.60	0.00
11/30/20		Spinal Care Chirc	Brady E Albery	Cash		131.34		Paid	131.34	0.00
11/27/20		Spinal Care Chirc	Brady E Albery	Cash		37.28		Paid	37.28	0.00
11/25/20		Spinal Care Chirc	Brady E Albery	Cash		97.36		Paid	97.36	0.00
11/25/20	■	Spinal Care Chirc	Brady E Albery	Cash		318.50		Paid	318.50	206.00
11/23/20		Spinal Care Chirc	Brady E Albery	Cash		61.04		Paid	61.04	0.00

■ Care Plan Payment
 ■ Fully Applied Payment
 ■ Under Applied Payment
 ■ Over Applied Payment
 Payment Receipt

Care Plan Details

Pt. Charges	Pt. Payments	Unapplied	Pt. Owes	Ins. Owes	Ins. Paid
\$199.00	\$377.00	\$206.00	\$-178.00	\$176.50	\$0.00

Non-Care Plan Details

Pt. Charges	Pt. Payments	Unapplied	Pt. Owes	Ins. Owes	Ins. Paid
\$24,850.31	\$24,830.31	\$0.00	\$20.00	\$32,057.25	\$359.33

Add Payment
Delete
Edit

Add OpenEdge Payment
Apply to Charges
Print

Close
Dock
Print Ledger
Load More

Ledger – Scheduled Credit Card Payments



Ledger - Chad A Thompson TherapyTHOCH DOB: 12/12/1957 Age: 59 INS: BLUE CROSS

CPT copyright 2013 American Medical Association. All rights reserved.

	Scheduled Date	Amount	Payer	CC#	EXP (MM/YY)	Date Created	Status	Note
<input type="checkbox"/>	04/28/17	50.00	Chad A Thompson	XXXX-XXXX-XXXX-2229	04/18	04/28/17	Scheduled	
<input type="checkbox"/>	05/28/17	50.00	Chad A Thompson	XXXX-XXXX-XXXX-2229	04/18	04/28/17	Scheduled	
<input type="checkbox"/>	06/28/17	50.00	Chad A Thompson	XXXX-XXXX-XXXX-2229	04/18	04/28/17	Scheduled	
<input type="checkbox"/>	07/28/17	50.00	Chad A Thompson	XXXX-XXXX-XXXX-2229	04/18	04/28/17	Scheduled	
<input type="checkbox"/>	08/28/17	50.00	Chad A Thompson	XXXX-XXXX-XXXX-2229	04/18	04/28/17	Scheduled	
<input type="checkbox"/>	09/28/17	50.00	Chad A Thompson	XXXX-XXXX-XXXX-2229	04/18	04/28/17	Scheduled	

Pt. Charges: \$9,900.82
Pt. Payments: \$10,662.64
Unapplied: \$761.82
Pt. Owes: \$-761.82
Ins. Owes: \$21,551.20



Ledger – Pt. Charges

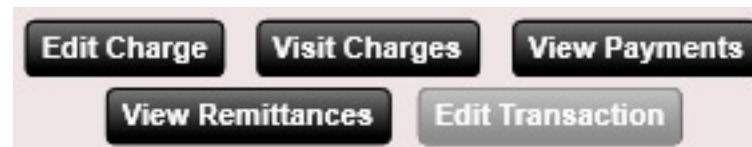
The Pt. Charges Tab is made up of four basic sections

- **Totals** – Here you will find totals for care plan and non-care plan balances.

Care Plan Details					
Pt. Charges	Pt. Payments	Unapplied	Pt. Owes	Ins. Owes	Ins. Paid
\$199.00	\$377.00	\$206.00	\$-178.00	\$176.50	\$0.00

Non-Care Plan Details					
Pt. Charges	Pt. Payments	Unapplied	Pt. Owes	Ins. Owes	Ins. Paid
\$24,850.31	\$24,830.31	\$0.00	\$20.00	\$32,057.25	\$359.33

- **Buttons** – When you select a charge use the buttons shown below to perform actions such as editing a charge, seeing all charges for that visit, payments applied to that charge, edit a transaction or view associated remittances with that charge.





Ledger – Edit Charge

ChiroSpring gives you the ability to easily edit almost any aspect of a charge. To edit a charge, select the charge and click “Edit Charge”. The Edit Charge dialog will open.

Edit Charge

Here you can

- Change the charge code
- Change the price
- Change number of units
- Change discount amount
- Set tax to yes or no
- Change Tax Rate %
- Estimate Charge yes or no
- Make claimable or cash
- Add or edit charge notes
- Change the billing state
- Dispute or clear a dispute
- Edit Insurance write off
- Edit Amount Forwarded
- Toggle Yes/No to estimate the charge using the patient’s member responsibility
- Delete the charge

Edit Charge

General

Date of Service: 12/18/15

Code: 98941 - Manipulation 3-4 Regions **Change**

Price: 40.00

Units: 1

Discount Amt: 0.00

Is Taxed?: No

Tax Rate (%): 7.00

Is Estimate: No

Is Claimable to Insurance?: Blue Cross and Blue Shield **Yes** **No**

Note

Insurance Related

Billing State: Not Signed **Change**

Disputed: **Dispute** **Clear**

Amount Allowed*: 32.50

Insurance Writeoff: 0.00

Amount Forwarded: 0.00

Amount Disputed: 0.00

Estimate PMR?: Yes **Toggle Yes/No**

Copay*: 0.00

Co-insurance*: 0.00

Deductible*: 32.50

Place Of Service

Emergency (EMG)

EPSDT

(*) Amount allowed, copay, co-insurance, and deductible cannot be edited when Estimate PMR? is Yes (enabled); this is because these amounts are calculated/estimated by ChiroSpring.

Save **Cancel** **Delete Charge**



Ledger – Edit Charge

ChiroSpring gives you the ability to easily edit almost any aspect of a charge. To edit a charge, select the charge in the Billing app (or patient ledger) and click “Edit Charge”. The Edit Charge dialog will open.

Edit Charge

Here you can

- Change the place of service
- Change the Emergency (EMG)
- Change the EPSDT

Note: The following fields are NOT EDITABLE unless “Estimate PMR?” Is turned to YES

- Amount Allowed
- Copay
- Co-Insurance
- Deductible

(*) Amount allowed, copay, co-insurance, and because these amounts are calculated/estima

Edit Charge

General

Date of Service 12/18/15	Code 98941 - Manipulation 3-4 Regions Change			
Price 40.00	Units 1	Discount Amt 0.00	Is Taxed? No ▼	Tax Rate (%) 7.00
Is Estimate No ▼	Is Claimable to Insurance? Blue Cross and Blue Shield Yes No			

Note

Insurance Related

Billing State Not Signed Change	Disputed Dispute Clear		
Amount Allowed* 32.50	Insurance Writeoff 0.00	Amount Forwarded 0.00	Amount Disputed 0.00
Estimate PMR? Yes Toggle Yes/No	Copay* 0.00	Co-insurance* 0.00	Deductible* 32.50
Place Of Service <input style="width: 100%; height: 20px;" type="text"/>	Emergency (EMG) <input style="width: 100%; height: 20px;" type="text"/>	EPSDT <input style="width: 100%; height: 20px;" type="text"/>	

(*) Amount allowed, copay, co-insurance, and deductible cannot be edited when Estimate PMR? is Yes (enabled); this is because these amounts are calculated/estimated by ChiroSpring.

Save
Cancel
Delete Charge




Ledger – Change Charge Code

To change a charge code, click “Change” in the Edit Charge dialog. From the grid that opens select your new charge or search for it.

In this example I am changing a 98941 charge to a 98942

1

Code
98941 - Manipulation 3-4 Regions 

2


Change Charge Code to:
98942

98942
Manipulation 5 Regions

Adjustment	Examination	Focused Examination	
3204-25-BC-EF-G New Patient Comprehensive Examination	99205-25 New Patient Comprehensive (High Complexity) Exam	99211-25 Established Patient Minimal Examination	99212-25 Established Patient Problem Focused Exam
99213-25 Established Patient Expanded Exam	99214-25 Established Patient Detailed Exam	99215-25 Established Patient Comprehensive Exam	99371 Phone Call-Brief
99372 Phone Call-Intermediate	99373 Phone Call-Lengthy	97750 Physical Performance test with Report	00001 No Charge Office Visit

Cancel

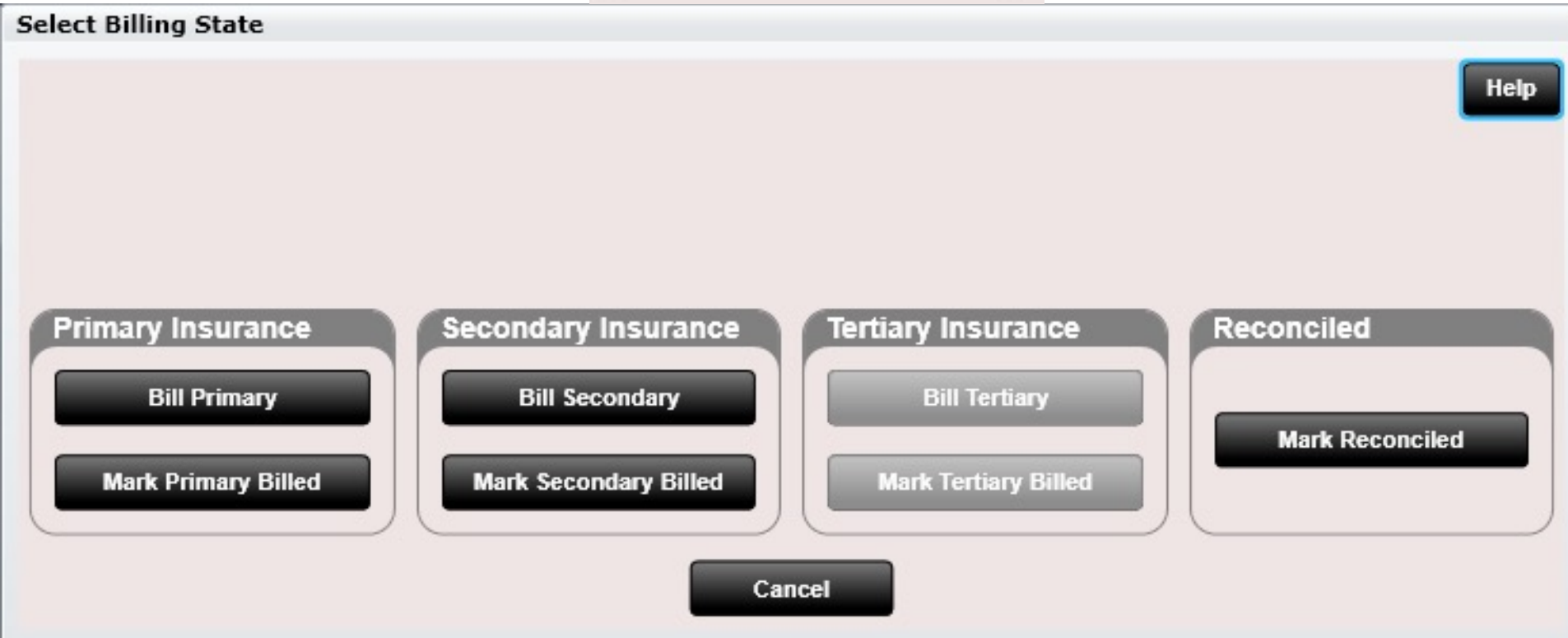
3

Code
98942 - Manipulation 5 Regions 



Ledger – Select Billing State

To change the billing state of a charge is simple. From the “Edit Charge” dialog click “Change” under Billing State. The dialog below will open allowing you to select a new billing state. ChiroSpring will not let you select a billing state that cannot exist (e.g. if no tertiary insurance the Tertiary Insurance buttons will be greyed out).





Ledger – Change Disputed State

To change the disputed status of a charge is simple. From the “Edit Charge” dialog you will see a Disputed box.

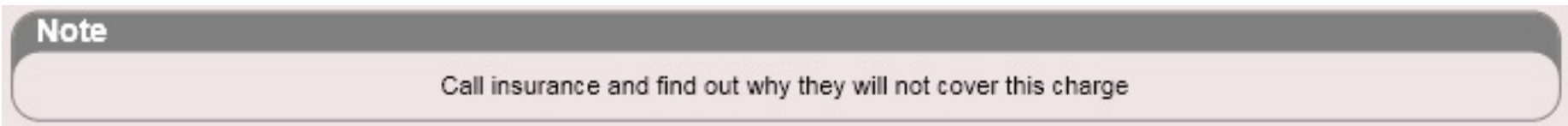


This means the charge is not disputed. You know this because the Dispute button is SELECTABLE. Clicking “Dispute” followed by saving changes will dispute the charge.



This means the charge is disputed. You know this because the clear button is SELECTABLE. Clicking “Clear” followed by saving changes will clear the dispute.

The notes field can be very useful when tracking the status of a disputed charge.



Note: This process is most commonly done inside the Billing app.

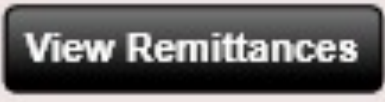


Billing



Ledger – Remittances

It is possible to view a charge's remittance (if it has one). Select the charge, then click "View Remittances". This will open the dialog shown below.




View Remittances

A black button with white text and a slight shadow, used to view remittances for a selected charge.

Next select the remittance and click "Open Remittance". This will open the reconcile app showing the remittance the charge was reconciled on.

This is useful in instances where you want to bill a disputed charge to a patient. If the insurance says they will not cover the charge and you now want to bill it to the patient, you will need to "Unreconcile" the charge. This is accomplished by going into the remittance and clicking the "Unreconcile" button.



Unreconcile

An orange button with a gradient and a shadow, used to unreconcile a charge.

This is also useful if you need to edit any portion of the remittance.

Claim Remittances for Charge

The charge 97012 Therapy-Traction/Mechanical* dated 4/2/2020 was reconciled to the following remittances:

BCBS	Date: 02/25/2020
	Amount: \$400.00
	Issue #:
	Check #: 234567

Open Remittance

OK



Ledger – Visit Charges

On the charge tab if you select a charge and click the “Visit Charges” button the dialog below will open.

Visit Charges

This allows you to not only view every charge for that visit but edit the charges as well.

You can add charges, remove charges, change the price of the charge, change the number of units, etc. It’s a fast and simple way to edit charges for a visit without having to open the “Edit SOAP”.

Visits - Chad Thompson THOCH000 DOB: 07/30/1997 Age: 18 INS: Attorney - John Smith CPT copyright 2013 American Medical Association. All rights reserved.

Aug 6, 2015 7:00 PM Date & Time Rendering Provider SOAP Signed by Visit's Billing Summary

Post Visit Charges and Diagnosis

Charges	Diagnosis	Condition																
<p>98941 Manipulation 3-4 Regions 1 Units PRC: \$40.00 DISC: \$0.00</p> <p>97032 Therapy-Electrical Stimulation 2 Units PRC: \$20.00 DISC: \$0.00</p> <p>98940 Manipulation 1-2 Regions 1 Units PRC: \$35.00 DISC: \$0.00</p>	<p>Exam/Consult</p> <p>Adjustment</p> <p>Therapy</p> <p>Radiography</p> <p>Analgesics</p> <p>Electrotherapy</p> <p>Exercise/Rehab</p> <p>Heat/Cold Therapy</p> <p>Supplements</p> <p>Orthopedics</p> <p>Pillows</p>	<table border="1"> <tr> <td>-M11-M21-M3 New Patient Cash Visit</td> <td>99201-25 New Patient Problem Focused Examination</td> <td>99202-25 New Patient Expanded Problem Focused Examination</td> <td>99203-25 New Patient Detailed Examination</td> </tr> <tr> <td>04-25-BC-EF- New Patient Comprehensive Examination</td> <td>99205-25 New Patient Comprehensive (High Complexity) Exam</td> <td>99211-25 Established Patient Minimal Examination</td> <td>99212-25 Established Patient Problem Focused Exam</td> </tr> <tr> <td>99213-25 Established Patient Expanded Exam</td> <td>99214-25 Established Patient Detailed Exam</td> <td>99215-25 Established Patient Comprehensive Exam</td> <td>99371 Phone Call-Brief</td> </tr> <tr> <td>99372 Phone Call-Intermediate</td> <td>99373 Phone Call-Longthy</td> <td>97750 Physical Performance test with Report</td> <td>00001 No Charge Office Visit</td> </tr> </table>	-M11-M21-M3 New Patient Cash Visit	99201-25 New Patient Problem Focused Examination	99202-25 New Patient Expanded Problem Focused Examination	99203-25 New Patient Detailed Examination	04-25-BC-EF- New Patient Comprehensive Examination	99205-25 New Patient Comprehensive (High Complexity) Exam	99211-25 Established Patient Minimal Examination	99212-25 Established Patient Problem Focused Exam	99213-25 Established Patient Expanded Exam	99214-25 Established Patient Detailed Exam	99215-25 Established Patient Comprehensive Exam	99371 Phone Call-Brief	99372 Phone Call-Intermediate	99373 Phone Call-Longthy	97750 Physical Performance test with Report	00001 No Charge Office Visit
-M11-M21-M3 New Patient Cash Visit	99201-25 New Patient Problem Focused Examination	99202-25 New Patient Expanded Problem Focused Examination	99203-25 New Patient Detailed Examination															
04-25-BC-EF- New Patient Comprehensive Examination	99205-25 New Patient Comprehensive (High Complexity) Exam	99211-25 Established Patient Minimal Examination	99212-25 Established Patient Problem Focused Exam															
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99372 Phone Call-Intermediate	99373 Phone Call-Longthy	97750 Physical Performance test with Report	00001 No Charge Office Visit															

Cash Charge Claimable Charge



Ledger – Edit Transaction

Cash register charges can also be edited. Select a cash register charge and click “Edit Transaction”.

Edit Transaction

This allows you to change the transaction date as well as the provider for this cash register transaction. Note this will affect all charges associated with this cash register transaction.

For example, if you open the Cash Register app on the Front Desk and sell a Biofreeze to a patient but forget to select a provider (so that the charge “belongs” to the provider for reporting purposes)... Now you can edit this transaction as shown here.

The screenshot shows a dialog box titled "Edit Transaction" overlaid on a blurred background of a ledger table. The dialog box contains the following elements:

- Transaction Date:** A text input field containing "8/27/16" and a calendar icon on the right showing the date "15".
- Provider:** A dropdown menu with "Cash Register" selected and a downward arrow on the right.
- Warning:** A text message that reads: "Change date or provider will effect all charges associated with this cash register transaction."
- Buttons:** Two buttons at the bottom: "OK" and "Cancel".

The background ledger table has columns with headers like "1", "17.12", "No", "No", "0.00", "0.00", "0.00", "0.00". Other visible text in the background includes "Tax Rate 7.00%", "Pri. Paid", "Sec. Paid", "Amt Charged \$17.12", and "Savi".



Ledger - Charges

Power Tip: The charges dialog is made up of several components and can be edited in Settings/Pin Charge Codes.

- Charges Grid – This is completely customizable in Settings/Pin Charge Codes.



Settings



Pin Charge Codes

The charges grid allows you to add your favorite charges into custom folders. Once you have customized your charges folders and respective grid you will be adding charges quickly in no time! 😊

20000 New Patient Cash Visit	99201-25 New Patient Problem Focused Examination	99202-25 New Patient Expanded Problem Focused Examination	99203-25 New Patient Detailed Examination
99204-25 New Patient Comprehensive Examination	99205-25 New Patient Comprehensive (High Complexity) Exam	99211-25 Established Patient Minimal Examination	99212-25 Established Patient Problem Focused Exam
99213-25 Established Patient Expanded Exam	99214-25 Established Patient Detailed Exam	99215-25 Established Patient Comprehensive Exam	99371 Phone Call-Brief
99372 Phone Call- Intermediate	99373 Phone Call- Lengthy	97750 Physical Performance test with Report	1 No Charge Office Visit



Ledger - Charges

Charges List Box

The charges list box shows you a list of charges. Each charge contains the following information:

- **Cash, Claimable or Care Plan Charge** – This is noted by the green or red square in the lower left-hand corner of the charge. Green = Cash Charge. Red = Claimable Charge. Claimable is another word for insurance charge. If the charge is Care Plan the entire charge will appear orange (as shown to the right).
- **CPT Code** – Number in upper left corner such as “98941”
- **Description** – Charge description such as “Manipulation 3-4 Regions”
- **PRC:** - This is the price of the product or service
- **DISC:** This is the amount discounted
- **T** – If there is a “T” displayed it means the charge is taxed. Notice the Basic Cervical Support Pillow to the right has a “T” after the price.
- **Units** – The number of billable units for that charge

At the bottom of the charges list box are 4 buttons.

- **Up Arrow** – Move a selected charge up
- **Down Arrow** – Move a selected charge down
- **X** – Delete a selected charge
- **X All** – Delete all charges

Note: The “Chiro Visit” and “Therapy Visit” can only be edited by going into the SOAP Note.

Charges ?

98941 Manipulation 3-4 Regions	1 Units
■ PRC: \$40.00 DISC: \$12.00	
1101 A-F Betafood - 360T	1 Units
■ PRC: \$47.00T DISC: \$0.00	

■ Cash Charge ■ Claimable Charge ■ Care Plan

Chiro Visit: Yes ▼ Therapy Visit: No ▼



Ledger - Charges

Editing Charges

There are a series of buttons located at the bottom of the charges grid. These buttons allow you to edit individual charges. Buttons include:

- **Diagnosis Pointers** – This opens up the diagnosis pointer dialog allowing you to select which charges are associated with what diagnosis
- **Toggle Insurance Claimable** – This button will change the status of a charge to claimable (insurance) or non-claimable (cash)
- **Change Price** – This button will open a dialog box allowing you to freely change the price for a charge
- **Discount by Amount** – This button will open a dialog box allowing you to discount a charge by a specified amount
- **Discount by Percent** – This button will open a dialog box allowing you to discount a charge by a specific percent
- **Taxed** – This button will add tax (denoted by a “T”) or remove tax from a charge

Diagnosis
Pointers

Toggle Care
Plan

Toggle
Insurance
Claimable

Change Price

Discount by
Amount

Discount by
Percent

Taxed



Ledger - Charges

Diagnosis Pointers

The diagnosis dialog allows you to select which charges are associated with what diagnosis

By default, all boxes are checked.

On subsequent visits the selections you made previously will be copied over. Therefore, you do not need to check them again if nothing has changed.

	Diagnosis			
Charges	723.1	333.83	724.2	388.3
98941	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
97012	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
1369	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
1000	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

Below is an example of what can be populated into the Diagnosis Pointer section on the CMS-1500 HCFA form using the diagnosis pointer dialog.

E. DIAGNOSIS POINTER
ABE



Ledger – Charges Grid

Editing Charges

Charges Grid – Allows you to select a charge by selecting the button associated with that charge. The grid is organized into pages as notated by the dot(s) at the bottom. In the example to the right there is only one dot pictured.

To the left of the grid are Folders. Each folder, such as “Exam/Consult” will display charges in the “Exam/Consult” folder. The charges grid can be customized in the Settings/Pin Charges app.

You can also create new charges or edit existing charges in the Settings/Products app or Settings/Services app.



Settings



Products



Services

Customize the arrangement of this grid in Settings/Pin Charges



Ledger – Charges Search Bar

Editing Charges

Above the charges grid is a search bar. You can search by the following:

- Charge name
- Charge code (CPT code)

Once you find the charge you are looking for by searching simply select it to add it to the Charges List Box.

A screenshot of a search interface. At the top is a search bar containing the text "3-4". Below the search bar is a list of search results. The first result is "98941 Manipulation 3-4 Regions". The second result is "98941-AT Manipulation 3-4 Regions (MCARE)". The results are displayed in light blue boxes with a white border. The search bar has a light blue border and a white background. The overall background of the screenshot is light gray.

Charge Code	Charge Name
98941	Manipulation 3-4 Regions
98941-AT	Manipulation 3-4 Regions (MCARE)



Ledger – Pt. Payments

The Pt. Payments Tab is made up of four basic sections

- Payments** – Date, Payor, Method, Card/Check Number, Paid, Note, Amount, Unapplied

Date	Payor	Method	Card/Check Number	Paid	Note	Amount	Unapplied
05/10/14	Chad Thompson	Cash		242.96		182.96	0.00 ■

- Totals** – Charges, Payments, Unapplied, Owes

Charges	Payments	Unapplied	Owes
\$664.99	\$664.99	\$0.00	\$0.00

- Buttons to do the following:** Add Payment, Delete, Edit or Apply to Charges



- Legend**

■ Fully Applied Payment
 ■ Under Applied Payment
 ■ Over Applied Payment



Ledger – Payments Tab

Clicking the “Add Payment” button will open the “Enter Payment” dialog (shown to the right). This is the same dialog that exists at the cash register.

There are TWO TABS in the Enter Payment process

1. Payment Info
2. Assign Payment

Payment Info - Here you can enter the payment date (defaults to today), select the Payer (defaults to your patient), enter the payment amount and any payment comments.

Assign Payment – This option is only necessary if you want a payment to go **TO MULTIPLE PATIENTS**.

Enter Payment

Payment Info **Assign Payment**

Cash
Credit Card
Check
Return
Writeoff
Transfer
Care Credit
Gift Card
Billing Dept.

Patient is paying by cash or debit card.
This date reflects payment date on reports

Payment Date
12-21-2020

Facility Location
Spinal Care Chiropractic

Payer
Brady E Albery

Amount
500.00 Care Plan Payment

Comments

1 2 3
4 5 6
7 8 9
. 0 Cl

OK Cancel

Once a payment is entered it is strongly recommended that its payment amount be applied to charges it will pay for. This is for accurate book-keeping. If the Auto-Apply Payments setting is enabled in Practice Settings then ChiroSpring will do this for you when you save your changes. To manually apply a payment select the payment, then select "Apply Payment".



Ledger– Assign Payments Tab

To assign a payment to an additional patient click the “Add Patient” button at the bottom (if they are not already populated in your list) and select another patient.

Add Patient

Once you have added a second (or even third, fourth, fifth, etc.) patient you will NEED to type the amount of the payment going to THAT PATIENT in the Payment box.

Payment
<input type="text"/>

Note: This process is typically only used at the Cash Register when you are checking out multiple patients.

Enter Payment

Payment Info **Assign Payment**

Distribute payment to patient(s).

Remaining
\$203.12

Patient	Owes	Payment	Applied
Randy Thompson	\$118.12	0.00	\$0.00
Jack Thompson	\$85.00	0.00	\$0.00

Add Patient **Remove Patient**

OK **Cancel**

1	2	3
4	5	6
7	8	9
.	0	CI

Once a payment is entered it is strongly recommended that its payment amount be applied to charges it will pay for. This is for accurate book-keeping. If the Auto-Apply Payments setting is enabled in Practice Settings then ChiroSpring will do this for you when you save your changes. To manually apply a payment select the payment, then select "Apply Payment".



Ledger – Assign Payments Tab

Here I have added two patients and entered a **\$203.12** payment (the payment was entered on the Payment Info tab). The remaining amount to assign is still **\$203.12**.

Payment Info **Assign Payment**

Distribute payment to patient(s).

Remaining
\$203.12

Patient	Owes	Payment	Applied
Randy Thompson	\$118.12	0.00	\$0.00
Jack Thompson	\$85.00	0.00	\$0.00

I have now entered two payments

- Randy Thompson - **\$118.12**
- Jack Thompson - **\$85.00**

The remaining amount is now **\$0.00** so everything balances.

Payment Info **Assign Payment**

Distribute payment to patient(s).

Remaining
\$0.00

Patient	Owes	Payment	Applied
Randy Thompson	\$118.12	118.12	\$0.00
Jack Thompson	\$85.00	85.00	\$0.00

Important Note: It is extremely important that you understand if you want a payment to GO TO MULTIPLE PATIENTS you MUST click the Assign Payment tab and follow the steps above. If you do not do this the payment will be assigned to the TOP patient who will ultimately end up with a large credit while the bottom patient(s) receive no payment.



Ledger – Assign Patient Credit to Another Patient

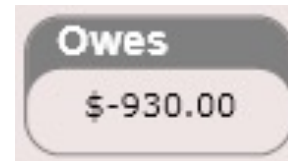
You may have a patient with a credit, such as a parent, that wants to use that credit on one of their family members. This can be accomplished by Assigning the credit to the child (it's a payment but we call it a credit because the patient has a negative balance)

Let's follow this example:

Parent – Curtis Jenkins (Has a credit of **\$930.00**)

Child – Mark Jenkins (Owes **\$257.12**)

Curtis Jenkins

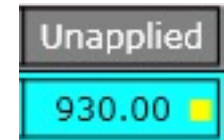


Mark Jenkins



1. Go to Curtis Jenkin's Ledger. Click on the payment (it will have an unapplied balance).

2. Click "Edit"





Ledger – Assign Patient Credit to Another Patient

Let's follow this example:

Parent – Curtis Jenkins (Has a credit of **\$930.00**)

Child – Mark Jenkins (Owes **\$257.12**)

Curtis Jenkins



Mark Jenkins



3. Click the Assign Payment” tab
4. Click “Add Patient” and select the child (in this case Mark Jenkins)
5. Notice Mark Jenkins is now in my list. You will now need to remove money from the Curtis Jenkins “Payment” field and put it into the Mark Jenkins “Payment Field”.

Patient	Owes	Payment	Applied
Curtis Jenkins	\$-930.00	1000.00	\$70.00
Mark Jenkins	\$257.12	0.00	\$0.00

Remaining: \$0.00

Enter Payment

Payment Info Assign Payment

Distribute payment to patient(s).

Remaining: \$0.00

Patient	Owes	Payment	Applied
Curtis Jenkins	\$-930.00	1000.00	\$70.00

Add Patient Remove Patient

OK Cancel

Once a payment is entered it is strongly recommended that its payment amount be applied to charges it will pay for. This is for accurate book-keeping. If the Auto-Apply Payments setting is enabled in Practice Settings then ChiroSpring will do this for you when you save your changes. To manually apply a payment select the payment, then select "Apply Payment".



Ledger – Assign Patient Credit to Another Patient

6. I have now added **\$257.12** as a payment to Mark Jenkins and subsequently had to lower Curtis Jenkin's payment to **\$742.88**.

				Remaining
				\$0.00
Patient	Owes	Payment	Applied	
Curtis Jenkins	\$-930.00	742.88	\$70.00	
Mark Jenkins	\$257.12	257.12	\$0.00	

6. Now go to Mark Jenkin's Ledger. Note he now has a payment of **\$257.12** and Curtis Jenkins is marked as the Payer.

Date	Facility	Payer	Method	Card/Check Number	Paid	Note	Assigned	Unapplied
03/15/16	Main	Curtis Jenkins	Cash		1000.00		257.12	0.00

6. The payment auto applied but if you want to manually apply the payment select the payment and click "apply to Charges".

Apply to Charges

7. Mark Jenkins now has a balance of **\$0.00**.

Owes
\$0.00



Ledger – Apply Payment

ChiroSpring has a unique feature that lets you apply a payment to a charge. The software will do this for you automatically if you have “Auto apply Payments” = “Yes” in Settings/Practice Info/Charge Options.

Auto Apply Payments?

Yes

However, there may be instances where you would like to manually apply a payment, specifically if a patient doesn't pay the full amount. In this case it would be ideal to apply the payment to a product first and any remaining payment to a service.

To apply a payment, select the payment and click “apply to Charges”. The dialog to the right will open.

Apply to Charges

Apply Payment to Charge(s)

\$20.00 paid by Randy Thompson on 05/07/14
Paying charges for Jack Thompson:

Payment Remaining to Apply
\$20.00

Date	Code	Description	Owes	Payment
05/07/14	98941-AT-M	3-4 Region Manipulation (Mcare)	\$20.00	0.00

1 2 3
4 5 6
7 8 9
. 0 Cl

This payment is not fully applied. It is strongly recommended that all payments be applied to charges for accurate book-keeping. If the Auto Apply Payments setting is enabled in Practice Settings then ChiroSpring will do this for you when you save your changes.

OK Cancel



Ledger – Apply Payment

Apply to Charges

In the example below I have entered a **\$20** payment (you know this because “Payment Remaining to apply” is **\$20** in the top image).

\$20.00 paid by Randy Thompson on 05/07/14
Paying charges for Jack Thompson:

Payment Remaining to Apply
\$20.00

Date	Code	Description	Owes	Payment
05/07/14	98941-AT-M	3-4 Region Manipulation (Mcare)	\$20.00	0.00

Here you can see the **\$20** has been fully applied to the 3-4 Region Manipulation (Mcare).

\$20.00 paid by Randy Thompson on 05/07/14
Paying charges for Jack Thompson:

Payment Remaining to Apply
\$0.00

Date	Code	Description	Owes	Payment
05/07/14	98941-AT-M	3-4 Region Manipulation (Mcare)	\$20.00	20.00

Note: If “Auto apply” is turned on in Settings you will not need to manually apply a payment. The only reason you might want to manually apply a payment if “Auto apply” is turned on is if the patient didn’t pay the full amount of the charge total and you wanted to specify where that payment went. For example, the patient may have a product and a service and is only making a partial payment. You would most likely want the payment to go toward the product.



Ledger – Apply Payment

Apply to Charges

Here is an example of applying \$118.12 to several charges the patient Randy Thompson still owes.

Apply Payment to Charge(s)

\$118.12 paid by Randy Thompson on 05/08/14
Paying charges for Randy Thompson:

Payment Remaining to Apply

\$118.12

Date	Code	Description	Owes	Payment
05/08/14	98941-AT-M	3-4 Region Manipulation (Mcare)	\$22.00	0.00
05/08/14	97010	Therapy-Hot/Cold Therapy	\$3.00	0.00
04/21/14	98941	Manipulation 3-4 Regions	\$21.12	0.00
04/21/14	97010	Therapy-Hot/Cold Therapy	\$3.00	0.00
05/07/14	98941	Manipulation 3-4 Regions	\$22.00	0.00
05/07/14	98941	Manipulation 3-4 Regions	\$22.00	0.00
05/08/14	98941-AT-M	3-4 Region Manipulation (Mcare)	\$22.00	0.00
05/08/14	97010	Therapy-Hot/Cold Therapy	\$3.00	0.00

OK

Cancel

Apply Payment to Charge(s)

\$118.12 paid by Randy Thompson on 05/08/14
Paying charges for Randy Thompson:

Payment Remaining to Apply

\$0.00

Date	Code	Description	Owes	Payment
05/08/14	98941-AT-M	3-4 Region Manipulation (Mcare)	\$22.00	22.00
05/08/14	97010	Therapy-Hot/Cold Therapy	\$3.00	3.00
04/21/14	98941	Manipulation 3-4 Regions	\$21.12	21.12
04/21/14	97010	Therapy-Hot/Cold Therapy	\$3.00	3.00
05/07/14	98941	Manipulation 3-4 Regions	\$22.00	22.00
05/07/14	98941	Manipulation 3-4 Regions	\$22.00	22.00
05/08/14	98941-AT-M	3-4 Region Manipulation (Mcare)	\$22.00	22.00
05/08/14	97010	Therapy-Hot/Cold Therapy	\$3.00	3.00

OK

Cancel



Ledger – Cash Payment

Click “Add Payment” and select the “Cash” tab. Enter the payment date, payer (defaults to the patient) and the amount. You can also enter any comments if you wish.

Enter Payment

Payment Info **Assign Payment**

Cash
Credit
Check
Return
Writeoff
Transfer

Patient is paying by cash or debit card.
This date reflects payment date on reports

Payment Date
3/14/16 15

Facility Location
Durant ▼

Payer
Randy Smith

Amount
0.00|

Comments

1 2 3
4 5 6
7 8 9
. 0 Cl

Once a payment is entered it is strongly



Ledger – Credit Payment

Click “Add Payment” and select the “Credit” tab – Here you can enter the credit card number. It is recommended you only enter the last 4 digits of the credit card (to save time) as ONLY the last 4 digits will be reported on the patient’s receipt. Credit card payments must be run through a third-party application such as Square or a credit card reader. Here we are only recording in ChiroSpring that a credit payment was taken.

Enter Payment

Payment Info

Cash

Credit

Check

Return

Writeoff

Transfer

Other

Assign Payment

Patient is paying by credit card.

This date reflects payment date on reports

Payment Date

3/14/16 15

Facility Location

Durant

Payer

Randy Smith

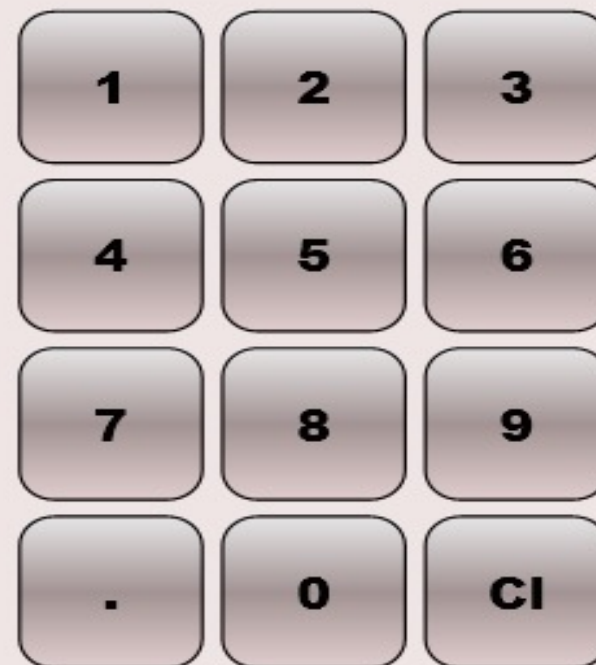
Amount

30.00

Card Number

4567

Comments



Once a payment is entered it is strongly recommended that its payment amount be applied to charges it will pay for. This is for accurate book-keeping. If the



Ledger – Check Payment

Click “Add Payment” and select the “Check” tab. Here you can enter a check payment and record the check number.

Enter Payment

Payment Info

Cash

Credit

Check

Return

Writeoff

Transfer

Other

Assign Payment

Patient is paying by check.

This date reflects payment date on reports

Payment Date

3/14/16

15

Facility Location

Durant

Payer

Randy Smith

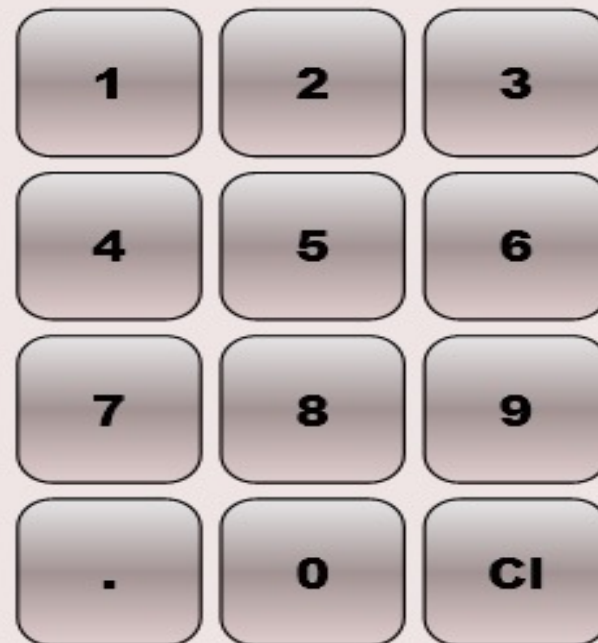
Amount

30.00

Check Number

4789

Comments



Once a payment is entered it is strongly recommended that its payment amount be applied to charges it will pay for. This is for accurate book-keeping. If the Auto Apply Payments setting is enabled



Ledger – Return Payment

Return Payment – Use this option if the patient is RETURNING a product (e.g. Biofreeze). To return a product click the “Add Payment” button then select the “Return” tab. Type the amount of the product and enter the product name in “comments”. This will apply a credit on the patient’s account. If you wish to give this money back to the patient, you will then need to issue a “Refund” (shown on next page).

In this example I am returning a Biofreeze for **\$14.00**. The next step will be to issue the patient a refund (see next page).

NOTE: Returning a product does NOT return product to inventory. If you are keeping track of inventory you will need to manual adjust product inventory in Settings/Products.

Enter Payment

Payment Info | **Assign Payment**

Cash
Credit
Check
Return
Writeoff
Transfer
Other

Patient is returning item(s). Enter value of item (s) in Amount box and item(s) description in Comments box. This will apply a credit to the patient's account of the specified amount. Create a Refund to issue the amount back to the patient, if desired (must be done at Cash Register).

This date reflects payment date on reports

Payment Date
3/14/16 15

Facility Location
Main

Payer
Randy Smith

Amount
30.00

Comments

1 2 3
4 5 6
7 8 9
. 0 Cl

Once a payment is entered it is strongly recommended that its payment amount be applied to charges it will pay for. This is for accurate book-keeping. If the Auto-Apply Payments setting is enabled in Practice Settings then ChiroSpring will do this for you when you save your changes. To manually apply a payment select the payment, then select "Apply Payment".

OK Cancel

Cash Register – Issue Refund



Refunds can ONLY be done at the cash register

1. Open the Cash Register app
2. Select your patient

A screenshot of the patient selection interface. It features a dark button labeled "Select Patient" with a red arrow pointing to it. To the right of the button, the name "Jack Thompson" is displayed. Below this, there is a grey button labeled "Select Insurance" and the text "Cash" next to it.

1. Click the "Add Refund" button



2. Type a refund "note" and enter the amount of cash you are refunding the patient. In my example I am refunding **\$14.00** for a returned Biofreeze.

3. Note the refund is now shown in the "Charges" column.

Charges	
Refund	\$14.00
	Tax: 0.00%
	Dis: \$0.00
Price: \$14.00 (Cash)	Qty: 1

4. Give the refund amount to your patient (**hand them cash**).

A screenshot of the "Edit Refund" screen. At the top, it says "Edit Refund". Below that is a text box with the instruction: "Issues a refund to the patient. The specified amount will be debited from the patient's account. This amount should be handed to the patient." There are two input fields: "Note" containing "Patient returned Biofreeze" and "Amount" containing "14.00". Both fields have red arrows pointing to them. To the right of these fields is a numeric keypad with buttons for digits 1-9, 0, a decimal point, and "C|". At the bottom are "OK" and "Cancel" buttons.



Ledger – Write Off

Click “Add Payment” and select the “Write Off” tab. **Use this option if a patient has a balance they will not pay and you wish to write off that balance or a portion of that balance.**

Enter Payment

Payment Info

Cash

Credit

Check

Return

Writeoff

Transfer

Assign Payment

Provider is writing off amount.

This date reflects payment date on reports

Payment Date

3/14/16



Facility Location

Durant

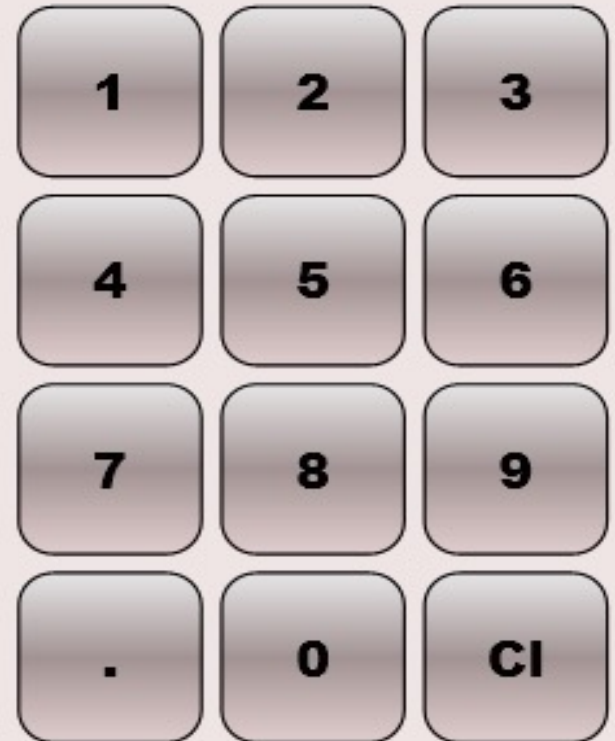
Payer

Randy Smith

Amount

0.00

Comments



Once a payment is entered it is strongly recommended that its payment amount



Ledger – Transfer

Click “Add Payment” and select the “Transfer” tab. **Use this option to give a patient a credit.** This is useful when transferring a patient credit (positive balance) from a previous software into ChiroSpring. See example below.

Enter Payment

Payment Info

Cash

Credit

Check

Return

Writeoff

Transfer

Other

Assign Payment

Provider is adding a credit to the patient's account. Useful for transferring a patient credit from an existing system into ChiroSpring.

This date reflects payment date on reports

Payment Date

3/14/16



Facility Location

Durant

Payer

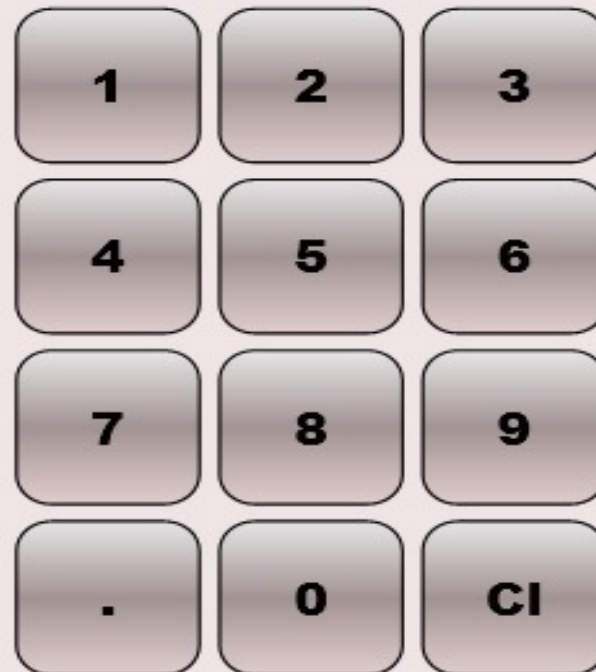
Randy Smith

Amount

45.00

Comments

Transferring patient credit from previous software



Once a payment is entered it is strongly recommended that its payment amount be applied to charges it will pay for. This is for accurate book-keeping. If the Auto-Apply Payments setting is enabled in Practice Settings then ChiroSpring will



Dashboard – Print Ledger

Print Ledger

To print the patient's ledger, click the black "Print Ledger" button. A dialog will open asking you to specify the date range you wish to print (or select all dates using the check box).

After you have specified the date range the generated report will be displayed. Click the "Print" button again to send the ledger report to your printer.

The patient ledger shows every charge and every payment made for that date range. It also shows what the primary/secondary/tertiary paid for any charges to date and what the patient responsibility was for each charge.

Print Ledger Report

Select from date:

Select All Dates

From To

January, 2016							January, 2016						
Sun	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Mon	Tue	Wed	Thu	Fri	Sat
27	28	29	30	31	1	2	27	28	29	30	31	1	2
3	4	5	6	7	8	9	3	4	5	6	7	8	9
10	11	12	13	14	15	16	10	11	12	13	14	15	16
17	18	19	20	21	22	23	17	18	19	20	21	22	23
24	25	26	27	28	29	30	24	25	26	27	28	29	30
31	1	2	3	4	5	6	31	1	2	3	4	5	6

OK Cancel



Ledger - Print

Pictured below is a generated patient ledger

Spinal Care Chiropractic

1515 Brady St.

Davenport, IA 52806

563-545-4565

spinalcarechiropractic4health@gmail.com

For: Mary Tharp

DOB: 3/18/2010

Account Number: THAMA000

Dates: All dates

Patient Ledger Report

STARTING BALANCE: \$0.00

DATE	DESCRIPTION	UNITS	AMOUNT CHARGED	INS. SAVINGS	INS. PAID	COPAY	CO-INS	DEDUCT.	PATIENT PAID	PATIENT OWES
07/24/15	99204-25-BC-EF-GH New Patient Compreh	1	110.00	0.00	0.00	20.00	0.00	0.00	0.00	20.00
08/12/15	99204-25-BC-EF-GH New Patient Compreh	1	110.00	0.00	0.00	20.00	0.00	0.00	0.00	20.00
11/06/15	99204-25-BC-EF-GH New Patient Compreh	1	110.00	0.00	0.00	20.00	0.00	0.00	0.00	20.00
TOTALS:		3	330.00	0.00	0.00	60.00	0.00	0.00	----	60.00
							Pt. Charges	Pt. Payments	Pt. Ending Balance	
							\$60.00	\$0.00	\$60.00	

Note: We discussed the Charge report earlier (Dashboard/Insurance Cases). It is important to note the Ledger and Charge report are not the same. The Ledger will encompass all insurance and cash charges and payments. The Charge Report will only display charges and payments for charges associated with THAT Insurance Case.



Ledger – Scheduled Credit Card Payments

After you have stored a credit card on file for your patient you can then create scheduled payments for your patient. Use the Dashboard/Profile/Payment Methods tab to store your patient's credit card or store when taking payment at checkout.

Enter Payment

Scheduled Payment Info

Scheduled date on which payment should be taken:

Initial Date: 04-30-2017

and Repeat For Payments

Set Amount **Frequency**

Each Payment ▼ Monthly ▼

Amount

100.00

Payment Notes

XXXX-XXXX-XXXX-2229	Credit	Expiration: 04/18
XXXX-XXXX-XXXX-4111	Credit	Expiration: 12/25
XXXX-XXXX-XXXX-4111	Credit	Expiration: 12/25
XXXX-XXXX-XXXX-0010	Credit	Expiration: 12/18
XXXX-XXXX-XXXX-1119	Credit	Expiration: 04/18
2121	ACH	

1 2 3

4 5 6

7 8 9

. 0 C!

OK Cancel



Process Payments

In the Launcher (located on the Front Desk) you will find an app called Process Payments. This app will allow you the ability to process all DUE scheduled payments for ALL of your patients in a single click.

Use 'Scheduled Payments' to create a payment with a set due date including the option to repeat the payment. Use the Process Payments app (located in the Front Desk/Launcher) to keep track of payments that are due for all patients.

#MIST (Dashboard)



Dashboard - MIST

Medications Allergies Problems Surgeries Traumas

The MIST tile in the patient dashboard will allow your staff to enter this information without going into “Edit SOAP”.

MIST is an acronym for:

- **M**edications
- **A**llergies
- **I**llnesses (Problems)
- **S**urgeries
- **T**raumas

Power Tip: Medications, Allergies and Problems can be populated in the Patient Kiosk.



Patient Kiosk

MIST - Chad Thompson THOCH000 DOB: 07/30/1947 Age: 69 INS: Blue Cross and Blue Shield CPT copyright 2013 American Medical Association. All rights reserved.

This data is not per visit. Any edits will affect all future and past visits.

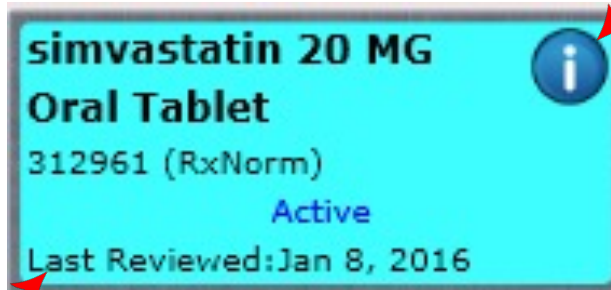
Medications	Allergies	Problems	Surgeries	Traumas
<input checked="" type="checkbox"/> Show Active Only None Currently Prescribed	<input checked="" type="checkbox"/> Show Active Only No Known Drug Allergies	<input checked="" type="checkbox"/> Show Active Only No Known Problems	No History of Surgeries	No History of Traumas
warfarin sodium 5 MG Oral Tablet 855332 (RxNorm) Last Reviewed: Jul 20, 2016 R	Penicillin g 7980 (RxNorm) Last Reviewed: Jul 20, 2016 R	Type I diabetes mellitus without complication (disorder) 313435000 (SNOMED) Last Reviewed: Aug 3, 2016	Liver excision (procedure) 107963000 (SNOMED) Last Reviewed: Jun 22, 2016	Injury of tendon of the rot Last Reviewed: Jun 22, 2016
warfarin sodium 2.5 MG Oral Tablet 855312 (RxNorm) Last Reviewed: Jul 20, 2016 R	Codeine 2670 (RxNorm) Last Reviewed: Jul 20, 2016 R	Pneumonia (disorder) 233604007 (SNOMED) Last Reviewed: Sep 1, 2016 R		
	Codeine 2670 (RxNorm) Last Reviewed: Sep 1, 2016 R	Asthma (disorder) 195967001 (SNOMED) Last Reviewed: Sep 1, 2016 R		
	Aspirin 1191 (RxNorm) Last Reviewed: Sep 1, 2016 R			
Edit Master Medications List	Edit Master Allergies List	Edit Master Problems List	Edit Master Surgeries List	Edit Master Traumas List
Edit Delete	Edit Delete	Edit Delete	Edit Delete	Edit Delete
Document Medications	Reviewed Today	Reviewed Today	Reviewed Today	Reviewed Today
Close	Dock	Save		

Dashboard - MIST

We have provided thousands of medications, allergies, problems, etc. However, if an item does not exist in our master database you can add your own. To do this click the “Edit Master Medication List” button (for example).



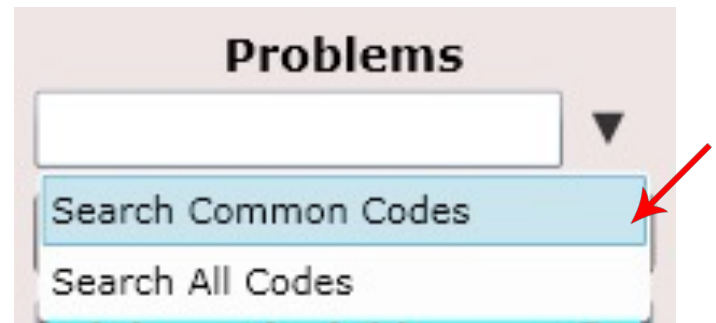
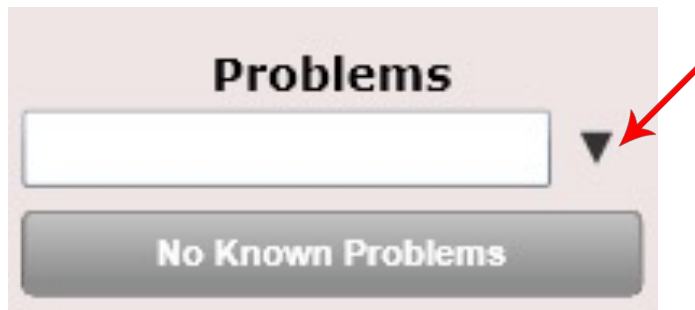
Use the “Reviewed Today” button if you want to mark all items in that column as reviewed today. This will update the “Reviewed Date” for all items in that list.



Click the blue INFO button for an item to get detailed information.

Dashboard - MIST

You will also notice a black “down” arrow next to the Problems, Surgeries and Traumas lists. Clicking this will reveal a drop down (see below). As you can see, “Search Common Codes” is selected by default. There are hundreds of thousands of codes, so we have taken the time to flag commonly used codes. However, if an item you are searching for is not in the list, try selecting “Search all Codes”. Chances are you will find what you are looking for although the search will take slightly longer as it is searching through many more codes.



#Visits (Dashboard)



Dashboard - Visits



Visits - Brady E Albery ALBBR000 DOB: 12/16/1979 Age: 41 INS: BCBS CPT copyright 2020 American Medical Association. All rights reserved.

- Dec 17, 2020 11:15 PM ●
Insurance: BCBS
Last Billed: Never Billed
- Dec 17, 2020 1:00 PM
Insurance: BCBS
Last Billed: Never Billed
- Dec 15, 2020 11:00 AM ●
Insurance: BCBS
Last Billed: Never Billed
- Dec 15, 2020 10:00 AM ●
Insurance: BCBS
Last Billed: Never Billed
- Dec 14, 2020 9:00 AM
Insurance: BCBS
Last Billed: Never Billed
- Dec 10, 2020 3:00 PM
Insurance: Cash
Last Billed: Never Billed
- Dec 9, 2020 8:10 AM
Insurance: BCBS
Last Billed: Never Billed
- Dec 7, 2020 4:00 PM ●
Insurance: BCBS
Last Billed: Never Billed
- Dec 4, 2020 12:35 PM
Insurance: BCBS
Last Billed: 12/09/20
- Dec 3, 2020 9:00 AM ●
Insurance: BCBS
Last Billed: Never Billed
- Dec 2, 2020 2:00 PM
Insurance: BCBS
Last Billed: Never Billed

Date & Time
Dec 17, 2020 11:15 PM

Rendering Provider
Dr. Brian Albery

SOAP Signed by
Not Signed

Visit's Billing Summary

Insurance Total	\$0.00
Amount Allowed	\$0.00
Insurance Owes	\$0.00
Patient Total	\$78.76
Patient Owes	\$78.76
Billing State	Not Signed

Reason for Visit Edit

Adjustment

Treatment Plan

3x per week for 4 week(s)	12/2/2020
2x per week for 4 week(s)	to
	1/27/2021

11 previously completed 20 total

General Visit Note Edit

Reason/Visit Notes Edit

- Diagnosis** Edit
- G54.2
Cervical root disorders, not elsewhere classified
 - G54.3
Thoracic root disorders, not elsewhere classified
 - G54.4
Lumbosacral root disorders, not elsewhere classified
 - G54.8
Other nerve root and plexus disorders
 - G55
Nerve root and plexus compressions in diseases

- Charges** Edit
- 98941
Manipulation 3-4 Regions
Not Signed ■
 - 1101
A-F Betafood - 360T
Not Signed ■

Insurance Update Charge Estimate ? Change

Case Name BCBS
Case Number
Primary 3456 WECOME WAY
Secondary
Tertiary
Last Billed Date Never Billed

■ Cash ■ Claimable ■ Care Plan

Delete SOAP
Edit SOAP
View SOAP
Receipt
Clinical Summary

Load more

● = Un-signed SOAP Note

Close Dock



Dashboard - Visits

The Visit tile is one of the most useful features in ChiroSpring because it organizes and presents all information associated with each and every patient visit. Not only can you view details for the patient visit but you can also edit the insurance case, diagnosis and charges or even edit a SOAP note.

Here is a list of the information displayed on the Visit tile

- Date & Time
- Rendering Provider
- SOAP Signed By
- appointment Note
- Reason for Visit
- Visits Billing Summary
- General Visit Note
- Insurance
- Diagnosis
- Charges
- View or Print SOAP Note
- View or Print Receipt
- View or Print Clinical Summary
- Delete SOAP (only if it has not been signed)

Visits - Brady E Albery ALBBR000 DOB: 12/16/1979 Age: 41 INS: BCBS

Dec 17, 2020 11:15 PM
Insurance: BCBS
Last Billed: Never Billed

Dec 17, 2020 1:00 PM
Insurance: BCBS
Last Billed: Never Billed

Dec 15, 2020 11:00 AM
Insurance: BCBS
Last Billed: Never Billed

Dec 15, 2020 10:00 AM
Insurance: BCBS
Last Billed: Never Billed

Dec 14, 2020 9:00 AM
Insurance: BCBS
Last Billed: Never Billed

Dec 10, 2020 3:00 PM
Insurance: Cash
Last Billed: Never Billed

Dec 9, 2020 8:10 AM
Insurance: BCBS
Last Billed: Never Billed

Dec 7, 2020 4:00 PM
Insurance: BCBS
Last Billed: Never Billed

Dec 4, 2020 12:35 PM
Insurance: BCBS
Last Billed: 12/09/20

Dec 3, 2020 9:00 AM
Insurance: BCBS
Last Billed: Never Billed

Dec 2, 2020 2:00 PM
Insurance: BCBS
Last Billed: Never Billed

Load more

• Un-signed SOAP Note

Close Dock

Date & Time: Dec 17, 2020 11:15 PM
Rendering Provider: Dr. Brian Albery
SOAP Signed by: Not Signed

Visit's Billing Summary
Insurance Total: \$0.00
Amount Allowed: \$0.00
Insurance Owes: \$0.00
Patient Total: \$78.76
Patient Owes: \$78.76
Billing State: Not Signed

Reason for Visit: Adjustment
Treatment Plan: 3x per week for 4 week(s) 12/2/2020 to 12/27/2021, 2x per week for 4 week(s) 12/27/2021 to 11 previously completed 20 total

General Visit Note, Reason/Visit Notes, Diagnosis: G54.2 Cervical root disorders, not elsewhere classified; G54.3 Thoracic root disorders, not elsewhere classified; G54.4 Lumbosacral root disorders, not elsewhere classified; G54.8 Other nerve root and plexus disorders; G55 Nerve root and plexus compressions in diseases

Insurance: Case Name BCBS, Case Number 3456 WELCOME WAY, Primary, Secondary, Tertiary, Last Billed Date Never Billed

Charges: 98941 Manipulation 3-4 Regions Not Signed; 1101 A-F Betafood - 360T Not Signed

Legend: Cash (green), Claimable (red), Care Plan (orange)

Buttons: Delete SOAP, Edit SOAP, View SOAP, Receipt, Clinical Summary

Note: Unsigned SOAP Notes are notated with a blue dot.

● = Un-signed SOAP Note

Aug 24, 2016 11:00 PM
Insurance: Blue Cross / Medicare
Last Billed: Never Billed

Aug 23, 2016 12:00 PM
Insurance: Blue Cross / Medicare
Last Billed: Never Billed

Aug 21, 2016 12:30 PM
Insurance: Blue Cross / Medicare
Last Billed: Never Billed



Dashboard - Visits

Visit's Billing Summary

The visit billing summary shows the following information

- **Insurance Total** – The total amount the insurance is responsible for
- **Amount Allowed** – The amount the insurance allowed for all charges on the visit
- **Insurance Owes** – The amount the insurance still owes for the visit
- **Patient Total** – The amount the patient is responsible for for the visit
- **Patient Owes** – The amount the patient still owes for the visit
- **Billing Status** – Displays the current status of the visit (e.g. Bill Pri. Pri. Billed, etc.)
 - If the patient has no insurance the status will go through these steps
 - **Bill Patient**
 - **Reconciled (after all charges are paid)**
 - If the patient has insurance the status will go through these steps
 - **Bill Primary**
 - **Primary Billed**
 - **Bill Secondary (if have secondary)**
 - **Secondary Billed (if have secondary)**
 - **Bill Tertiary (if have tertiary)**
 - **Tertiary billed (if have tertiary)**
 - **Bill Patient (Charges not covered by insurance)**
 - **Reconciled (after all charges are paid)**

Visit's Billing Summary	
Insurance Total	\$60.00
Amount Allowed	\$52.50
Insurance Owes	\$12.50
Patient Total	\$40.00
Patient Owes	\$40.00
Billing State	Not Reconciled



Dashboard - Visits

- **Date & Time** – The date and time of the scheduled appointment
- **Rendering Provider** – The provider that performed the services (HCFA box 24j)
- **SOAP Signed by** – The provider that signed the SOAP
 - If a rendering provider cannot sign a SOAP due to absence other providers may sign their SOAP with approval. You can set your ability to sign other provider's SOAP notes in Settings/Users
- **Appointment Note** – The note entered in when the appointment was created. Useful for the provider to see prior to treating them.
- **Reason for Visit** – The reason the patient had the visit.
- **General Visit Note** – Write any general notes about the visit.
- **Reason/Visit Notes** – This note can be used to indicate the reason for the visit comments.
- **Treatment Plan** – The treatment plan for this visit

Date & Time Apr 23, 2017 12:00 PM	Rendering Provider Dr. Brian	SOAP Signed by Dr. Brian	Visit's Billing Summary Insurance Total \$0.00 Amount Allowed \$0.00 Insurance Owes \$0.00 Patient Total \$187.78 Patient Owes \$0.00 Billing State Cash
Reason for Visit Edit Adjustment	Treatment Plan 2x per week for 7 week(s) 3 previously completed 14 total		
General Visit Note Edit	Reason/Visit Notes Edit Want's Massage Every Visit	Diagnosis Edit S23.41 Sprain of ribs M54.2 Cervicalgia F43.8 Other reactions to severe stress	Charges Edit 98941 Manipulation 3-4 Regions Cash 97110 Therapy-Therapeutic Exercise Cash 1374



Dashboard - Visits

Insurance - Change Insurance Case

The Visits tile shows the current insurance for that visit including the following

- **Case Name** – Insurance Case
- **Case Number** – Insurance Case Number
- **Primary** – Primary Insurance Provider
- **Secondary** – Secondary Insurance Provider
- **Tertiary** – Tertiary Insurance Provider

If you wish to change an insurance case, simply click the “Change” button located at the top of the Insurance box. Doing this will open up a Change Insurance dialog.

You may also notice a Billing State drop down. This allows you to change the billing state for the visit. For example, if Primary has already been billed and you wish to Bill Primary again simply set the Billing State to “Bill Primary” and save changes.

Insurance **Update Charge Estimate ?** **Change**

Case Name Blue Cross
Case Number
Primary Blue Cross & Blue Shield
Secondary
Tertiary
Last Billed Date Never Billed

Change Insurance Case

Insurance Case
● Blue Cross and Blue Shield [Jan 1, 2014 to p ▼

If the insurance case you wish to select is not listed, ensure the insurance cases's start and end date contain this visit's date.

Billing State for Claimable (Insurance) Charges							
Description	Hold	Pri. Paid	Sec. Paid	Ter. Paid	Ins. Owes	Billing State	
98941 Manipulation 3-4 Regions	No	0.00	0.00	0.00		Pri. Billed	
97012 Therapy-Traction/Mechanical	No	0.00	0.00	0.00		Pri. Billed	

Change Billing State

Save **Cancel**



Dashboard - Visits

Now that you have opened the “Change Insurance Case” dialog you have a few options.

1. You can change the Insurance Case by using the “Insurance Case” drop down at the top.
2. You can select any charge (for this visit of course), then select the “Change Billing State” button in the lower right corner. Doing so will allow you to change the billing state. For example, the billing state might be “Primary Billed” but you may want to change it back to “Bill Primary”. Charges in the “Bill” state (e.g. Bill Primary) will be ready to bill in the Claims app on the Front Desk.

Change Insurance Case

Insurance Case
● Blue Cross and Blue Shield [Jan 1, 2014 to p ▼

If the insurance case you wish to select is not listed, ensure the insurance cases's start and end date contain this visit's date.

Billing State for Claimable (Insurance) Charges

Description	Hold	Pri. Paid	Sec. Paid	Ter. Paid	Ins. Owes	Billing State
98941 Manipulation 3-4 Regions	No	0.00	0.00	0.00		Pri. Billed
97012 Therapy-Traction/Mechanical	No	0.00	0.00	0.00		Pri. Billed

Change Billing State

Save **Cancel**



Dashboard - Visits

Here we are changing from the default insurance Medicare case to either Cash or Blue Cross & Blue Shield

Insurance Case

- Medicare [Jan 21, 2014 to present]
- Medicare [Jan 21, 2014 to present]
- Cash [Dec 15, 2013 to present]
- Blue Cross & Blue Shield [Dec 15, 2013 to present]

Save Cancel

Remember, the insurance case you are selecting must INCLUDE the date range of the visit you are wanting to use this insurance case with. Otherwise you will not be able to select the insurance case.



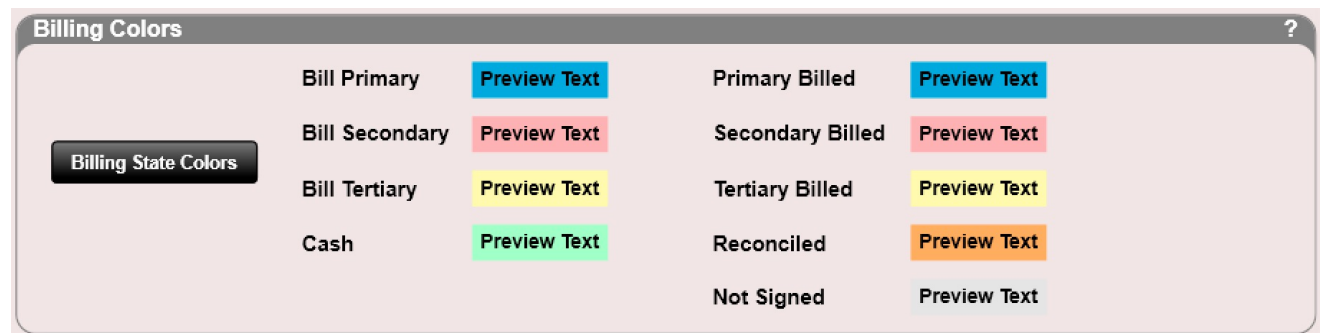
Dashboard - Visits

Insurance – Change Billing State

Billing States Include:

- **Not Signed** – The SOAP note has not been signed
- **Bill to Primary** – The visit is currently in the Claims app waiting to be submitted to Primary
- **Primary Billed** – The visit has been submitted to primary and you are waiting on the claims remittance
- **Bill to Secondary** – The visit is currently in the Claims app waiting to be submitted to Primary
- **Secondary Billed** – The visit has been submitted to primary and you are waiting on the claims remittance
- **Bill to Tertiary** – The visit is currently in the Claims app waiting to be submitted to Primary
- **Tertiary Billed** – The visit has been submitted to primary and you are waiting on the claims remittance
- **Reconciled** – The charges on the visit have been reconciled

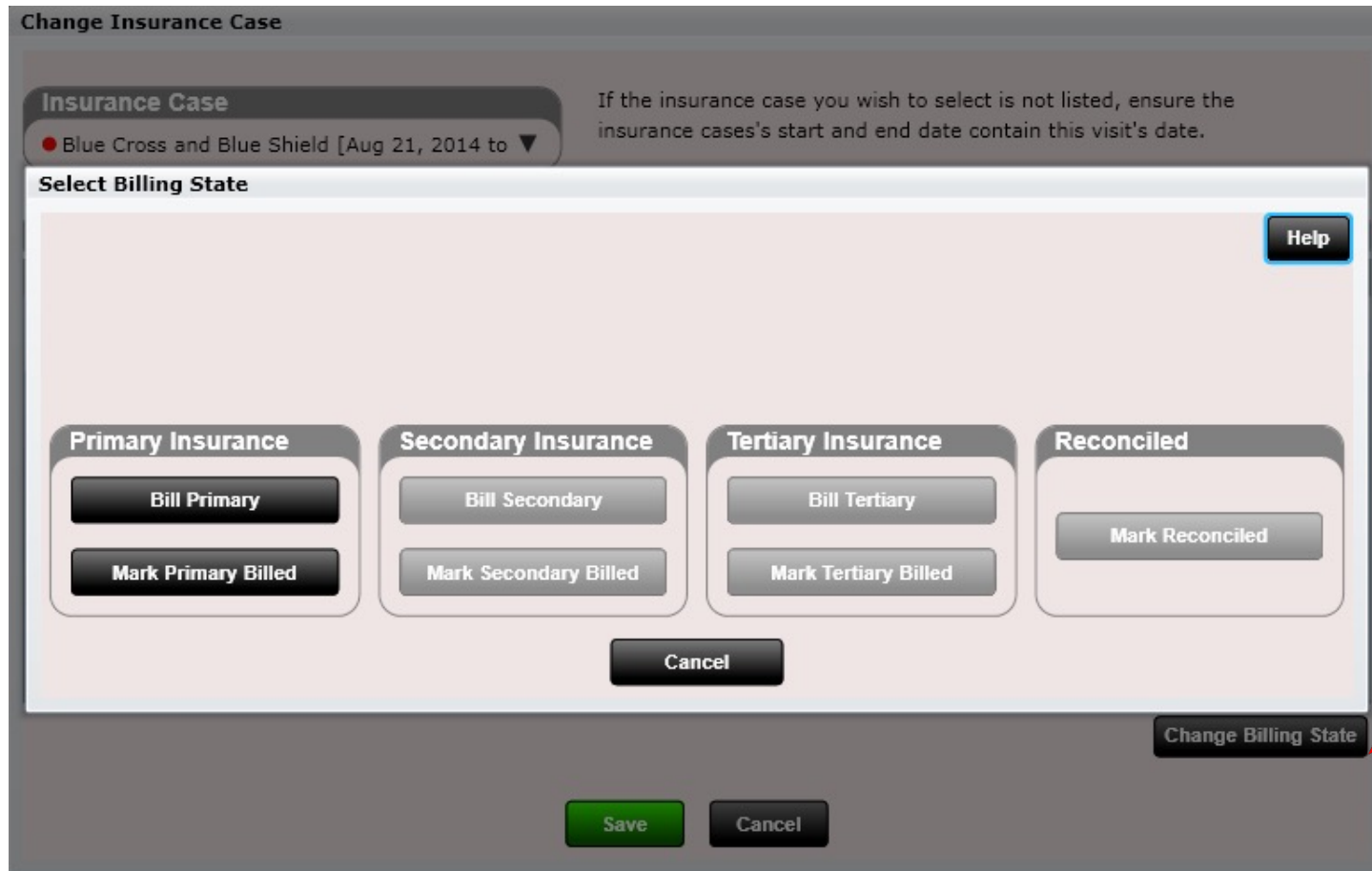
Power Tip: Change your Billing State colors in Settings/Practice Info/Charge Options. For example, you might want your Bill to Primary to be blue and Primary Billed to be grey. Or make your Reconciled orange as another example.



Dashboard - Visits



This is the “Select Billing State” dialog. Here you can select any billing state for your charge. Billing states that cannot exist will be greyed out. This dialog is presented when you click the “Change Billing State” button as described on the previous page.



The image shows a software dialog box titled "Change Insurance Case". At the top, it displays the current "Insurance Case" as "Blue Cross and Blue Shield [Aug 21, 2014 to ...]". A note states: "If the insurance case you wish to select is not listed, ensure the insurance cases's start and end date contain this visit's date." Below this is a section titled "Select Billing State" which contains four main categories: "Primary Insurance", "Secondary Insurance", "Tertiary Insurance", and "Reconciled". Each category has one or two buttons: "Bill Primary", "Mark Primary Billed", "Bill Secondary", "Mark Secondary Billed", "Bill Tertiary", "Mark Tertiary Billed", and "Mark Reconciled". A "Cancel" button is centered below these categories. At the bottom right of the dialog, there is a "Change Billing State" button, which is highlighted with a red arrow. At the very bottom of the dialog, there are "Save" and "Cancel" buttons.



Power Tip: Visits can also be re-billed in the Billing app by selecting them, clicking the Bill Pri, Bill Sec or Bill Ter button and saving changes.



Visits – Update Copay/Co-Insurance

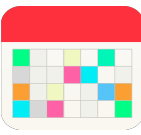
You may have noticed a button on the Visit tile screen that says, “Update Charge Estimate.” This allows you to update the charges for a visit to reflect changes you may have made to a copay, co-insurance or deductible met.

For example. Let’s say the patient had a Blue Cross and Blue Shield plan and you put a copay in of \$30. You found out 5 visits later that this value was not correct, and it should instead be \$20. No problem. Go to the Insurance Tile and remove the \$30 copay and add the correct \$20 copay. Then go to the Visit’s tile and for **EACH** visit click the “Update Charge Estimate” button. It will re-calculate the charges for that visit and use the newly updated \$20 copay in this example.

The button will appear greyed out when a visit is completely reconciled.

It is VERY important that you understand the purpose and function of the “Update Charge Estimate” button. This button will be needed to update every visit in the event you changed an insurance’s copay, co-insurance or deductible met status and want that change to reflect for a particular visit.

Insurance		Update Charge Estimate ?	Change
Case Name	Blue Cross		
Case Number			
Primary	Blue Cross & Blue Shield		
Secondary			
Tertiary			
Last Billed Date	Never Billed		



Visits – Changing an Insurance Case

Why Change an Insurance Case?

- If you selected the incorrect insurance case for a visit you will likely want to change that visit to the correct one
- The patient changed insurance
- The patient no longer has insurance, and you wish to change the visit to the Cash Case

How do I re-bill a visit under a different Insurance Case?

If a charge has already been billed to insurance, you can still change the Insurance Case for that charge and re-bill it to a new or correct insurance case. Let's say you billed a charge to Blue Cross & Blue Shield (primary) only to find out the patient no longer has Blue Cross & Blue Shield. Go back to that patient visit and click the "Change" button on the Insurance box. This will allow you to change to the new or correct insurance case (you must first create the new insurance case in the Insurance tile within the patient Dashboard). You will notice that the Status will say "Primary Billed" as you have technically already billed primary. **If you leave this selection as "Primary Billed" the charges for this visit will NOT be billed to the Primary on the newly selected insurance case.** Therefore, if you wish to have the charges billed to the primary insurance, click on the Change Billing State button and select "Bill Primary." Select "Bill Primary" for all charges you wish to re-bill to primary. Now you have successfully changed to the correct insurance case and all charges associated with that visit will now be billed to the primary insurance for the newly selected insurance case.

NOTE: If a patient changes ONLY secondary insurance you will need to create a new insurance case that contains the original primary and the new secondary.



Visits – Changing an Insurance Case

How do I re-bill a visit if primary is the same but secondary is different?

- First create a new insurance case. Enter primary in exactly as it was entered in the previous insurance case. Now enter in the new secondary insurance.
- Go to the Visit tile and select the visit(s) you wish to bill or re-bill under this new insurance case.
- Click the “Change” button and select your newly created insurance case.
- Select the correct Billing State by clicking the “Change Billing State” button. If you want to bill primary select bill primary of course. If you want to bill secondary select bill secondary of course (for each charge).

How do I re-bill a visit if primary is different but secondary is the same?

- First create a new insurance case. Enter in the new primary insurance. Now enter in the secondary insurance exactly as it was in the previous insurance case.
- Go to the Visit Tile and select the visit(s) you wish to bill or re-bill under this new insurance case.
- Click the “Change” button and select your newly created insurance case.
- Select the correct Billing State by clicking the “Change Billing State” button. If you want to bill primary select bill primary of course. If you want to bill secondary select bill secondary of course (for each charge).

Power Tip: Use the “Duplicate Case” button in the Insurance case tile to duplicate an insurance case. Then remove information that is not needed and update as necessary.



Dashboard - Visits

Insurance – Update Charge Estimates

Often times you may have entered an incorrect copay or co-insurance for a patient and not realize this until after several visits. Or perhaps the patient met their deductible several visits ago and you need to reflect this change on a visit. To remedy this issue, do the following:

- First correct the copay or co-insurance in the Insurance Case section (Dashboard/Insurance). Or, in the case a deductible has been met mark the deductible as met (select a date OLDER than the visit you plan on updating with “update charge estimate”).
- Then in the Dashboard/Visits Tile click the visit(s) you wish to correct the copay or co-insurance on.
- You will then see a black “Update Charge Estimate” button (if greyed out the visit is either reconciled or has an unsigned SOAP note). Clicking this button will update the visit to the updated copay or co-insurance.
- You should notice the numbers in the Visit’s Billing Summary change after you click “Update Charge Estimate” if the copay or co-insurance are different than before.

Insurance **Update Charge Estimate ?** **Change**

Case Name	Blue Cross
Case Number	
Primary	Blue Cross & Blue Shield
Secondary	
Tertiary	
Last Billed Date	Never Billed

Visit's Billing Summary	
Insurance Total	\$40.00
Amount Allowed	\$32.50
Insurance Owes	\$0.00
Patient Total	\$32.50
Patient Owes	\$32.50
Billing State	Not Reconciled



Visits – Edit Diagnoses

From the visit screen you will see a list of the patient's diagnoses. The ICD code is shown as well as the description of the diagnosis. If you wish to edit this list, simply click on the Edit button. Doing this will open a dialog allowing you to make any changes you wish to the diagnosis.

Power Tip: After a SOAP note has been signed, editing the diagnosis will require the provider's PIN (depending on the user's settings who edited the diagnosis). You can set "Can edit signed SOAP Note" editing privileges in Settings/Users/User Rights. Typically, non-providers will have either "No" or "Yes – but must be resigned" in the box shown below.



Settings



Users

Can Edit Signed SOAP Note

Yes - Charges Only ▼

No

Yes

Yes - but must be resigned

Yes - Charges Only

Diagnosis Edit

G54.2
Cervical root disorders, not elsewhere classified

G54.3
Thoracic root disorders, not elsewhere classified

G54.4
Lumbosacral root disorders, not elsewhere classified

G54.8
Other nerve root and plexus disorders

G55
Nerve root and plexus compressions in diseases



Visits – Edit Charges (CPT)

Editing a charge (CPT code) is done in the exact same fashion as editing a diagnosis. Click the Edit button on the charges column. This will open the dialog box shown below allowing you to arrange, edit, remove or add new charges. Once finished making changes click the green “Save” button below.

Charges Edit

98941
Manipulation 3-4 Regions
Not Signed

1101
A-F Betafood - 360T
Not Signed

■ Cash ■ Claimable ■ Care Plan

Visits - Brady E Albery ALBBR000 DOB: 12/16/1979 Age: 41 INS: BCBS

Post Visit Charges and Diagnosis

Charges Diagnosis Condition

Charges

98941 Manipulation 3-4 Regions 1 Units

■ PRC: \$40.00 DISC: \$12.00

1101 A-F Betafood - 360T 1 Units

■ PRC: \$47.00T DISC: \$0.00

Charges Care Plan Charges

Exam/Consult	500 New Patient Cash Visit	0000 Records Fee	99201-25 New Patient Problem Focused Examination	99202-25 New Patient Expanded Problem Focused Examination
Adjustment	99203-25 New Patient Detailed Examination	99204-25 New Patient Comprehensive Examination	99205-25 New Patient Comprehensive (High Complexity) Exam	99211-25 Established Patient Minimal Examination
Therapy	99212-25 Established Patient Problem Focused Exam	99213-25 Established Patient Expanded Exam	99214-25 Established Patient Detailed Exam	99371 Phone Call-Brief
Radiography	99372 Phone Call-Intermediate	99373 Phone Call-Lengthy	97750 Physical Performance test with Report	00001 No Charge Office Visit
Analgesics				
Electrotherapy				
Exercise/Rehab				
Heat/Cold Therapy				
Supplements				
Orthopedics				
Pillows				

■ Cash Charge ■ Claimable Charge ■ Care Plan

Diagnosis Pointers Toggle Care Plan Toggle Insurance Claimable Change Price Discount by Amount Discount by Percent Taxed

Save Cancel

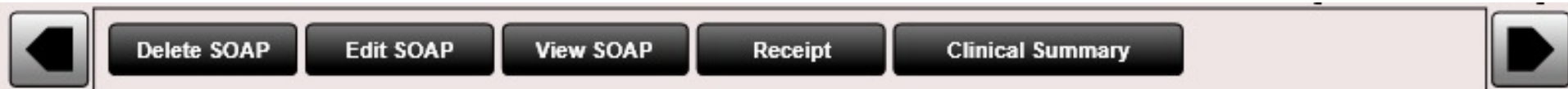


Visits – Navigation Bar

At the bottom of the visits summary screen is a navigation bar that contains the following items

- Delete SOAP (this option can only be used if the SOAP Note has not yet been signed by the provider)
- Edit SOAP
- View SOAP
- Receipt
- Clinical Summary

Clicking on any one of these tabs will open up that item for that particular visit. Once these items open you are free to view/print or in some cases edit.



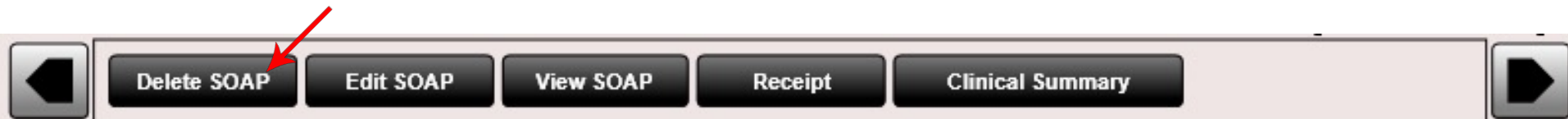


Navigation Bar – Delete SOAP Note

There may be times when you want to delete a SOAP Note. This can be done by clicking the “Delete SOAP” button in the Visits Tile.

SOAP Notes can ONLY be deleted if they have not yet been signed by the provider. Once a SOAP Note is signed by the provider it can never be deleted.

The screenshot displays a mobile application interface for a patient named Kurt Anderson. The top section shows patient information: 100TE000, DOB: 03/12/1990, Age: 25, INS: BCBS. Below this is a list of visits on the left, with the most recent visit (Nov 8, 2015 6:00 AM) highlighted. The main area shows details for this visit, including Date & Time, Rendering Provider (Dr. Brian Albery D.C.), SOAP Signed by (Not Signed), Appointment Note, Reason for Visit (Adjustment), General Visit Note, and Diagnosis (S23.3XXA Sprain of ligaments of thoracic spine). A 'Delete SOAP' dialog box is open in the center, asking for confirmation to delete the note. The bottom navigation bar contains buttons for 'Delete SOAP', 'Edit SOAP', 'View SOAP', 'Receipt', and 'Clinical Summary'. A legend indicates that a blue dot represents an 'Un-signed SOAP Note'.





Navigation Bar – Edit SOAP Note

Clicking on the Edit SOAP button below will open the editable SOAP note for that visit. Here you can make any changes to the SOAP that you like.

SOAP Note - Brady E Albery ALBBR000 DOB: 12/16/1979 Age: 41 Ins: BCBS

Visit: 12/17/2020 23:15 PM

Intro Condition MIST Complaint ROS Pt. Intake Free Text

Copy Data ?
Copy From Previous Visit

Print Report Setting ?
SOAP Report

HT: WT: BMI: Gender: Male

Patient Owes \$70.76

Scheduled to Provider Dr. Brian Albery

Rendering Provider 24j Dr. Brian Albery

SOAP Signed by Not Signed

Appointments History
Completed Canceled Missed Rescheduled Future Signed SOAP

Dec 29, 2020 - 10:00 AM Tue Dr. Brian Albery Scheduled
Dec 29, 2020 - 9:00 AM Tue

SOAP Note Header Title

Reason for Visit Adjustment

Appointment Note

Visit Date & Time 24a Dec 17, 2020 11:15 PM

Treatment Plan ?
3x per week for 4 week(s) 12/2/2020 to 1/27/2021
2x per week for 4 week(s)
11 previously completed 20 total

Condition Case Description ?
Low Back Pain from Shoveling

Last Re-Evaluation ?
Date 11/27/2020
Visits since 15
Patient had re-evaluation today Yes No

Insurance - BCBS Change

Primary 3456 WECOME WAY
Secondary
Tertiary

Care Plan
Care Plan (10/31/2020 - 12/31/2020)

Description	Units	Amount	Used	Remaining
98941 Manipulation 3-4 Regions	10	40.00	8	2
97035 Therapy-Ultrasound	5	25.00	5	0
99204-25 New Patient Comprehensive E	1	110.00	0	1

Images

HCFA Visit Related Fields 16 18 19 22 23 24b 24c 24h

Close Dock Save Save & Sign Back Next Preview Dashboard

Delete SOAP Edit SOAP View SOAP Receipt Clinical Summary



Navigation Bar – View SOAP Note

Clicking on the View SOAP button below will open up the SOAP note for that visit in an easily viewable format. We refer to this as the “paper SOAP Note”.

Power Tip: You can easily hide or show sections of the paper SOAP Note. To do this click the “SOAP Settings” button and highlight the sections you want shown. If you want these settings to remain, click “Save Default”. You can even move sections up/down.

Additionally specify “Report Settings”. This gives you the ability to have two separate “KINDS” of notes (e.g. radiology report). Specify if a note is SOAP or Report in Edit SOAP on the Intro Tab.

View SOAP Brady E Albery DOB: 12/16/1979 Age: 41 Ins: BCBS CPT copyright 2020 American Medical Association. All rights reserved.

Date of Service: 12/17/20 at 11:15 PM Patient: Brady E Albery DOB: 12/16/1979
Dr's Chiropractic 234 Western, Davenport, IA 52722-1234 SS#: XXX-XX-7654
1234 Main St. Bettendorf, IA 52722

Subjective

Condition Case	Dates	Signed By	Referring Provider
None	04/16/20 to Present		Dr Felix DaCat

Complaints

Open Complaint Elbow - Right - Decreased ROM, Edema, Hypermobility

Evaluated: 12/17/2020
Mechanism Of Injury: Fell on a nail.
Severity: 4 of 10 [Better]

Qualities: Numb, Stiff, Swelling, Dull, and spasm
Aggravating Factors: Lifting, Pushing, Standing, Jogging, Pulling, and Running
Relieving Factors: Ice, Heat, Wraps, and Walking

Notes: Fell off ladder. Hit right elbow on a rock.

Open Complaint Shoulder - Right - Edema, Pain

Evaluated: 12/17/2020
Frequency: Constant (76-100%)
Duration: Frequent
Severity: 6 of 10 [Worse]

Qualities: Aching, Radiating, Stabbing, Stiff, spasm, and Spasming
Aggravating Factors: Jogging, Nothing, Pulling, Squatting, Sneezing, and Sitting
Relieving Factors: Ice, Rest, Stretching, Walking, and Wraps

Notes:

Open Complaint Head - Left - Dizziness

Close Dock SOAP Settings Report Settings Print

Delete SOAP Edit SOAP View SOAP Receipt Clinical Summary



Navigation Bar – Customize SOAP

Here you can see we are customizing which fields we want shown on our “paper” SOAP Note. Click “SOAP Settings” or “Report Settings”. Specify within the Edit SOAP on the intro tab which version you are producing using the buttons on the Intro Tab.

SOAP Notes - Brady E Albery ALBBR000 DOB: 12/16/1979 Age: 41 INS: BCBS CPT copyright 2020 American Medical Association. All rights reserved.

12/17/20 Dr. Brian Albery
12/17/20 Dr. Brian Albery
12/15/20 Dr. Brian Albery
12/15/20 Dr. Brian Albery
12/14/20 Dr. Brian Albery
12/10/20 Dr. Brian Albery
12/9/20 Dr. Brian Albery
12/7/20 Dr. Brian Albery
12/4/20 Dr. Brian Albery
12/3/20 Dr. Brian Albery
12/2/20 Dr. Brian Albery
12/2/20 Dr. Brian Albery
12/1/20 Dr. Brian Albery
11/30/20 Dr. Brian Albery
11/30/20 Dr. Brian Albery

DOB: 12/16/1979
SS#: XXX-XX-7654
1234 Main St.
Bettendorf, IA 52722

Referring Provider
Felix DaCat

Select Optional Report Columns

Determine how you want your SOAP Notes to appear by removing sections or arranging their order.

- Facility Name & Address (Top)
- Patient Address
- Patient Social Security (last 4 digits)
- Case Number for Insurance Case
- Facility Name & Address (Bottom)

- Appointment Time
- Subjective Header
- Condition Case
- Demographics
- Smoking Status
- MIST
- Complaints
- ROS
- Patient Intake
- Subjective Comments
- Objective Header

These options cannot be arranged.

Select All Clear All

↑ ↓

Select All Clear All

Cancel Ok Save Default

Close Dock Find Cut Cut history SOAP Settings Report Settings Print Date Range Print



Navigation Bar – Receipt

Clicking on the Receipt button below will open up the receipt for that visit. This is the exact receipt that was printed at the time the patient was seen. Not only can you view the receipt from here, but it can also be printed. This is an invaluable tool for those occasions where patients either lose receipts or want all of their year's receipts printed for tax purposes at the end of the year.

Similar to the SOAP note you can also customize what is shown on the receipt. To customize your receipt, click the "Print Settings" button. If you want these settings to remain, click "Save Default".

CPT copyright 2013 American Medical Association. All rights reserved.

Spinal Care Chiropractic
1515 Brady St.
Davenport, IA 52806
563-545-4565
spinalcarechiropractic4health@gmail.com

Visit Receipt

Kurt Anderson
555
Shanghi, NY

Created: 1/9/16 at 5:14 AM
Appointment: 11/8/15 at 6:00 AM
Account: 100TE000
DOB: 3/12/1990 - Age 25
Provider: Dr. Brian Albery D.C.
Provider NPI: 768768768

BALANCE FORWARD AS OF 1/9/16: \$151.70

DATE	DESCRIPTION	UNITS	CHARGED AMOUNT	INS. SAVINGS	INS. PAID	COPAY	CO-INS	DEDUCT.	PATIENT PAID	PATIENT OWES
11/08/15	98940 Manipulation 1-2 Regions	1	35.00	5.50	0.00	0.00	0.00	0.00	0.00	0.00
11/08/15	99204-25-BC-EF-GH New Patient Comprehensi	1	110.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

CHARGES	PAYMENTS	NEW BALANCE
\$0.00	\$0.00	\$151.70

Discharge Instructions
Based on your response to treatment at this facility, we recommend you continue to follow our current treatment plan. A re-evaluation will be performed once the treatment plan has been completed to determine if additional care is necessary, if you can be released from care or if you need to be referred to another healthcare professional. I recommend that you increase your daily water intake to help increase energy, decrease fatigue, flush out toxins, boost your immune system, prevent cramps and sprains, lubricate joints, decrease inflammation, increase digestion and increase your overall health. It is recommended that you drink at least eight 8-ounce glasses of fluid per day, as every system in your body depends on water to function normally. Due to the presenting symptomatology, I recommend that you rest, ice, compress and elevate the injured appendage. This will help reduce swelling/inflammation, decrease pain and promote tissue healing.

Close Receipt 1 of 1 Print Receipt(s) Print Settings Save Default

Delete SOAP Edit SOAP View SOAP Receipt Clinical Summary



Navigation Bar – Customize Receipt

Here you can see we are customizing which fields we want shown on our receipt.

Visit Receipt - Brady E Albery **DOB: 12/16/1979** **Age: 41** **Ins: BCBS** CPT copyright 2020 American Medical Association. All rights reserved.

Dr's Chiropractic
234 Western
Davenport, IA 52722-1234
563-545-4565
info@gmail.com

Brady E Albery
1234 Main St.
Bettendorf, IA 52722

Visit Receipt
Select Optional Report Columns

- Provider NPI
- Provider EIN
- Charges
- Product Orders
- Diagnosis
- Treatment Plan
- Discharge Instructions
- Future Appointments
- Balance and Payments

Created: 12/23/20 at 10:00 AM
Appointment: 12/17/20 at 11:15 PM
Account: ALBBR000
DOB: 12/16/1979 - Age 41
Provider: Dr. Brian Albery
Provider NPI: 5635059372
Provider EIN:

DATE	DESCRIPTION
12/17/20	98941 Manipulation 3-4 Regions
12/17/20	1101 A-F Betafood - 360T

Product Orders

Products	
Cataplex A - 180T	Breakfas
Take with food.	
Vitamin C	Breakfas
B6-Niacinamide - 330T	Breakfas
HerbaVital - 40T	Breakfas
Vitamin D-3 - 180SG	Supper-

FORWARD AS OF 12/23/20: \$-8.00			
CO-INS	DEDUCT.	PATIENT PAID	PATIENT OWES
0.00	0.00	0.00	28.00
0.00	0.00	0.00	50.76
PAYMENTS		NEW BALANCE	
\$0.00		\$70.76	



Navigation Bar – Clinical Summary

Clicking on the Clinical Summary button below will open up the clinical summary for that visit. This is the exact clinical summary that was generated at the time the patient was checked out.

Clinical Summary - Chad Thompson DOB: 07/30/1947 Age: 69 Ins: Blue Cross and Blue Shield CPT copyright 2013 American Medical Association. All rights reserved.

Get Well Clinic
1002 Healthcare Dr.
Portland, OR 97005
555-555-1122
spinalcarechiropractic4health@gmail.com

Clinical Summary

Chad Thompson
123 Sunny Dr
Davenport, IA 54356

Created: 9/7/16 at 5:22 AM
Appointment: 9/6/16 at 8:40 AM
Account: THOCH000
DOB: 7/30/1947 - Age 69
Gender: Male
Provider: Dr. Brian
Provider NPI: 768768768

Reason(s) for Visit
Adjustment
Want's Massage Every Visit

Demographics

Handedness	Left Handed	Race	White
Marital Status	Unknown	Ethnicity	Hispanic or Latino
Job Status	Employed		

Smoking Status
Heavy tobacco smoker
Date Started: 2016

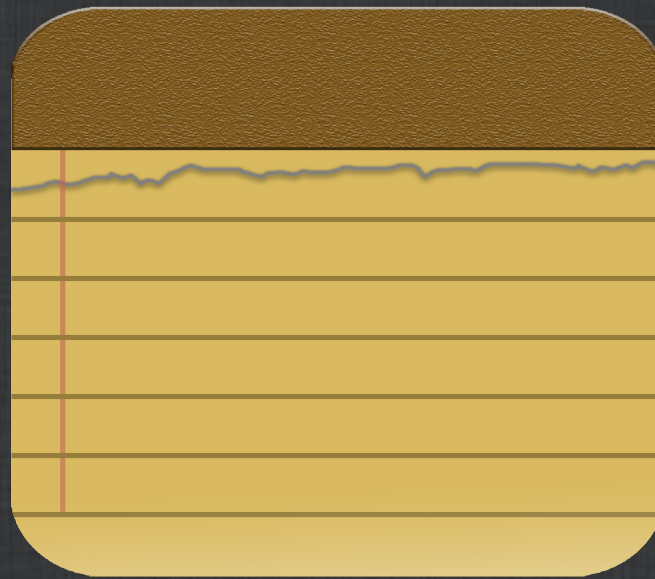
Charges

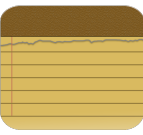
Receipt 1 of 1

Close Send to Patient Portal Clinical Summary: Pt. Requested Print Print Settings Save Default

Navigation Bar with buttons: Delete SOAP, Edit SOAP, View SOAP, Receipt, Clinical Summary (highlighted with a red arrow), and a right arrow button.

#SOAP Notes (Dashboard)





Dashboard - SOAP Notes

The Edit SOAP dialog is composed of many TABS. Not all providers use all tabs. We have made our SOAP Notes VERY customizable.

If you want to remove Tabs within your Edit SOAP, this can be done in Settings/Users/User Rights as shown below.

User Dr. Brian Albery

General | Reports | **SOAP Note** | Dashboard | Front Desk | Settings | Launcher

SOAP Tabs I Cannot Access

- Immunizations
- Labs
- Vitals (Used in MIPS)**
- Pt. Education
- Risks, Assessments & Interventions

SOAP Tabs I Can Access

- Condition**
- MIST
- Complaint
- Subjective Free Text
- Adjustments
- Acupuncture
- Evaluation
- Product Orders
- Treatment
- Vitals
- Objective Free Text
- Diagnosis
- Assessment Free Text
- Charges
- Plan Free Text
- Wrap Up

Add All →

Add →

← Remove

← Remove All

Save & Close Cancel

Dashboard - SOAP Notes

SOAP notes are kept in a highly organized part of the patient Dashboard. Click on the “SOAP Note” tile and you will see a list on the left for every patient visit.

Selecting each visit will reveal its SOAP note on the right side in an easy-to-read format. We refer to this as the “paper SOAP note”. Not only can you view the SOAP here, clicking the “Print” button will allow you to print the SOAP. Clicking the “Edit” button will open the SOAP and allow you to make any changes you wish.

If you wish to print several SOAP notes at once, click the “Print Date Range” button and select a date range.

Use the “Find” search section to search for text inside your SOAP.

SOAP Notes - Brady E Albery ALBBR000 DOB: 12/16/1979 Age: 41 INS: BCBS

Date of Service: 12/17/20 at 11:15 PM Patient: Brady E Albery DOB: 12/16/1979
SS#: XXX-XX-7654
Dr's Chiropractic 234 Western, Davenport, IA 52722-1234 Bettendorf, IA 52722

Subjective

Condition Case	Dates	Signed By	Referring Provider
None	04/16/20 to Present		Dr Felix DaCat

Complaints

Open Complaint Elbow - Right - Decreased ROM, Edema, Hypermobility

Evaluated: 12/17/2020
Mechanism Of Injury: Fell on a nail.
Severity: 4 of 10 [Better]

Qualities: Numb, Stiff, Swelling, Dull, and spasm
Aggravating Factors: Lifting, Pushing, Standing, Jogging, Pulling, and Running
Relieving Factors: Ice, Heat, Wraps, and Walking

Notes: Fell off ladder. Hit right elbow on a rock.

Open Complaint Shoulder - Right - Edema, Pain

Evaluated: 12/17/2020
Frequency: Constant (76-100%)
Duration: Frequent
Severity: 6 of 10 [Worse]

Qualities: Aching, Radiating, Stabbing, Stiff, spasm, and Spasming
Aggravating Factors: Jogging, Nothing, Pulling, Squatting, Sneezing, and Sitting
Relieving Factors: Ice, Rest, Stretching, Walking, and Wraps

Notes:

● = Un-signed SOAP Note SOAP Report

Close Dock Find Edit Edit History SOAP Settings Report Settings Print Date Range Print

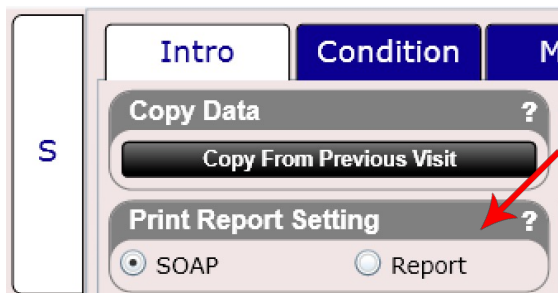
Print Print Date Range

Dashboard - SOAP Notes

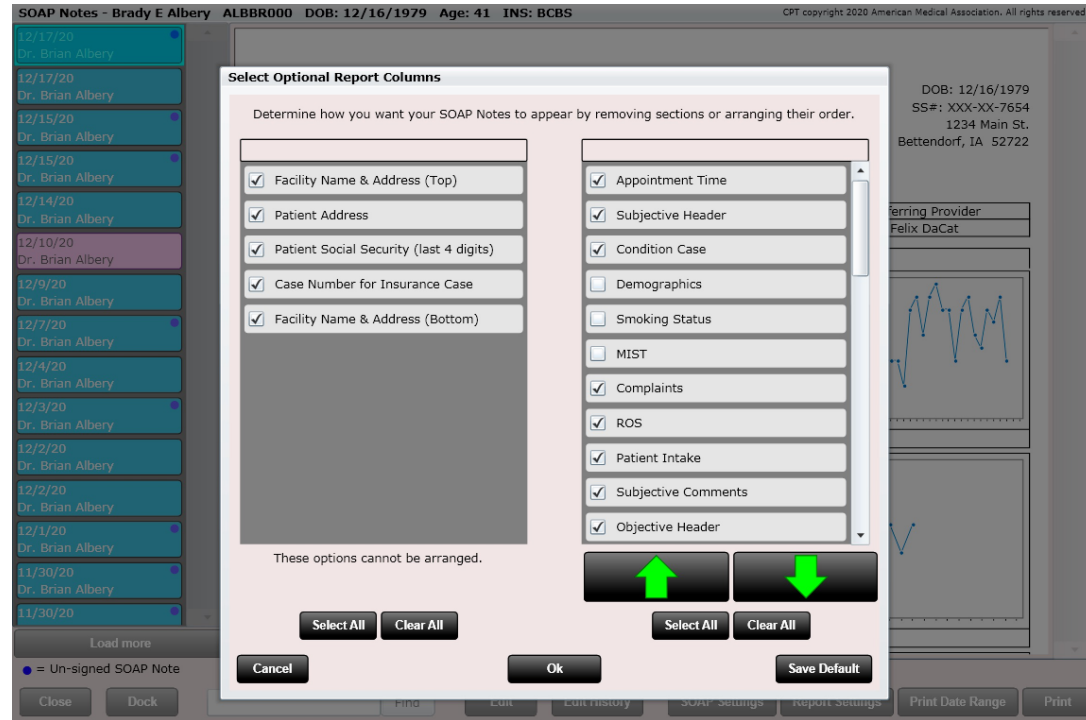
You can also customize what CONTENT you want displayed in your SOAP Note. There are two versions of a note you can customize.

- SOAP Note
- Report

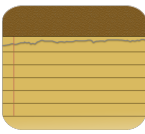
Choose which version of the note you want printed/displayed on Edit SOAP on the Intro Tab. See below.



Tip: There is also an option to create a SOAP Note Footer. This is editable in Settings/Practice Info/General.



Tip: You can also add your signature to the bottom of your SOAP Notes. This is done in Settings/Users/Provider Info. If you have difficulty adding your signature, send us a picture of your signature on white paper and we can do this for you.



Edit a SOAP Note

As previously mentioned, there are two ways to initiate the writing of a SOAP for a patient (from the front desk or within the patient dashboard). Once you have clicked “Edit SOAP” the SOAP will launch.

The SOAP Note is essentially a highly organized multi-step wizard that walks you through the necessary steps of writing a complete SOAP. It consists of a four tabs along the left-hand side (S, O, A & P). Within each tab are more tabs at the top of the screen. These top tabs are specific to the area of the SOAP you are in.

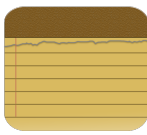
Navigation through the Edit SOAP easy. You can click on the left-hand tabs (S, O, A & P) to change from subjective, to objective, to assessment or to plan. You can also click on the top tabs to navigate in between them.

You may notice back and next buttons along the bottom of the screen. Clicking the next button will take you to the next tab in sequence. Clicking the back button will take you back to the previous tab.

There are also two green buttons, “Save” and “Save & Sign.” “Save” will save any changes and progress made to the SOAP. “Save & Sign” will open a key-pad to enter your pin number. After pin entry the SOAP is marked as complete and signed by the provider. You can create your pin number in the settings section under Users.

Charges CANNOT be billed to insurance until the provider has signed their SOAP. However, you CAN checkout a patient without completing and signing the SOAP. This is an important concept to understand.





Edit a SOAP Note

When a patient is in the “checked in” status on the front desk you are able to Edit their SOAP. There are multiple ways to do this.

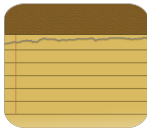
- Right Click on their name on the front desk and select “Edit SOAP Note”
- From their dashboard click on the “Edit SOAP Note” button
- Double click on the patient name when in the “checked in” status

As soon as you perform either of these functions the Edit SOAP note will open.

Power Tip: You can also right click on a patient on the calendar and select EDIT SOAP Note. However, this can only be done under these two circumstances.

1. The SOAP has previously been edited
2. The visit is a date in the past (not today)

The screenshot shows a software interface with two columns: "Checked In" and "Awaiting Check". The "Checked In" column contains a patient entry for Brady E Albery with details: Apt Time: Dec 17, 1:00 PM, Checked In: 2:49 PM, and Dr. Brian Albery. A context menu is open over this entry, listing several options: Undo Check In, Await Check Out, Await Check Out Multiple, Check Out, Dashboard, Quick Info, and Edit SOAP Note. The "Edit SOAP Note" option is highlighted with a blue border. The "Awaiting Check" column contains a patient entry for Bob Anderson with details: Appt Time: Dec 14, 2:00.



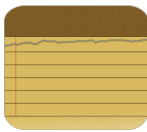
Edit a SOAP Note

The SOAP is divided into neatly organized tabs. Along the left side you will see the “S”, “O”, “A” and “P” tabs. Within each of these tabs along the left are a series of tabs at the top. These tabs are specific to the tab you are in. These tabs are all shown to the right.

ChiroSpring has been designed to support TOUCH. It is not possible to display all information on a single screen without resorting to tiny check boxes and small font. With ChiroSpring’s tabbed system and large buttons, writing a SOAP note is not only fast, but also can be accomplished easily with TOUCH.

S	Intro	Condition	MIST	Complaint	ROS	Pt. Intake	Free Text
	Adjustments	Acupuncture	Evaluation	Vitals	Labs	Immunizations	Free Text
O	Diagnosis	Risks, Assessments & Interventions			Free Text		
	Charges	Free Text	Care Plan	Treatment	Wrap Up		
A	CPOE	Pt. Education					
P							

SOAP – Intro Tab



SOAP Note - Brady E Albery ALBBR000 DOB: 12/16/1979 Age: 41 Ins: BCBS CPT copyright 2020 American Medical Association. All rights reserved.

Visit: 12/17/2020 13:00 PM

S

O

A

P


Intro
Condition
MIST
Complaint
ROS
Pt. Intake
Free Text

Copy Data ?

Copy From Previous Visit

Print Report Setting ?

SOAP Report



HT:
WT:
BMI:
Gender: Male

Patient Owes

\$70.76

Scheduled to Provider

Dr. Brian Albery

Rendering Provider 24j

Dr. Brian Albery

SOAP Signed by

Dr. Brian Albery

Appointments History

Completed Canceled
 Missed Rescheduled
 Future Signed SOAP

Dec 29, 2020 - 9:00 AM Tue
Dr. Brian Albery
Scheduled

Dec 28, 2020 - 7:00 PM Mon

SOAP Note Header Title

Reason for Visit Adjustment Appointment Note

Visit Date & Time 24a

Dec 17, 2020 1:00 PM

Treatment Plan ?

3x per week for 4 week(s) 12/2/2020 to 1/27/2021
2x per week for 4 week(s)

10 previously completed 20 total

Condition Case Description ?

Low Back Pain from Shoveling

Last Re-Evaluation ?

Date: 11/27/2020
Visits since: 14
Patient had re-evaluation today: Yes No

Care Plan

● Care Plan (10/31/2020 - 12/31/2020)

Description	Units	Amount	Used	Remaining
98941 Manipulation 3-4 Regions	10	40.00	8	2
97035 Therapy-Ultrasound	5	25.00	5	0
00204-25 New Patient Comprehensive E	1	110.00	0	1


Visits - Primary Ins.

Chiropractic 21 of 20
Therapy 1 of 10

Visits - Secondary Ins.

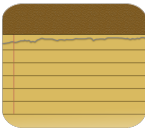
Chiropractic
Therapy

Images



HCFA Visit Related Fields 16 18 19 22 23 24b 24c 24h

Close
Dock
Save
Save & Sign
Back
Next
Preview
Dashboard



SOAP – Intro Tab

Here you view the following information

- SOAP Note Header Title
- Visit Date and Time(24a)
- Condition Case
- Insurance Case
- Provider
- Visit Related HCFA Fields
- Visit History
- Reason for Visit
- Condition Case Info
- Insurance
 - Primary
 - Secondary
 - Tertiary
- Treatment Plan
- Re-Evaluation Counter
- SOAP Note Header (create a title for your SOAP Note)

The following information is Editable

- Insurance Case
 - The default insurance case will be auto selected but you can change the insurance case here. However, you must save any changes to the SOAP before changing the insurance case.
- Provider
 - You can change the rendering provider on the fly.
- Visit Related HCFA Fields
 - These HCFA fields are related to THIS SOAP ONLY. The only exceptions are the following:
 - Unable to work date range (16)
 - Hospitalization Date Range (18)
 - 19 Additional Claim Information (19)
 - Prior Authorization No. (23)

These HCFA fields will be copied over on subsequent visits.

HCFA - Visit Related Fields

Unable to Work Date Range 16	Resubmission 22
Start Date <input type="text"/> End Date <input type="text"/>	Code <input type="text"/> Original Ref No <input type="text"/>
Hospitalization Date Range 18	Prior Authorization No. ? 23
Start Date <input type="text"/> End Date <input type="text"/>	99999999911111 <input type="button" value="C"/>
19 Additional Claim Information 19	POS 24b EMG 24c EPSPD 24h
ZZ456789765	11 <input type="text"/> <input type="text"/>
<input type="button" value="Ok"/>	

SOAP – Intro Tab

HCFA Fields

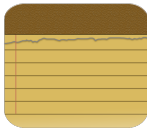
Part of the SOAP Note Intro tab contains visit related HCFA fields. These will OFTEN not be used but must be present in the event one of these fields needs populating. The HCFA fields include:

- Unable to work date range (16) – Will be copied over on subsequent visits
- Hospitalization date range (18) – Will be copied over on subsequent visits
- 19 Additional Claim Information (19) – Will be copied over on subsequent visits
- Resubmission (22)
- Medicaid Original Ref. No. (22)
- Prior Authorization Number (23) - Will be copied over on subsequent visits
- Place of Service (24b) – Lists your default place of service by default. Default place of service is set in Settings/Practice Info.
- EMG (24c)
- EPSTD Family Plan (24h)

These are all Visit Related HCFA fields that can be populated on the SOAP note intro tab. If you forget to populate them during the treatment and wish to do so at a later time you still can do so by simply by editing the SOAP.

HCFA - Visit Related Fields

Unable to Work Date Range 16	Resubmission 22
Start Date <input type="text"/> End Date <input type="text"/>	Code <input type="text"/> Original Ref No <input type="text"/>
<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
Hospitalization Date Range 18	Prior Authorization No. ? 23
Start Date <input type="text"/> End Date <input type="text"/>	<input type="text"/>
<input type="text"/> <input type="text"/>	99999999911111
19 Additional Claim Information 19	POS 24b EMG 24c EPSTD 24h
<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>
ZZ456789765	11
<input type="button" value="Ok"/>	



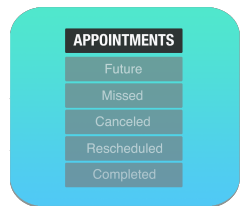
SOAP – Intro Tab

Another feature of the treatment wizard “Intro Screen” is the visit history list box. It contains the history for the most recent visits and categorizes them by color.

- Complete - Green
- Cancelled – Red
- Missed – Yellow
- Rescheduled - Orange
- Future - White

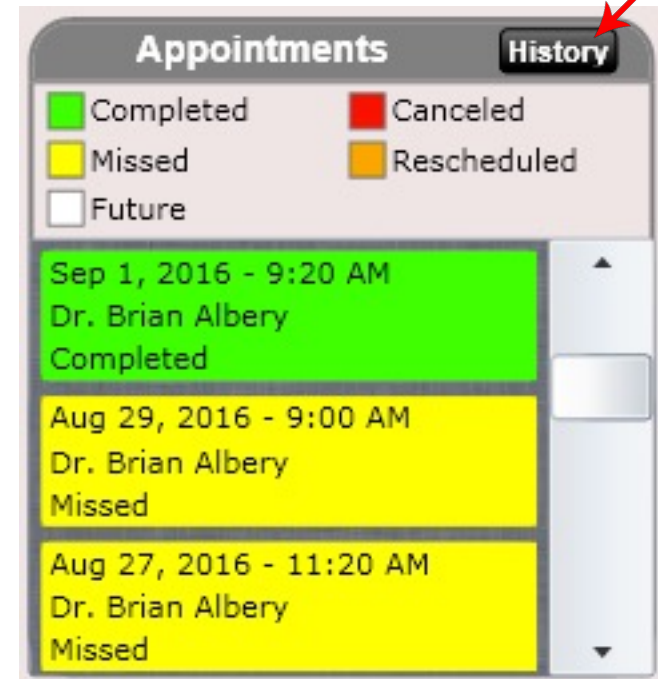
This gives the provider a general idea on the compliance of the patient and will help remind the patient of any upcoming appointments.

Using the mouse, you can hover over a cancelled or rescheduled appointment to see the reason the appointment was missed or cancelled.



Power Tip: Using the appointments tile within the Dashboard you can edit various aspects of the appointment such as Visit Type, Appointment Note, Reason Missed/Canceled/Rescheduled, General Visit Note, Appointment Type or Is New Patient Visit.

Click “History” to see details on the last six months.



SOAP – Intro Tab

After clicking “History” we can see the compliance of our patient over the last six months.

SOAP Note Chad Thompson DOB: 12/12/1957 Age: 58 Ins: Blue Cross and Blue Shield CPT copyright 2013 American Medical Association. All rights reserved. Visit: 09/15/2016 8:40 AM

Appointment History

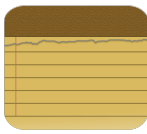
Completed Missed Canceled Rescheduled Future

Sep - 2016							Aug - 2016							Jul - 2016						
SUN	MON	TUE	WED	THU	FRI	SAT	SUN	MON	TUE	WED	THU	FRI	SAT	SUN	MON	TUE	WED	THU	FRI	SAT
				1	2	3		1	2	3	4	5	6						1	2
4	5	6	7	8	9	10	7	8	9	10	11	12	13	3	4	5	6	7	8	9
11	12	13	14	15	16	17	14	15	16	17	18	19	20	10	11	12	13	14	15	16
18	19	20	21	22	23	24	21	22	23	24	25	26	27	17	18	19	20	21	22	23
25	26	27	28	29	30		28	29	30	31				24	25	26	27	28	29	30
														30	0	0	0	0	0	0

Jun - 2016							May - 2016							Apr - 2016						
SUN	MON	TUE	WED	THU	FRI	SAT	SUN	MON	TUE	WED	THU	FRI	SAT	SUN	MON	TUE	WED	THU	FRI	SAT
			1	2	3	4	1	2	3	4	5	6	7						1	2
5	6	7	8	9	10	11	8	9	10	11	12	13	14	3	4	5	6	7	8	9
12	13	14	15	16	17	18	15	16	17	18	19	20	21	10	11	12	13	14	15	16
19	20	21	22	23	24	25	22	23	24	25	26	27	28	17	18	19	20	21	22	23
26	27	28	29	30			29	30	31					24	25	26	27	28	29	30

Mar - 2016						
SUN	MON	TUE	WED	THU	FRI	SAT

Close Ok Dashboard



SOAP – Intro Tab

- **Treatment Plan**

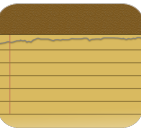
This displays the current treatment plan for the patient and shows you the number of visits completed. This is valuable information to see before treating the patient as it can help determine if the plan is still appropriate or needs modifying.

Treatment Plan ?	
3x per week for 4 week(s)	12/2/2020
2x per week for 4 week(s)	to 1/27/2021
11 previously completed 20 total	

- **Re-Evaluation Counter**

As a provider you know that insurance companies pay you for patient evaluations. They also will only pay you for an evaluation on the first visit and usually not any sooner than 10 visits. This counter is a great tool to keep track of when the last evaluation was done as well as the number of visits that have been done since that date. When an evaluation has been performed mark 'Yes'. This will reset the counter back to 1 for the next visit.

Last Re-Evaluation ?	
Date	11/27/2020
Visits since	15
Patient had re-evaluation today	<input type="button" value="Yes"/> <input type="button" value="No"/>



SOAP – Plan – Care Plan

Re-Evaluation Counter

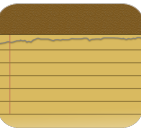
Here you can see the number of visits since the last re-evaluation. If a patient had a re-evaluation today, simply mark “yes” next to the “Patient had re-evaluation today” section. This will reset the re-evaluation counter back to zero for the next visit. **Note, the re-evaluation will not start counting until you have marked “yes” at least once to indicate the patient had their initial evaluation.**

Re-Evaluation Counter

Visits since last evaluation: 3

Date of last evaluation: 6/14/2016

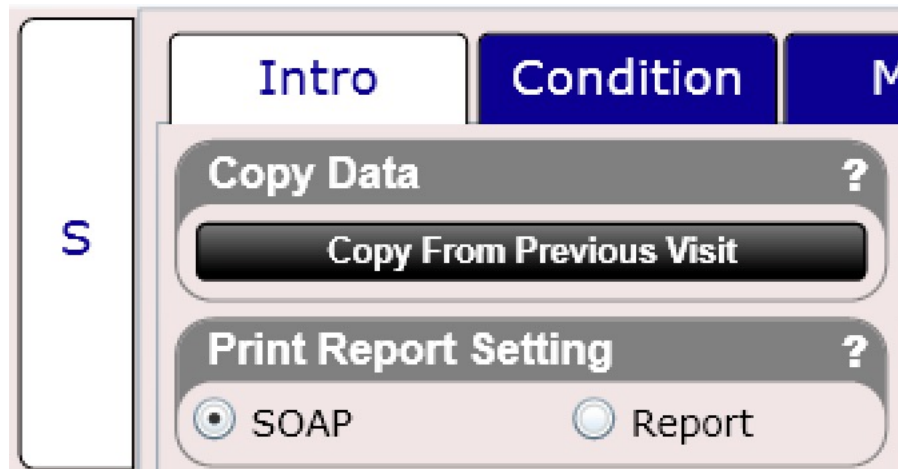
Patient had re-evaluation today. No ▼

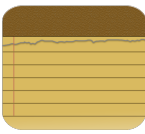


SOAP – Intro Tab

- **Print Report Setting**

ChiroSpring supports two “versions” of a note. This provides flexibility for your final “product” to have two unique looks for both SOAP note or Report. In Dashboard/SOAP notes use the “Soap Settings” and “Report Settings” options to add/remove sections from the note as well as move items up/down the list.





SOAP – Intro Tab

- **Condition Case**

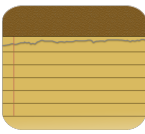
This lists the current condition case as well as the date range. The condition case description is also displayed. This information is not editable here. It can be edited by changing the primary diagnosis (in the diagnosis tab) or by clicking the “create new condition” button found within the condition tab. You can also freely edit the condition case description on the subjective/condition tab.

Condition Case		Condition Case Description
Diagnosis	723.1 Cervicalgia	Whip lash from car accident
Date Range	Dec 15, 2013 to Present	

- **Insurance**

This lists the currently selected insurance case and shows you the primary, secondary and tertiary insurance plans for that case. You can also change the insurance case here by selecting the “change” button. Note, you will need to save changes to your SOAP before changing the insurance case. A dialog will prompt you for this.

Insurance - Blue Cross and Blue Shield		Change
Primary	Blue Cross and Blue Shield	
Secondary	Medicaid	
Tertiary		



SOAP – Intro Tab

- Reason for Visit & appointment Note

Here you will see the visit reasons assigned to the appointment as well as the appointment note. These fields are editable on the calendar by going into the appointment.

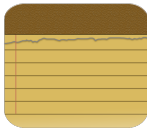
The screenshot shows two side-by-side input fields. The left field is titled 'Reason for Visit' and contains the text 'Auto Accident' and 'X-Rays'. The right field is titled 'Appointment Note' and contains the text 'Apply biofreeze to his neck.' Both fields have an 'Edit' button in the top right corner.

- Scheduled to and Rendering Provider

You can also see who the scheduled to provider is for the appointment and change the rendering provider on the fly by clicking the drop-down menu.

Power Tip: Only a provider that is allowed to sign another provider's SOAP note can sign your SOAP note. This setting is found in Settings/Users/Provider Info.

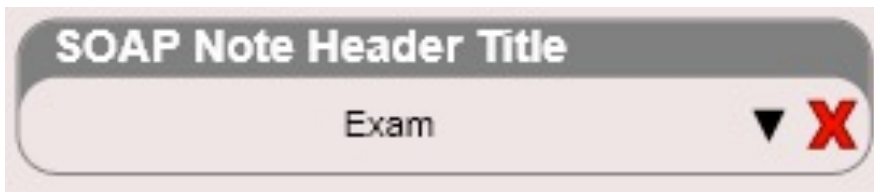
The screenshot shows a vertical list of four items, each in a rounded rectangular box. The first item is 'Patient Owes' with a value of '\$67.62'. The second item is 'Scheduled to Provider' with the name 'Dr. Brian Albery'. The third item is 'Rendering Provider' with the name 'Dr. Brian Albery' and a red '24j' badge to its right. The fourth item is 'SOAP Signed by' with the name 'Tish'.



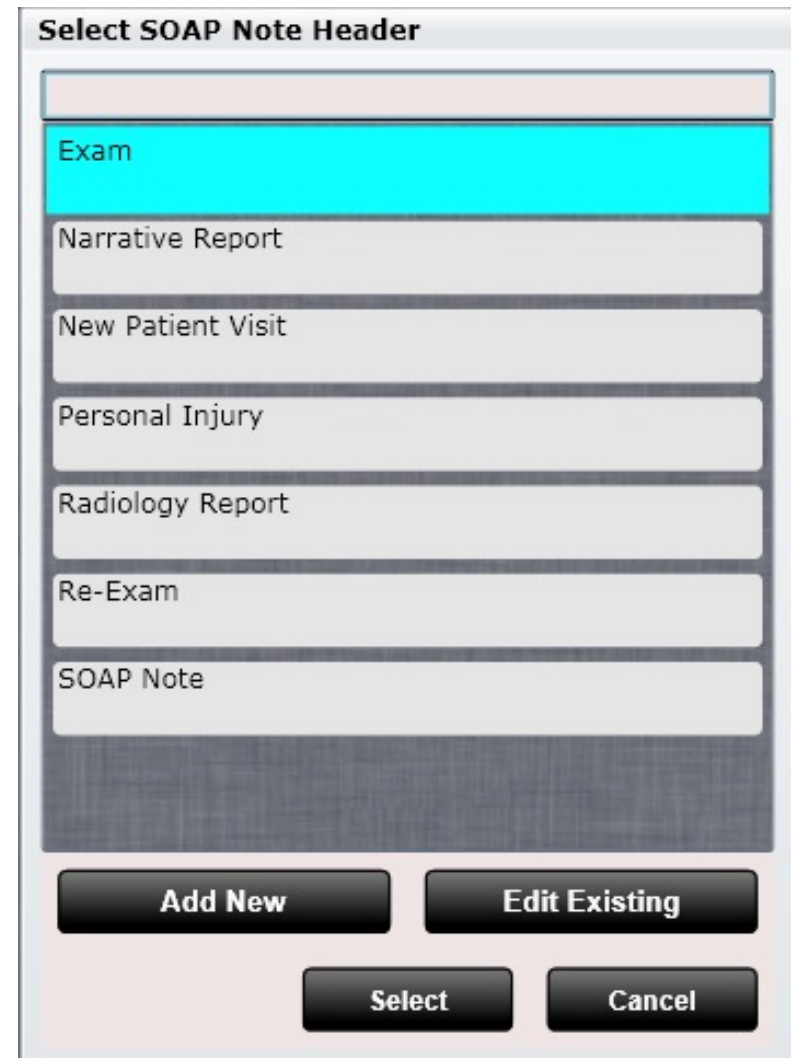
SOAP – Intro Tab

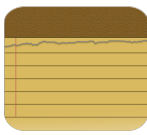
- SOAP Note Header Title

This will allow you to select a “Title” for your SOAP Note. You can customize any title you wish. Some examples are shown to the right.



The default is BLANK. Some insurances require a title on your SOAP note, so this is a great feature to have.





SOAP – Intro Tab

- Images

View thumbnails of recent images. Click thumbnails for a complete view.

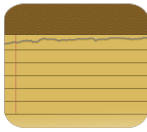


- Care Plans

View or select a care plan and track the number of units used or remaining.

Care Plan					
● Care Plan (10/31/2020 - 12/31/2020)				▼	X
Description	Units	Amount	Used	Remaining	
98941 Manipulation 3-4 Regions	10	40.00	8	2	
97035 Therapy-Ultrasound	5	25.00	5	0	
99204-25 New Patient Comprehensive E	1	110.00	0	1	

SOAP – Condition Tab



SOAP Note - Brady E Albery ALBBR000 DOB: 12/16/1979 Age: 41 Ins: BCBS CPT copyright 2020 American Medical Association. All rights reserved.

Visit: 12/17/2020
13:00 PM

Intro | **Condition** | MIST | Complaint | ROS | Pt. Intake | Free Text

S

Original Condition
None

Date Range 4/16/2020 to Present **Created By** Tonya Shiltz

Description of Condition
Low Back Pain from Shoveling

Referring Provider Select Remove 17
Name: Dr Felix DaCat
Phone:
Fax:
Email: cats@cats.com
NPI: 89898989

Ordering Provider Select Remove 17
Name: None
Phone:
Fax:
Email:
NPI:

Name of Referring Provider or Outside Source 17
Referring Provider ▼

[Create New Condition](#)

A

P

Close Dock Save Save & Sign Back Next Preview Dashboard

SOAP – Condition Tab

Condition Cases are a great way to monitor a patient’s progress for a particular condition. Condition Cases are created in two ways.

1. Created automatically on the first patient visit.
2. Click the “Create New Condition” button (see below).

SOAP Note - Brady E Albery ALBBR000 DOB: 12/16/1979 Age: 41 Ins: BCBS CPT copyright 2020 American Medical Association. All rights reserved. Visit: 12/17/2020 13:00 PM

Intro **Condition** MIST Complaint ROS Pt. Intake Free Text

S

Original Condition
None

Date Range
4/16/2020 to Present

Created By
Tonya Shiltz

O

Description of Condition
Low Back Pain from Shoveling

A

P

Referring Provider **Select Remove 17**
Name: Dr Felix DaCat
Phone:
Fax:
Email: cats@cats.com
NPI: 89898989

Ordering Provider **Select Remove 17**
Name: None
Phone:
Fax:
Email:
NPI:

Name of Referring Provider or Outside Source **17**
Referring Provider

Create New Condition

Close Dock Save Save & Sign Back Next Preview Dashboard

SOAP – Condition Tab

Referring Provider (HCFA box 17)

On the Condition Case Tab within the SOAP is a box titled “Referring Provider.” Here you can enter the information for a provider that referred the patient to you, if applicable. This is box 17 on the CMS-1500 HCFA.

To add a referring provider, click the green “Select” button. Use the “Remove” button to remove the referring provide.

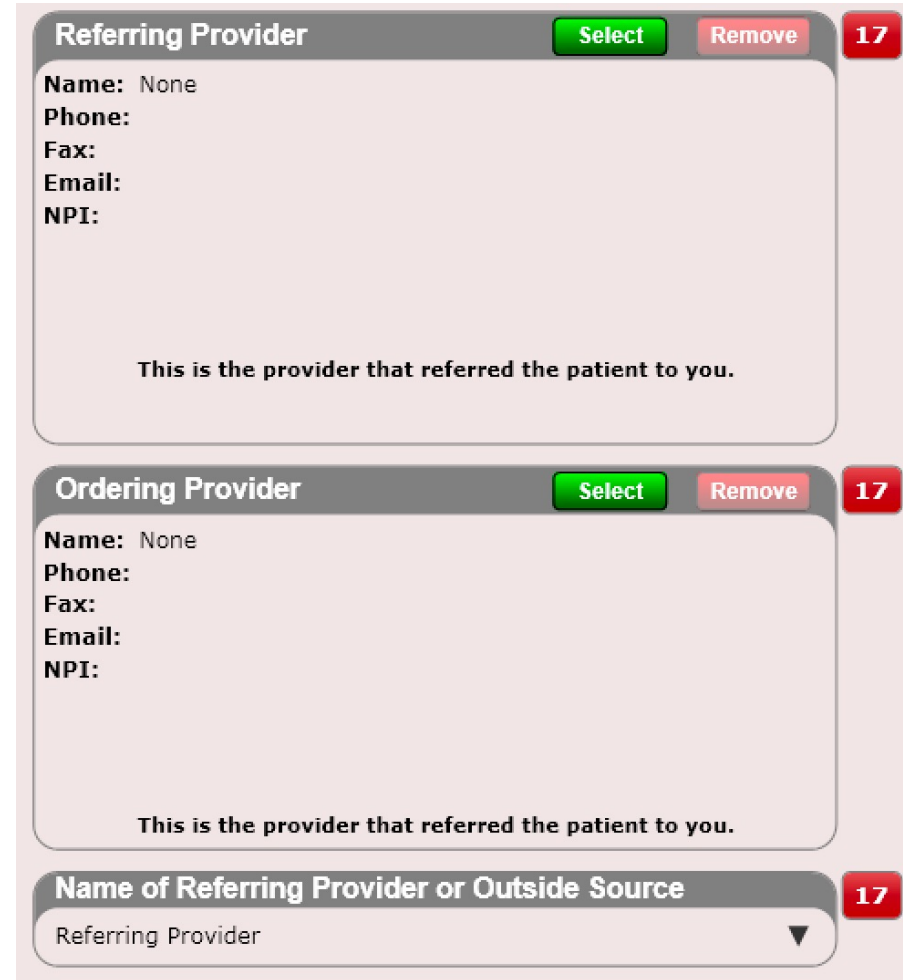
You can create a provider here on the fly or use the “Outside Providers” app in Settings to create referring providers as well.



Settings

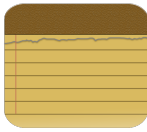


Outside Providers



The screenshot displays the SOAP interface for the Condition Tab. It features two main sections for provider information, each with a green 'Select' button, a red 'Remove' button, and a red '17' indicator in the top right corner. The first section is titled 'Referring Provider' and contains fields for Name, Phone, Fax, Email, and NPI. Below these fields is the text 'This is the provider that referred the patient to you.' The second section is titled 'Ordering Provider' and contains the same fields and text. At the bottom, there is a dropdown menu labeled 'Name of Referring Provider or Outside Source' with 'Referring Provider' selected and a red '17' indicator.

Note: The selected referring provider will be copied over from visit to visit. This way you do not have to select the referring provider multiple times.



SOAP – Condition Tab

Referring Provider

The referring provider populates HCFA boxes 17, 17a and 17b.

This box represents the provider that referred the patient TO YOU.

Prefix	First 17	Last 17	MI	Suffix
	Jon	Maxwell		MD
Address		City	State Abbr.	Zip
1234 Madison Ave		Davenport	IA	78767
Email Address				
Phone 1	Type	Phone 2	Type	Fax
555-434-6655	Mobile ▼		Home ▼	
Qualifier 17a				
Number 17a		NPI 17b		
		7676767676		

SOAP – MIST Tab

MIST

Mist is an acronym for:

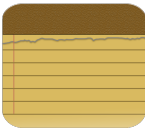
- **M**: Medications & Allergies
- **I**: Illnesses (problems)
- **S**: Surgeries
- **T**: Traumas

The MIST Tab allows the provider to review or modify the patient's med list, allergies, problems, surgeries and traumas.

If an item, you are looking for is not in the list you can edit the master list using the "Edit Master List" button.

The screenshot shows the MIST Tab interface for a patient named Brady E. Albery. The patient's information includes ALBBR000, DOB: 12/16/1979, Age: 41, and Insurance: BCBS. The interface is divided into five columns: Medications, Allergies, Problems, Surgeries, and Traumas. Each column has a search bar and a 'Show Active Only' checkbox. Below the search bars, there are buttons for 'None Currently Prescribed', 'No Known Drug Allergies', 'No Known Problems', 'No History of Surgeries', and 'No History of Traumas'. The Medications column lists Cetrizine Oral Tablet [Zyrtec], Oxytetracycline / Polymyxin B Ophthalmic Ointment [Terramycin with Polymyxin B Sulfate], Viagra 50 MG Oral Tablet, and Meclizine Oral Tablet. The Allergies column lists Aspirin, Allergy to dairy product, Allergy to fruit, Allergy to eggs, Allergy to wool, and Allergy to peanuts. The Problems column lists Cerebrovascular accident (disorder), Pulmonary emphysema (disorder), Irritable bowel syndrome (disorder), and Primary fibromyalgia syndrome (disorder). The Surgeries column lists Hernia of abdominal wall (disorder). The Traumas column lists No known traumas. At the bottom of each column, there are buttons for 'Edit Master [Category] List', 'Edit', 'Delete', and 'Reviewed Today'. The interface also includes a 'Close' button, a 'Dock' button, a 'Save' button, a 'Save & Sign' button, a 'Back' button, a 'Next' button, a 'Preview' button, and a 'Dashboard' button.

SOAP – MIST Tab

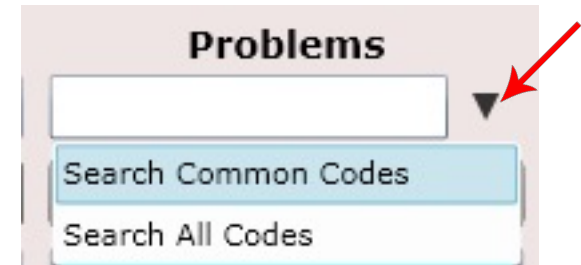


Search All or Common Codes

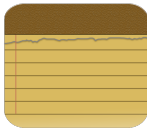
Three of the lists have a black drop-down arrow (see to the right). Problems, Surgeries and Traumas by default ONLY search **COMMON CODES**. This is because there are SO MANY CODES!!!

If the item, you are looking for is not being found you may need to select the black drop-down arrow and select “**Search All Codes**”. This will then search all codes.

If the item, you are looking for is still not found you can simply add it to the master list by selecting the “Edit Master List” button at the bottom of the list box.



SOAP – MIST Tab



SOAP Note – Brady E Albery ALBBR000 DOB: 12/16/1979 Age: 41 Ins: BCBS CPT copyright 2020 American Medical Association. All rights reserved.

Visit: 12/17/2020
13:00 PM

Intro

Condition

MIST

Complaint

ROS

Pt. Intake

Free Text

This data is not per visit. Any edits will affect all future and past visits.

Medications

Show Active Only

Allergies

Show Active Only

Problems

Show Active Only

Surgeries

Traumas

None Currently Prescribed

No Known Drug Allergies

No Known Problems

No History of Surgeries

No History of Traumas

Cetirizine Oral Tablet [Zyrtec]
367925 (RxNorm)
Last Reviewed:

Oxytetracycline / Polymyxin B Ophthalmic Ointment [Terramycin with Polymyxin B Sulfate]
94283 (RxNorm)
Last Reviewed:

Viagra 50 MG Oral Tablet
213270 (RxNorm)
Last Reviewed: Feb 18, 2020

Meclizine Oral Tablet

Aspirin
1191 (RxNorm)
Last Reviewed: Oct 24, 20

Allergy to dairy product
425525006 (SNOMED)
Last Reviewed: Oct 24, 20

Allergy to fruit
91932007 (SNOMED)
Last Reviewed: Oct 24, 20

Allergy to eggs
91930004 (SNOMED)
Last Reviewed: Oct 24, 20

Allergy to wool
425605001 (SNOMED)
Last Reviewed: Oct 24, 20

Allergy to peanuts

Cerebrovascular accident (disorder)
230690007 (SNOMED)
Last Reviewed: Oct 24, 20

Pulmonary emphysema (disorder)
87433001 (SNOMED)
Last Reviewed: Oct 24, 20

Irritable bowel syndrome (disorder)
10743008 (SNOMED)
Last Reviewed:

Primary fibromyalgia syndrome (disorder)

Hernia of abdominal wall (disorder)
128545000 (SNOMED)
Last Reviewed: Jun 24, 2020

No known traumas
Last Reviewed: Jun 24, 2020

Edit Master Medications List

Edit Master Allergies List

Edit Master Problems List

Edit Master Surgeries List

Edit Master Traumas List

Edit

Delete

Edit

Delete

Edit

Delete

Edit

Delete

Edit

Delete

Document Medications

Reviewed Today

Reviewed Today

Reviewed Today

Reviewed Today

Close

Dock

Save

Save & Sign

Back

Next

Preview

Dashboard

SOAP – Complaint Tab

The complaint tab is a great way for managing patient complaints. You can have multiple open complaints and set the chief complaint by using the “Make Primary Complaint” button”.

To create a complaint, click the “New Complaint” button.



Power Tip: Complaints can be created and re-evaluated at the Patient Kiosk.

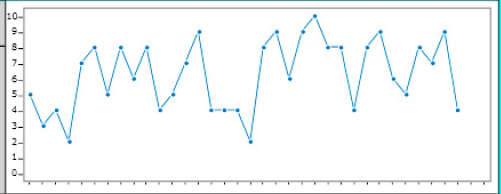
SOAP Note - Brady E Albery ALBBR000 DOB: 12/16/1979 Age: 41 Ins: BCBS CPT copyright 2020 American Medical Association. All rights reserved. Visit: 12/17/2020 13:00 PM

Intro Condition MIST **Complaint** ROS Pt. Intake Free Text

S

Open Complaint - Elbow - Right - Last Evaluated: 12/17/2020
Decreased ROM, Edema, Hypermobility

Frequency: **Qualities:** Numb, Stiff, Swelling, Dull, and spasm
Duration: **Aggravating Factors:** Lifting, Pushing, Standing, Jogging, Pulling, and Running
Onset: **Relieving Factors:** Ice, Heat, Wraps, and Walking
Intensity: **ADLs Affected:**
Mechanism Of Injury: Fell on a nail.
Radiates to:
Severity: 4 of 10 [Better]
Notes: Fell off ladder. Hit right elbow on a rock.



O

Open Complaint - Shoulder - Right - Last Evaluated: 12/17/2020
Edema, Pain

Frequency: Constant (76-100%) **Qualities:** Aching, Radiating, Stabbing, Stiff, spasm, and Spasming
Duration: Frequent **Aggravating Factors:** Jogging, Nothing, Pulling, Squatting, Sneezing, and Sitting
Onset: **Relieving Factors:** Ice, Rest, Stretching, Walking, and Wraps
Intensity: **ADLs Affected:**
Mechanism Of Injury:
Radiates to:
Severity: 6 of 10 [Worse]
Notes:



A

Open Complaint - Head - Left - Dizziness Last Evaluated: 12/17/2020

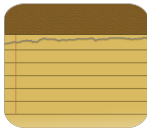
Frequency: Constant (76-100%) **Qualities:** Aching, and Burning
Duration: Frequent **Aggravating Factors:** Driving, and Exercise
Onset: 11/30/2020 **Relieving Factors:** Nothing, Stretching, Walking, and Massage
Intensity: Moderate **ADLs Affected:**
Mechanism Of Injury: Lifting
Radiates to:
Severity: Pain 7 of 10 [Worse]
Notes:



P

New Complaint Edit Complaint Re-Evaluate Complaint Delete Complaint Make Primary Complaint Clear Primary Complaint

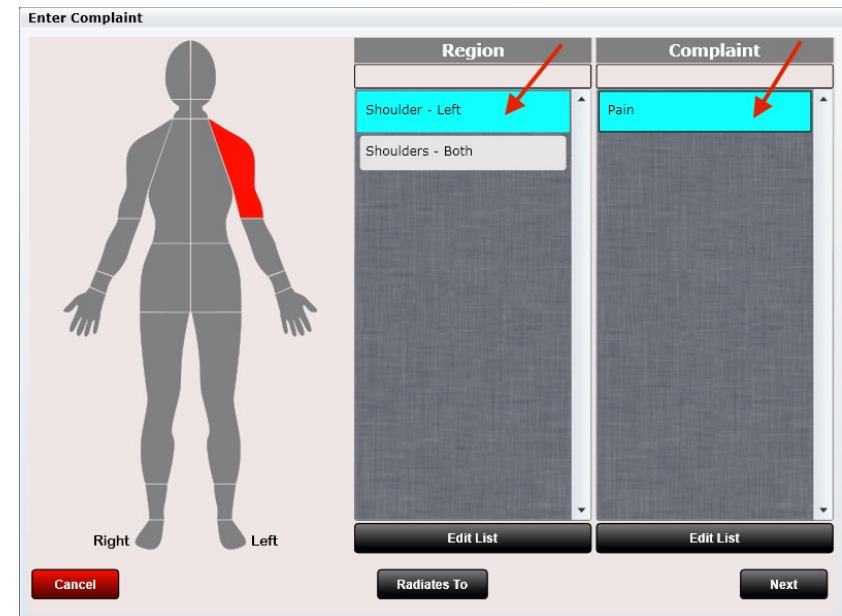
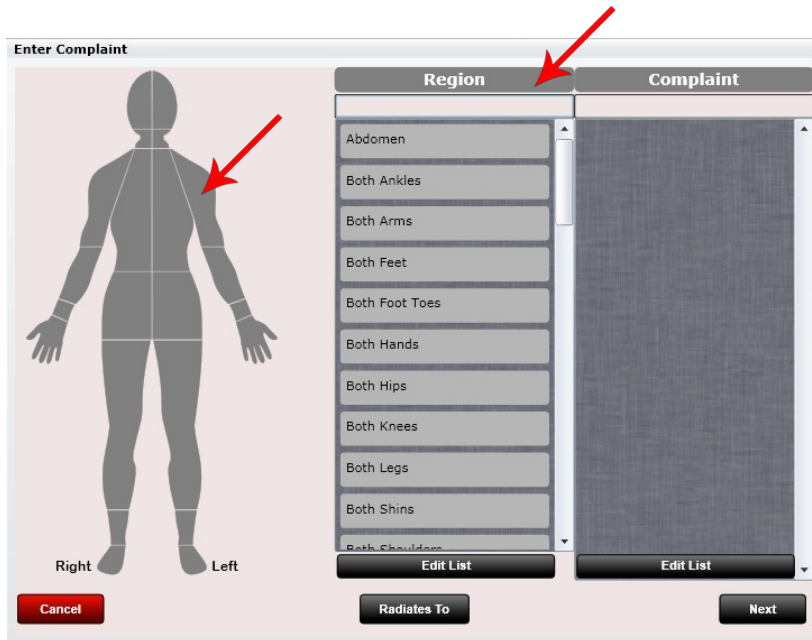
Close Dock Save Save & Sign Back Next Preview Dashboard



SOAP – Complaint Tab

Next select a region by tapping a body segment or selecting a region from the “Region” list box.

Here I have selected “Left Shoulder” and then in the complaints list I selected “Pain”. I now have successfully created a complaint called “Left Shoulder – Pain”.



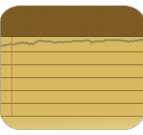
Power Tip: You can customize body regions and complaints in Settings/Complaints



Settings



Complaints

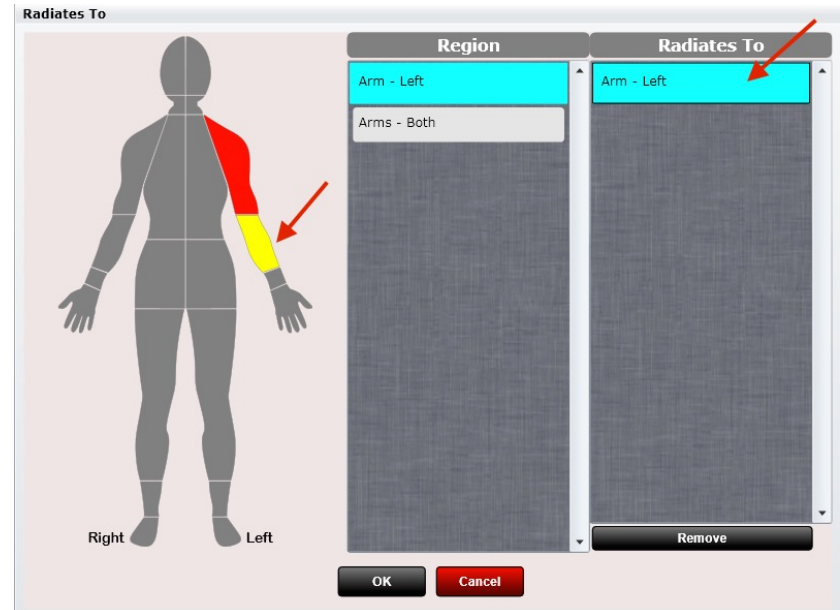
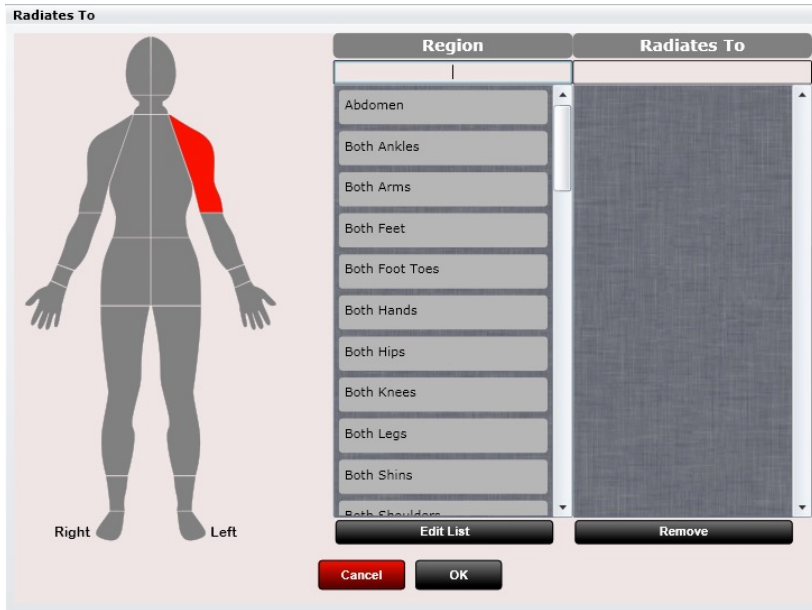


SOAP – Complaint Tab

Next, if applicable, click the “Radiates To” button. Select a body segment or region from the “Region” list. It will highlight yellow on the body.



Here I have selected “radiates to” Left Arm.



After clicking “OK” you will now see a Next button. Click “Next”.



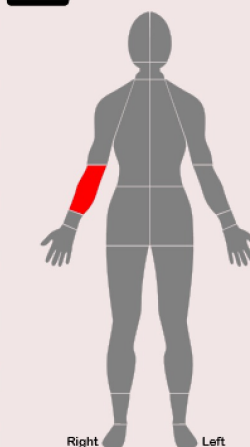
SOAP – Complaint Tab

Now that the complaint has been created it's time to add details about the complaint. Use the options on this screen to record Condition, Frequency, Duration, Onset, Intensity, Notes, Mechanism of Injury, Intensity, Quality, Aggravating Factors, Relieving Factors and ADLs Affected.

SOAP Note - Brady E Albery ALBBR000 DOB: 12/16/1979 Age: 41 Ins: BCBS CPT copyright 2020 American Medical Association. All rights reserved.

Complaint-Elbow - Right Decreased ROM, Edema, Hypermobility - Brady E Albery ALBBR000 DOB: 12/16/1979 Age: 41 INS: BCBS

Edit



Radiates to **Edit**

Condition

Same

Better

Worse

Frequency

Times per **X** Duration **X**

Onset **X** Intensity **X**

Notes

Fell off ladder. Hit right elbow on a rock.

Mechanism of Injury **Edit**

X Fell on a nail.

Intensity Scale **Clear**

Decreased ROM, Edema, Hypermobility

0 1 2 3 4 5 6 7 8 9 10

Quality **Edit**

Numb, Stiff, Swelling, Dull, and spasm

Aggravating Factors **Edit**

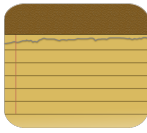
Lifting, Pushing, Standing, Jogging, Pulling, and Running

Relieving Factors **Edit**

Ice, Heat, Wraps, and Walking

ADLs Affected **Edit**

Cancel Open Complaint Close Complaint Finish



SOAP – Complaint Tab

Quality, Aggravating Factors and Relieving Factors

Clicking the “Edit” button on Quality, Aggravating Factors or Relieving Factors will open a dialog allowing you to make your selections. This grid is completely customizable using the “Edit List” and “Arrange Grid” buttons below.

Once you have finished evaluating your complaint click “Finish” in the bottom right corner.



SOAP Note - Brady E Albery ALBRR000 DOB: 12/16/1979 Age: 41 Ins: BCBS
Complaint-Elbow - Right Decreased ROM, Edema, Hypermobility - Brady E Albery ALBRR000 DOB: 12/16/1979 Age: 41 INS: BCBS

Condition	Frequency	Duration
	Times per	X

Complaint Qualities

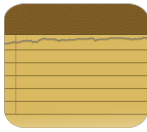
Complaint Qualities

- Numb
- Stiff
- Swelling
- Dull
- spasm

Aching	Burning	Cramping	Deep	Dull
Numb	Radiating	Sharp	Shooting	Sore
Stabbing	Stiff	Swelling	Tight	Tingling
Throbbing	spasm	Spasming		

Buttons: ~~X~~ ~~ALL~~ Edit List Arrange Grid Finish

Buttons: Cancel Open Complaint Close Complaint Finish



SOAP – Complaint Tab

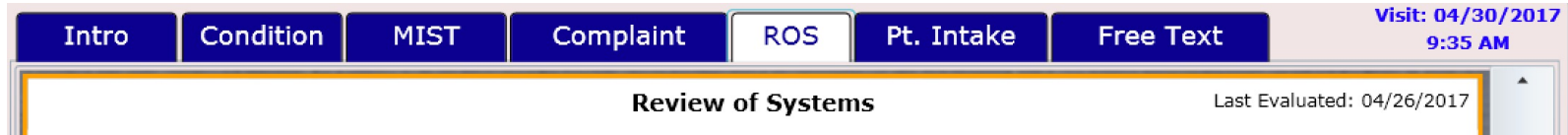
After clicking “Finish” you will now have a complaint in your list. You will notice a graph on the right side showing the Intensity Scale. On subsequent visits you can highlight the complaint and click “Re-Evaluate Complaint”. Everything copies over visit to visit so you may only consider changing a number on your Intensity Scale, for example.

Open Complaint - Head - Left - Dizziness Last Evaluated: 12/14/2020	
Frequency: Constant (76-100%) Duration: Frequent Onset: 11/30/2020 Intensity: Moderate Mechanism Of Injury: Lifting Radiates to: Severity: Pain 2 of 10 [Better]	Qualities: Aching, and Burning Aggravating Factors: Driving, and Exercise Relieving Factors: Nothing ADLs Affected:
Notes:	

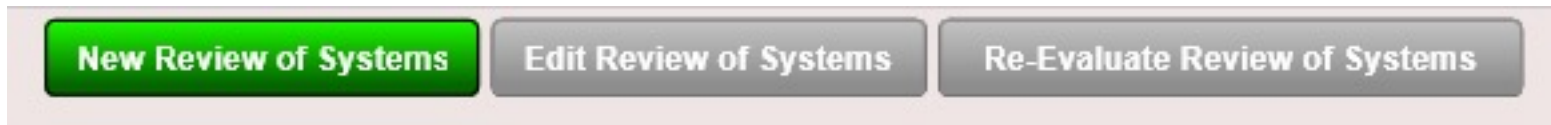
New Complaint **Edit Complaint** **Re-Evaluate Complaint** **Delete Complaint** **Make Primary Complaint** **Clear Primary Complaint**

SOAP – ROS Tab

This is an amazingly FAST way to do a Review of Systems as well as do a re-evaluation on a patient for a ROS. You can customize your ROS list in Settings/ROS.



You may add a new Review of System, or Edit and Re-evaluate existing Review of Systems



Power Tip: You can have your patient populate the Review of Systems with the Patient Kiosk/Online Intake.

SOAP – ROS Tab

Review of Systems

Categories	Have or has had the following
	Denies All
Cardiovascular/Respiratory	Chest pain, pressure or discomfort <input type="button" value="Have"/> <input type="button" value="Had"/> <input type="button" value="No"/> <input type="text"/>
Nose	Cold hands/feet <input type="button" value="Have"/> <input type="button" value="Had"/> <input type="button" value="No"/> <input type="text"/>
Eyes	Coughing up blood (hemoptysis) <input type="button" value="Have"/> <input type="button" value="Had"/> <input type="button" value="No"/> <input type="text"/>
Ears	Difficulty breathing <input type="button" value="Have"/> <input type="button" value="Had"/> <input type="button" value="No"/> <input type="text"/>
Head/Neck	Dizziness/lightheaded <input type="button" value="Have"/> <input type="button" value="Had"/> <input type="button" value="No"/> <input type="text"/>
Gastrointestinal	Fainting <input type="button" value="Have"/> <input type="button" value="Had"/> <input type="button" value="No"/> <input type="text"/>
Urinary	Irregular heartbeat <input type="button" value="Have"/> <input type="button" value="Had"/> <input type="button" value="No"/> <input type="text"/>
Throat/Mouth	Palpitations <input type="button" value="Have"/> <input type="button" value="Had"/> <input type="button" value="No"/> <input type="text"/>
Endocrine	Persistent coughing <input type="button" value="Have"/> <input type="button" value="Had"/> <input type="button" value="No"/> <input type="text"/>
Musculoskeletal	Shortness of breath <input type="button" value="Have"/> <input type="button" value="Had"/> <input type="button" value="No"/> <input type="text"/>
Vascular/Hematologic	Sudden awakening with a shortness of breath (paroxysmal nocturnal dyspnea) <input type="button" value="Have"/> <input type="button" value="Had"/> <input type="button" value="No"/> <input type="text"/>
Neurologic	
Psychiatric	
Males Only	
Test - Male	

Navigation: Left and right arrows on the category list; Up and down arrows on the right side of the main form.

Buttons: Cancel, Clear Items for Selected Category, Clear Items for All Categories, Finish

Annotation: Click the left or right arrow to move up or down the category list.

SOAP – ROS Tab

SOAP Note - Chad A Thompson TherapyTHOCH DOB: 12/12/1957 Age: 59 INS: BLUE CROSS CPT copyright 2013 American Medical Association. All rights reserved. Visit: 04/30/2017 9:35 AM

Intro **Condition** **MIST** **Complaint** **ROS** **Pt. Intake** **Free Text**

S

Review of Systems

Last Evaluated: 04/26/2017

<u>Musculoskeletal</u>	<u>Cardiovascular/Respiratory</u>	<u>Head/Neck</u>	<u>Ears</u>
Have - Arm/hand pain	Had - Chest pain, pressure or discomfort	Have - Head injury	Have - Decreased hearing
Have - Back pain		Had - Jaw clicks	Had - Drainage
No - Feet/leg pain	Have - Cold hands/feet	No - Lumps	No - Earache
Had - Hip	Had - Coughing up blood (hemoptysis)	Have - Tooth problems	Had - Ear infections
Have - Knee Left knee hurts. Worse in the evening.	Had - Difficulty breathing	No - Trouble swallowing	Have - Poor hearing
No - Lower back pain	Had - Dizziness/lightheaded		Had - Ringing in ears (tinnitus)
No - Mid back pain			
No - Muscle or joint pain			
Have - Neck pain			
Have - Redness of joints			

<u>Nose</u>
Had - Blocked sinuses
Have - Discharge
Had - Excessive mucus
Have - Hay fever

O

A

P

New Review of Systems **Edit Review of Systems** **Re-Evaluate Review of Systems**

Close **Dock** **Save** **Save & Sign** **Back** **Next** **Dashboard**

SOAP – Pt. Intake Tab

SOAP Note Chad A Thompson DOB: 12/12/1957 Age: 59 Ins: Cash CPT copyright 2013 American Medical Association. All rights reserved. Visit: 04/25/2017 18:25 PM

Intro Condition MIST Complaint ROS Pt. Intake Free Text

S

Kiosk - Intake

Where did the accident occur?
The accident occurred at a commercial location.

The injury was a result of?
The injury was a result of an industrial disease (asbestosis; mesothelioma; etc.).

Did anyone witness the accident?
One person witnessed the accident.

How often have you been receiving treatment?
He has been receiving treatment daily.

If work related, name, address and details of your employer
NA

A

What areas of your body experienced injury?
Chad experienced injury on his head and knee (left).

Who did you report the accident to?
Chad reported the accident to nobody.

P

Did you lose consciousness?
He lost consciousness.

Did you retain an attorney?
Chad did retain an attorney.

Close Dock Save Save & Sign Back Next Dashboard

SOAP – Pt. Intake Tab

The Patient Intake section is populated by your patient at the Kiosk. You can customize your own intake questions in Settings/Kiosk under the Additional Intake Questions tab.

The Paper SOAP Note will display the responses to these questions. This makes it VERY EFFICIENT to collect an abundance of data on your patient with minimal effort on your part.

SOAP Note - Brady E Albery ALBBR000 DOB: 12/16/1979 Age: 41 Ins: BCBS CPT copyright 2020 American Medical Association. All rights reserved. Visit: 12/15/2020 10:00 AM

Intro Condition MIST Complaint ROS Pt. Intake Free Text

S

Kiosk - Intake

When did the accident occur?
Brady was involved in a personal injury accident on 11/03/2020.

What time of day did the accident occur?
The accident occurred in the evening.

Where did the accident occur?
The accident occurred at a medical facility.

The injury was a result of?
The injury was a result of a dental accident.

What areas of your body experienced injury?
Brady experienced injury on his jaw, hand (left) and shin (right).

Did you lose consciousness?
He did not lose consciousness.

Did anyone witness the accident?
One person witnessed the accident.

Who did you report the accident to?
Brady reported the accident to nobody.

Did you retain an attorney?
Brady did not retain an attorney.

O

A

P

Edit Intake Refresh

Close Dock Save Save & Sign Back Next Preview Dashboard

If necessary, click “Edit Intake” to edit any of the intake questions.

SOAP - Subjective – Macros/Free Text

Macros/Free Text

ChiroSpring uses a free text data entry box in addition to customized macros to help the provider quickly write a detailed and accurate SOAP note. Each of the four tabs (S, O, A & P) has a “Free Text” macros section.

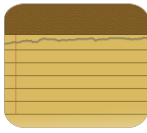
The more familiar you become with the macros the more efficient you will be at writing SOAPS. Every macro has been designed, written, and tested by chiropractors.

Clicking on a macro will either type text into the box above or will launch a dialog box. The dialog box is shown on the next page of this manual.

The screenshot displays the ChiroSpring SOAP Note interface for patient Brady E Albery. The interface includes a header with patient information (ALBBR000, DOB: 12/16/1979, Age: 41, Ins: BCBS) and a visit date of 12/15/2020 at 10:00 AM. The 'Free Text' tab is selected, showing a text entry box with the following content: "Brady entered our office today with a chief complaint of sinus pain. Brady states the symptoms started three days ago. He states coughing makes the problem worse. He describes the pain as numb, sharp and shooting. The pain travels to his cranium (headache) and right cranium (headache). On a scale of 0 to 10, with 0 being no pain at all and 10 being the worst pain imaginable, he rates his pain as a 6." Below the text box is a grid of macros, including "Personal Injury (Form)", "New Patient Intake (Form)", "Activities of Daily Living Affected", "Visual Analog Pain Scale", "Organ/Non-Skeletal Complaint", "Muscular Subjective - Upper Extremity/Cervical/Thoracic Spine", "Muscular Subjective - Lower Extremity/Lumbar/Sacrum/Pelvis", "Outcome Assessment", "Leveled Exams (E/M) - History Section", "Auto Accident (Form)", "Asymptomatic Wellness Visit", "Improved Since Last Visit", "Same Since Last Visit", "Worse Since Last Visit", and "OPQRST". The interface also features a search bar, a "Clear All" button, and a bottom navigation bar with buttons for "Close", "Dock", "Save", "Save & Sign", "Back", "Next", "Preview", and "Dashboard".

Power Tip: In Settings/Users you can determine if you want the last free text portion of your SOAP to copy over from the previous visit. This is great to review what you did last visit and often only a few slight changes are necessary. After reviewing your text from last visit simply click the “Clear All” button to erase all text.

The dialog box asks "Copy Last SOAP Free Text to new SOAP?" and has a "Yes" button with a dropdown arrow.



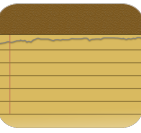
SOAP - Subjective – Macros/Free Text

Macros/Free Text

Here is an example of the dialog box that opens after clicking on a SOAP macro. All dialogs follow the same rules. There is a question at the top with possible answers below. Select your answers and you will see your SOAP note being written in real time in the text box at the bottom of the dialog. Once you have made your selections, you are free to EDIT the text at the bottom of the dialog box. When finished, click “Finish. Use the left or right arrows to go forward or back. Many buttons will have a series of questions so you will most likely click “forward arrow” until you cannot go forward any further. When the “Forward Arrow” button is greyed out you have then gone through the entire sequence of questions and should then click “Finish.”

When the dialog closes it will paste the text you just wrote into your SOAP note into the large text box above the macros. If you need to make any edits you can still do so in this “Free Text” box prior to selecting “Finish”.

The screenshot shows a dialog box with a blue header containing the question "When did the accident occur?". Below the header is a list of ten options: "today", "1 day ago", "2 days ago", "3 days ago", "4 days ago", "5 days ago", "6 days ago", "1 week ago", and "2 weeks ago". Each option is in a separate text box. To the right of the list is a vertical scrollbar. Below the list are two large, empty text boxes for free text entry. At the bottom of the dialog are two buttons: a red "Cancel" button and a green "Finish" button. A red arrow points to a black right-pointing arrow button on the right side of the dialog, which is used for navigating between questions.



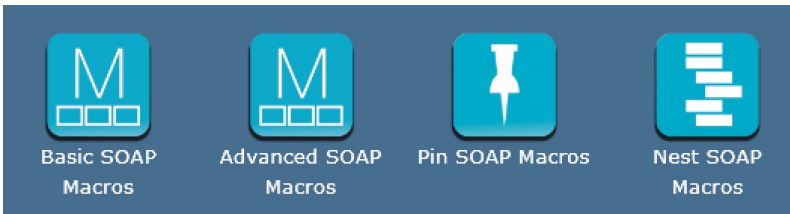
SOAP - Subjective – Macros/Free Text

Macros/Free Text

Some questions will allow only one selection while others, such as the one pictured to the right, will allow multiple selections.

Power Tip: If there is a question you do not want to answer simply skip it by clicking the “Forward Arrow”.

Note: You can create your own SOAP Macros, arrange your SOAP Macro grid or nest your created macros in Settings/SOAP Macros.



You can even Export or Import macros (share with your colleagues)! This is done in the Pin SOAP Macros app.

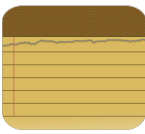
Where is the problem located?

- TMJ
- left TMJ
- right TMJ
- sinus
- cranial (headache)
- left cranial (headache)
- right cranial (headache)
- cervical
- left upper cervical

Chad entered our office today with a chief complaint of right TMJ pain.

Chad entered our office today with a chief complaint of right TMJ pain.

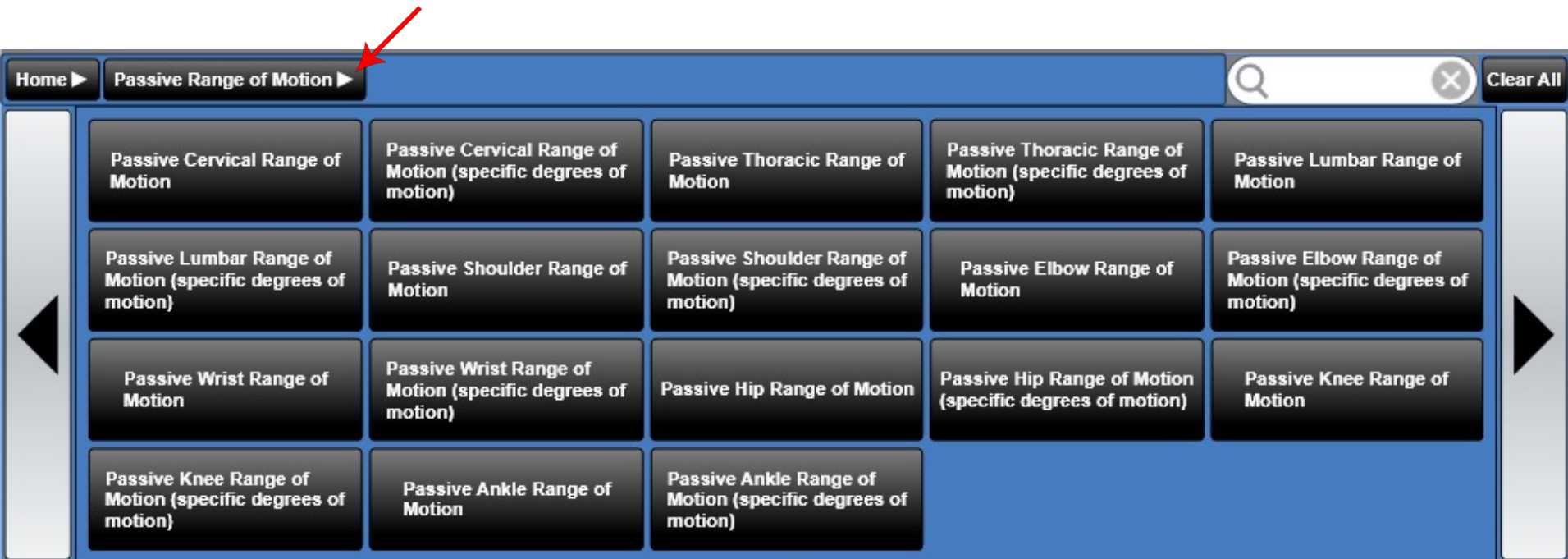
Cancel Finish



SOAP - Macros

Breadcrumbs

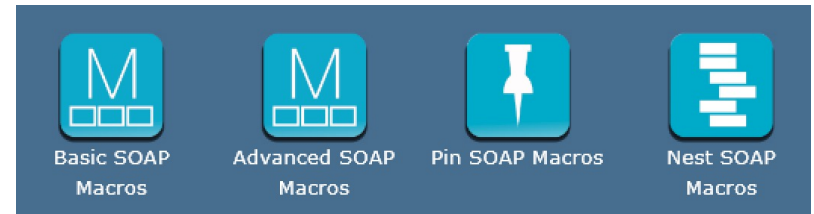
ChiroSpring uses a feature called “Breadcrumbs” to help you navigate within the buttons. Sometimes clicking on a button will not paste text or open a dialog box. Instead, it will reveal a new panel of buttons. You are now one layer “deep” into the buttons. To keep track of where you are at within the buttons there is a top button menu commonly referred to as a “breadcrumb” menu. “Home” will take you back to the main grid of buttons and in this example the breadcrumb “Passive Range of Motion” will take you back to that grid of buttons.



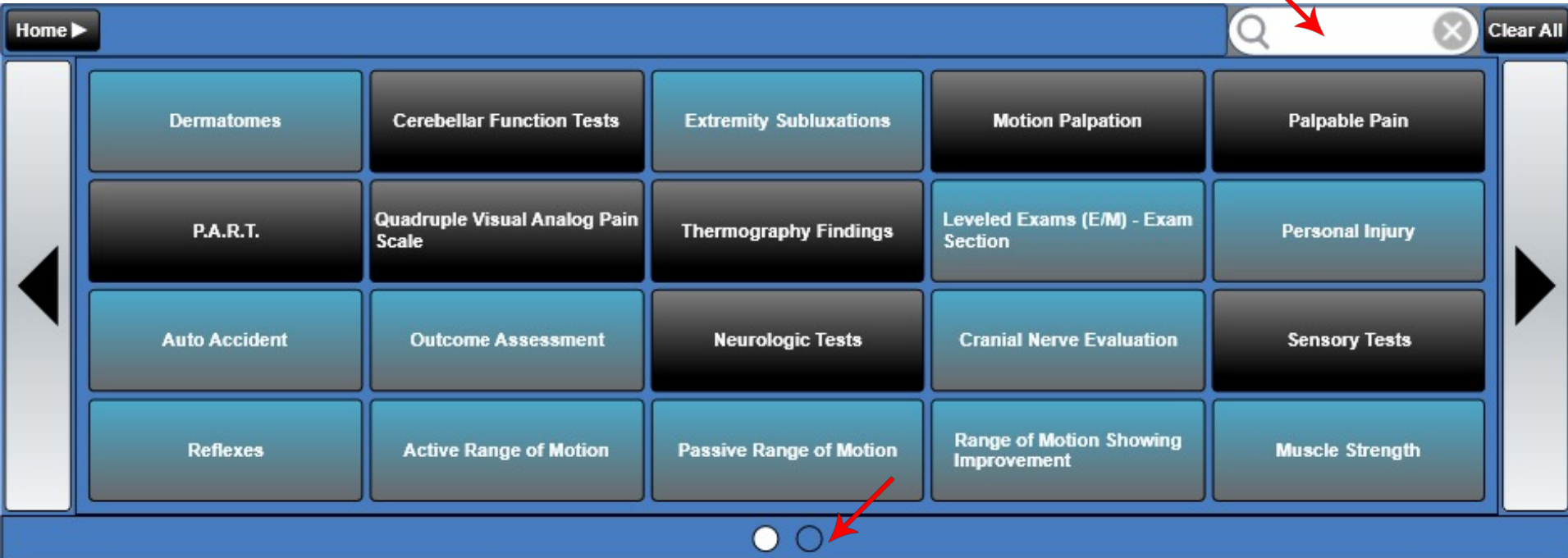
SOAP - Macros

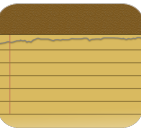
The SOAP macros use the same navigation “dot” control as seen on the front desk. There are left and right navigation arrows that will take you to another page of buttons. Below the macros are a series of circles or “dots.” The number of dots indicates the number of pages, and the white dot indicates the active page.

Power Tip: You can create custom macros in Settings/SOAP Macros



Power Tip: If you have lots of macros use the search box here to filter your list.





SOAP - Objective – Adjustments Tab

Adjustments

Here you can quickly record a spinal or extremity adjustment. Mark areas to avoid in red and write permanent note reminders (not part of the SOAP) so you will see them on subsequent visits.

In Settings you can create adjusting techniques. For each technique you can then create your own listings and even set which technique you want as your default (selected when you open the SOAP).



Settings



Extremities



Spine

SOAP Note Murr Bishop DOB: 06/02/2016 Age: 0 Ins: Cash CPT copyright 2013 American Medical Association. All rights reserved. Visit: 07/05/2016 1:15 PM

Adjustments Acupuncture Vitals Labs Immunizations Free Text

S

O

A

P

Avoid These Areas

Extremities Edit

Spine Edit

Occ C1 C2 C3 C4 C5 C6 C7 T1 T2 T3 T4 T5 T6 T7 T8 T9 T10 T11 T12 L1 L2 L3 L4 L5 P S C

Ribs Ribs

Right Left

View Extremity History View Spine History

Adjusting Style/General Note (not included on SOAP note)

Extremities - Adjusted These Areas

Extremity Note (associated with this visit only)

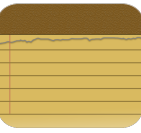
Spine - Adjusted These Areas

Spine Note (associated with this visit only)

Close Dock Save Save & Sign Back Next Dashboard

Power Tip: Edit the spine or body by clicking on the spine or body (instead of clicking the “Edit” button).

SOAP – Objective – Adjustments Tab



SOAP Note Chad Thompson DOB: 07/30/1966 Age: 48 Ins: Blue Cross/Medicaid

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Adjustments

Vitals

Labs

Immunizations

Free Text

Avoid These Areas

Tibia-Distal - Right,

Avoid These Areas

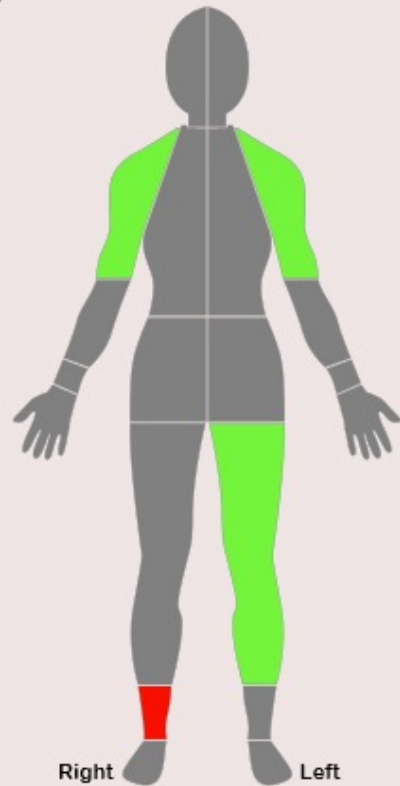
L3, L4,

Adjusting Style/General Note (not included on SOAP note)

Spinal fusion L3-L4

Extremities

Edit

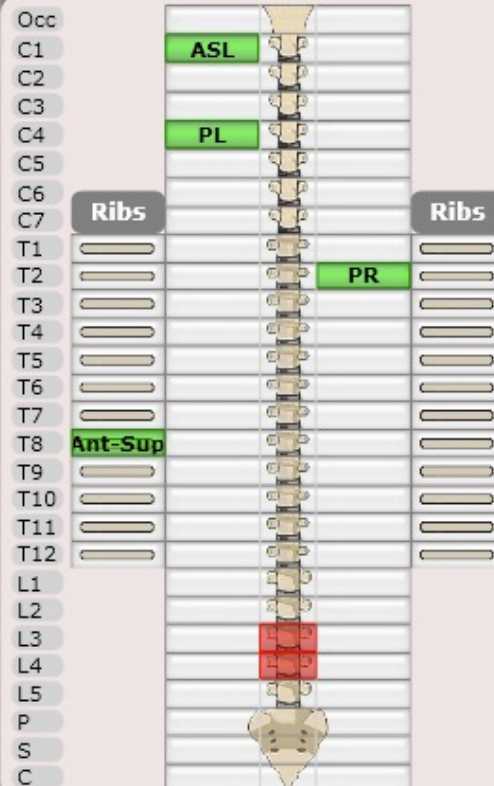


Right Left

View Extremity History

Spine

Edit



View Spine History

Extremities - Adjusted These Areas

Acromioclavicular Joint - Left, Clavicle-Posterior Superior-Seated, Acromioclavicular Joint - Right, TEST Knee - Left, Medial Joint,

Extremity Note (associated with this visit only)

Spine - Adjusted These Areas

C1-Left, ASL, C4-Left, PL, T2-Right, PR, Rib8-Left, Ant-Sup,

Spine Note (associated with this visit only)

Close

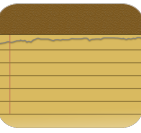
Dock

Save

Save & Sign

Back

Next



SOAP - Objective – Adjustments Tab

Spine Adjustments

Shown here is the Spine after selecting the “Edit” button. You are able to click anywhere on the spine or in the grey section to the right or left of the spine. Doing so will open a menu allowing you to select the listing, mark the area as “avoid”, or clear the listing out altogether.

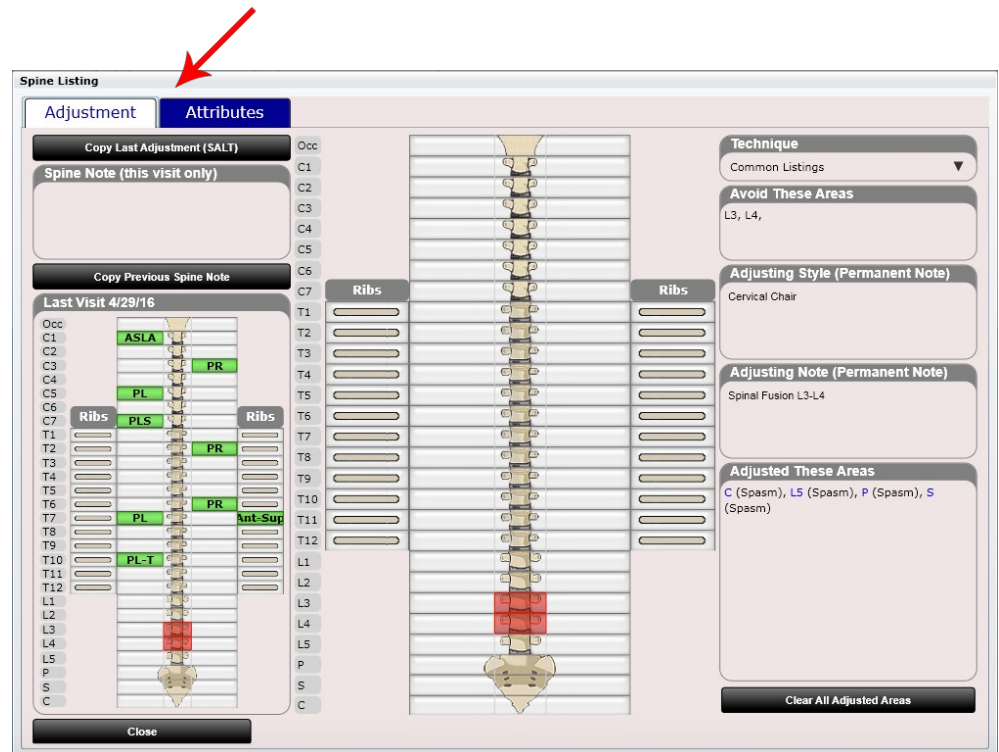
Areas marked “Avoid” will both highlight in red and will also be written as text in the “Avoid These Areas” box to the right of the spine.

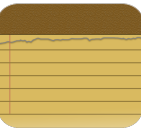
If you wish to copy the spine from the last visit, click the “Copy Last Adjustment (SALT) button. This will copy all of the listings from the last adjustment to this adjustment. SALT stands for “Same As Last Time.”

Clicking the “Clear All Adjusted Areas” will clear everything off of the spine except for the red areas to avoid. To clear those, you will need to click on them and then select the “Clear” option.

Note: There are two tabs on this screen

- Adjustment – Record adjustment listings
- Attributes – Record things such as pain, edema, etc.





SOAP - Objective – Adjustments Tab

Spine Listing - Brady E Albery

Adjustment | **Attributes**

Copy Last Adjustment (SALT)

Spine Note (this visit only)

Copy Previous Spine Note

Last Visit 12/14/20

Close

Occ			
C1			
C2			
C3			
C4	PL		
C5			
C6			
C7			
T1			
T2			
T3			PR
T4			
T5			
T6			
T7			
T8	Ant-Sup		
T9			
T10			
T11			
T12			
L1			
L2			
L3			
L4			
L5			
P			
S			
S			
C			

Leg Check: **Even** | **Left Short** | **Right Short**

Technique
Common listings

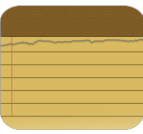
Avoid These Areas
L4, L5, L3, L2,

Adjusting Style (Permanent Note) ?

Adjusting Note (Permanent Note) ?
Spinal Fusion - L2-L5

Adjusted These Areas
Technique: Common listings: C4-Left, PL, T3-Right, PR, Rib8-Left, Ant-Sup
Coccyx (Spasm, Restrict Motion) , C4 (Pain, Asymmetry) , Pelvis (Spasm, Restrict Motion) , Sacrum (Spasm, Restrict Motion) , T3 (Pain, Asymmetry)

Clear All Adjusted Areas



SOAP - Objective – Adjustments Tab

Adjustments Tab

Note the various boxes that surround the spine

- **Technique** – Select from several adjusting techniques
- **Avoid These Areas** – This information is populated when you click a segment of the spine and select “AVOID”
- **Adjusting Style (permanent note)** – this field is editable and will be copied over every appointment. It is therefore listed as a permanent note
- **Adjusting Note (permanent note)** – this is a permanent note box to type anything about the patient’s spine you want visible during every adjustment.
- **Adjusted These Areas** – This is automatically filled out as you select the areas of the spine you adjusted
- **Spine Note** – This note is not permanent and will only be shown for this visit
- **Copy Last Adjustment (SALT) button** – Click this to copy the adjustment from last visit
- **Clear All Adjusted Areas button** – Click this button to clear all adjusted areas. Note, this will not clear red AVOID areas of the spine. These will need to be manually cleared by clicking on them.

The screenshot displays the Adjustments Tab interface with the following sections:

- Technique**: A dropdown menu currently showing "Common Listings".
- Avoid These Areas**: A text input field containing "L3, L4,".
- Adjusting Style (Permanent Note)**: A text input field containing "Activator".
- Adjusting Note (Permanent Note)**: A text input field containing "L3-L4 Spinal Fusion".
- Adjusted These Areas**: A text input field containing "C5 - PL, T2 - PR, T7 - PLS, Rib11 - Ant-Inf".

This screenshot shows two specific UI elements:

- A black button with white text labeled "Copy Last Adjustment (SALT)".
- A text input field with a grey header labeled "Spine Note (this visit only)".

SOAP - Objective – Adjustments Tab

Attributes Tab

This Attributes tab will allow you to record things such as pain, edema, spasm, etc. for all spinal segments. Easily record P.A.R.T for Medicare by highlighting the Pain and Asymmetry areas for each adjusted area! 😊

Spine Listing

Adjustment | Attributes

	Pain	Asymmetry	ROM abnormal	Tension	Trigger Point	Edema	Spasm
Occ							
C1							
C2			ROM abnormal				Spasm
C3			ROM abnormal				Spasm
C4			ROM abnormal				
C5							
C6							
C7							
T1							
T2							
T3				Tension	Trigger Point		
T4	Pain			Tension			
T5	Pain			Tension			
T6				Tension	Trigger Point		
T7							
T8							
T9							
T10							
T11							
T12							
L1							
L2							
L3							
L4							
L5							
P							
S							
C							

Close | Clear All Attributes | Copy Last Attributes (SALT)

SOAP - Objective – Adjustments Tab

Attributes

Copy Last Attributes (SALT) button – Click this to copy the attributes from last visit

Clear All Attributes button – Click this button to clear all areas marked with attributes.

Note: The marked areas of adjustment will be highlighted on the spine in the color green.

In Settings you can customize attributes. For each attribute you can then change attribute color and rearrange in any order.



Settings

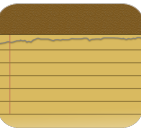


Spine



Attributes





SOAP - Objective – Adjustments Tab

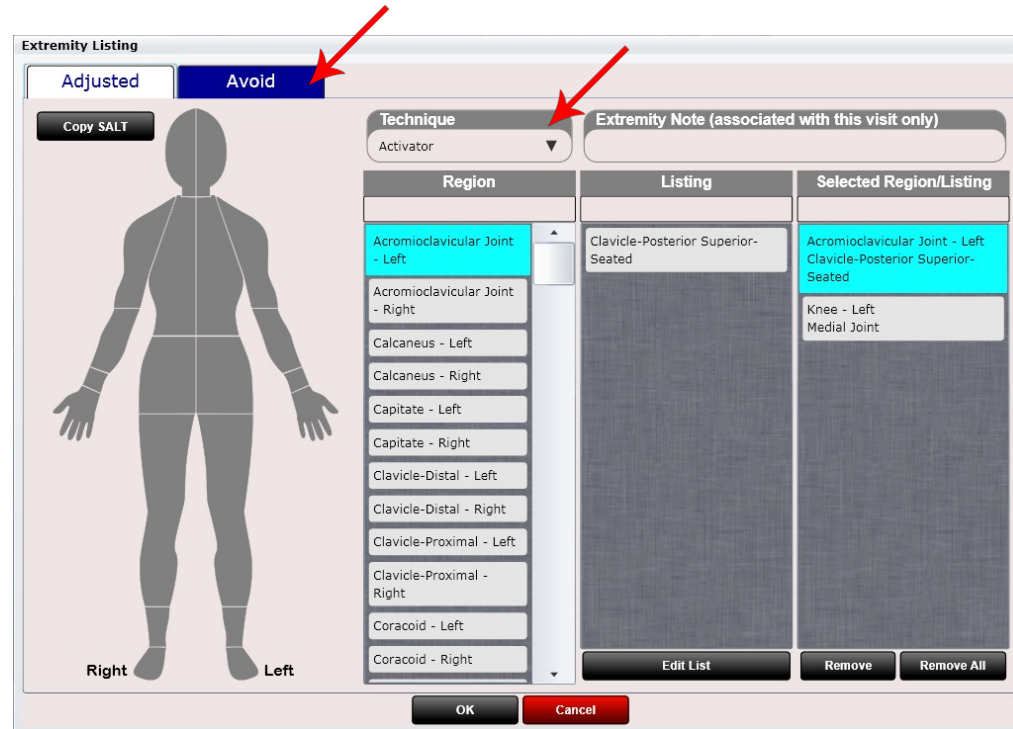
Extremity Adjustments

Shown here is the Body after selecting the “Edit” button or clicking the body.

Now select a body region and then listing. Selected regions/listings will appear in the far-right list box.

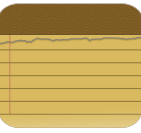
To mark areas to “Avoid” use the “Avoid” tab at the top.

If you wish to copy the adjustment from the last visit, click the “Copy SALT” button. This will copy all the listings from the last adjustment to this adjustment. SALT stands for “Same As Last Time.”



Use the “Technique” drop down to select another adjusting technique. You can create or edit techniques and listings in Settings.

Use the “Extremity Note” to enter any notes about today’s adjustment.



SOAP - Objective – Acupuncture Tab

Acupuncture

Here you can record which acupuncture points you performed on your patient. Click the “Meridian” list box or select “Edit”. This will open a dialog with meridians on the left and points on the right. See next page for more details.

In Settings you can create or edit meridians and acupuncture points.



Settings



Acupuncture

SOAP Note Chad Thompson DOB: 10/22/1975 Age: 40 Ins: Medicare - No Assignment CPT copyright 2013 American Medical Association. All rights reserved. Visit: 04/29/2016 3:00 PM

Adjustments Acupuncture Vitals Labs Immunizations Free Text

S

O

A

P

Meridians Edit

- Lung
- Large Intestine
- Spleen
- Stomach
- Heart
- Small Intestine
- Pericardium
- Bladder
- Kidney
- Triple Warmer
- Gall Bladder
- Liver
- Governing Vessel
- Conception Vessel

View Acupuncture History

General Permanent Note (not part of SOAP note)

Do not put needles in any Liver areas.

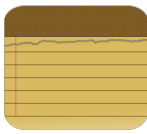
Acupuncture Visit Note (associate with this visit only) Copy Previous Acupuncture Note

Acupuncture Listings

Heart - HT 4, Left, Moxa, Heart - HT 7, Left, Cupping, Kidney - KI 11, Left, Cupping, Magnet,

Close Dock Save Save & Sign Back Next Dashboard

SOAP - Objective – Acupuncture Tab



SOAP Note Chad Thompson DOB: 10/22/1975 Age: 40 Ins: Medicare - No Assignment

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Visit: 04/29/2016
3:00 PM

Adjustments

Acupuncture

Vitals

Labs

Immunizations

Free Text

S

Meridians

Edit

Lung

Large Intestine

Spleen

Stomach

Heart

Small Intestine

Pericardium

Bladder

Kidney

Triple Warmer

Gall Bladder

Liver

Governing Vessel

Conception Vessel

View Acupuncture History

General Permanent Note (not part of SOAP note)

Do not put needles in any Liver areas.

Acupuncture Visit Note (associate with this visit only)

Copy Previous Acupuncture Note

Acupuncture Listings

Heart - HT 4, Left, Moxa, Heart - HT 7, Left, Cupping, Kidney - KI 11, Left, Cupping, Magnet,

O

A

P

Close

Dock

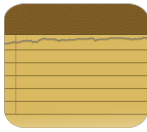
Save

Save & Sign

Back

Next

Dashboard



SOAP - Objective – Acupuncture Tab

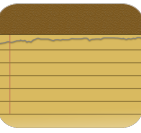
Here we can select a meridian, then it's associated point. This will add an item to the "Selected Points" list box. Next select "left", "right", "bilateral" or "center". Then indicate the technique used such as "needling", "moxa", "cupping" or "electronic stimulation" to name a few. You will see the legend at the bottom identifying what each checkbox stands for.

SOAP Note Chad Thompson DOB: 10/22/1975 Age: 40 Ins: Medicare - No Assignment CPT copyright 2013 American Medical Association. All rights reserved. Visit: 04/29/2016

Acupuncture Listings

Meridians	Points	Selected Points
<input type="checkbox"/> Lung	HT 1	Heart , HT 4 <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> Large Intestine	HT 2	<input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<input checked="" type="checkbox"/> Spleen	HT 3	
<input checked="" type="checkbox"/> Stomach	HT 4	
<input checked="" type="checkbox"/> Heart	HT 5	Heart , HT 7 <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<input checked="" type="checkbox"/> Small Intestine	HT 6	<input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<input checked="" type="checkbox"/> Pericardium	HT 7	
<input type="checkbox"/> Bladder	HT 8	
<input checked="" type="checkbox"/> Kidney	HT 9	Kidney , KI 11 <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> Triple Warmer	Sishengong	
<input type="checkbox"/> Gall Bladder	Yintang	
<input checked="" type="checkbox"/> Liver	Yuyao	
<input type="checkbox"/> Governing Vessel	Qiuhou	
<input type="checkbox"/> Conception Vessel	Taiyang	
	Erjian	
	Bitong	
	Bailao	
	Acupian	

L - Left, R - Right, Bi - Bilateral, C - Center
N - Needling, M - Moxa, C - Cupping, E - Electric Stimulation, SP - Seed/Pellet, Mn - Magnet, Pn - Press Needle, Bn - Bleeding Needle, TS - Te Shin/Blunt Needle



SOAP - Objective – Evaluation Tab

The Evaluation tab will allow you to document several different evaluations for your patient. This can of course be done in the SOAP free text area. However, the advantage of using the evaluation tab is that you can see when the last time you evaluated your patient for an item was AND previous data is saved so that you only need to change what is necessary on subsequent evaluations. This process is SUPER FAST and of course works entirely with TOUCH.

Only evaluations performed THIS VISIT will appear inside your SOAP note.

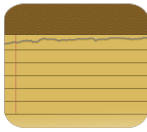
To perform an evaluation, select from the list, then click “New Evaluation”. The same process works when you are ready to “Edit” or on subsequent visits if you want to “Re-Evaluate”.

Here is a list of our current evaluations. We may add more in the future.

You can customize various aspects of your evaluations in Settings/Evaluation



SOAP - Objective – Evaluation Tab



SOAP Note - Brady E Albery ALBBR000 DOB: 12/16/1979 Age: 41 Ins: BCBS CPT copyright 2020 American Medical Association. All rights reserved.

Visit: 12/17/2020
13:00 PM

Adjustments Acupuncture **Evaluation** Product Orders Vitals Free Text

S

Muscle Strength Analysis

Range of Motion

Orthopedic Tests

Sensory Tests

Posture Analysis

Vascular Tests

Pediatric Tests

Muscle Tone Analysis

Cranial Nerves

Special Tests

X-Ray Analysis

Outcome Assessments

Reflexes

O

A

P

Active Range of Motion

Last Evaluated: 12/17/2020

Cervical Spine - Flexion: Status - Normal, Pain, **Left Lateral Bend:** Status - Normal, Pain, **Extension:** Status - Normal, **Extension:** Status - Normal, Tightness, Restriction, Pulling, Pressure, **Left Lateral Bend:** Status - Decreased, Spasm, Restriction, Stretching, Tightness, **Left Rotation:** Status - Decreased, Pain, Spasm, Restriction, Stretching, Tightness, Pulling, Pressure, **Left Rotation:** Status - Increased, Pain, Spasm, **Right Lateral Bend:** Status - Increased, Pain, Spasm, **Flexion:** Status - Increased, **Right Lateral Bend:** Status - Decreased, Pain, **Right Rotation:** Status - Increased, Restriction, Stretching, Tightness, **Right Rotation:** 55 Degrees (Normal 80-90), Pain, Spasm, Pressure, Restriction, Stretching, Tightness, Pulling.

Thoracic Spine - Flexion: Status - Normal, **Flexion:** Status - Increased, Spasm, **Left Lateral Bend:** Status - Increased, **Left Lateral Bend:** Status - Normal, **Left Rotation:** Status - Increased, Pain, Spasm, Pulling, Stretching, Tightness, **Left Rotation:** Status - Normal, Pain, **Right Lateral Bend:** Status - Normal, Stretching, Restriction, Pulling, **Extension:** Status - Normal, **Right Rotation:** Status - Decreased, Spasm, **Right Rotation:** Status - Increased, **Right Lateral Bend:** Status - Normal, **Extension:** 25 Degrees (Normal 20-30).

Lumbar Spine - Extension: Status - Normal, **Extension:** Status - Normal, **Flexion:** Status - Increased, Pain, Restriction, Tightness, Stretching, **Left Lateral Bend:** Status - Normal, **Left Lateral Bend:** Status - Normal, Tightness, Restriction.

Shoulder - Extension, right shoulder: Status - Normal, **Extension, right shoulder:** Status - Decreased, Pain, Spasm, Tightness, Restriction, Pulling, Pressure, Stretching.

Elbow - Extension, left elbow: Status - Normal, **Extension, right elbow:** Status - Normal, **Extension, right elbow:** Status - Increased, **Flexion, right elbow:** Status - Decreased, Pain.

Deep Tendon Reflexes

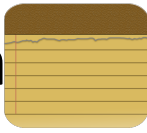
Last Evaluated: 12/02/2020

Left biceps brachii (C5, 6): Grade 3
Right medial hamstring (L5): Grade 4
Bilateral brachioradialis (C5,6): Grade 5
Right biceps brachii (C5, 6): Grade 4

Edit Arrange **New Evaluation** Edit Evaluation Re-Evaluate Evaluation Delete Evaluation

Close Dock Save Save & Sign Back Next Preview Dashboard

SOAP - Objective – Evaluation Tab – Range of Motion



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Range of Motion

Active

Passive

Spines	+/-	Test	Degrees	Normal Range	Normal	Increased	Decreased	Pain	Spasm	Level
Cervical	+	Extension		X Normal 50-70	Normal	↑	↓	Pain	Spasm	Select
Thoracic	+	Flexion	123	X Normal 50-70	Normal	↑	↓	Pain	Spasm	Select
Lumbar	+	Left Lateral Bend		X Normal 45-60	Normal	↑	↓	Pain	Spasm	Select
Shoulder	+	Left Rotation		X Normal 80-90	Normal	↑	↓	Pain	Spasm	Select
Elbow	+	Right Lateral Bend		X Normal 45-60	Normal	↑	↓	Pain	Spasm	Select
Wrist	+	Right Rotation		X Normal 80-90	Normal	↑	↓	Pain	Spasm	Select
Hip										
Knee										
Ankle										

Cancel

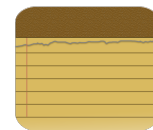
Set All Items to Normal

Clear Items for Selected View

Clear Items for All Views

Finish

SOAP - Objective – Evaluation Tab – Reflexes (Deep Tendon)

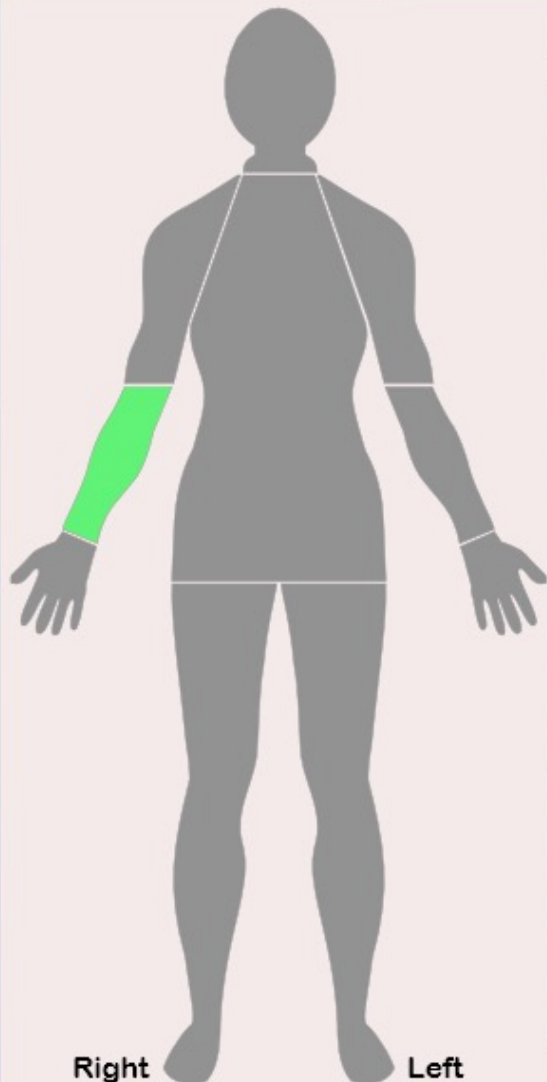


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Reflexes

Deep Tendon Reflexes

Pathological Reflexes



Right

Left

Reflexes

Bilateral brachioradialis (C5,6)

Right brachioradialis (C5,6)

Reflexes Tested & Grading

Jaw (CN V)

0 1 2 3 4 5

Right brachioradialis (C5,6)

0 1 2 3 4 5

Edit List

Remove

Remove All

Wexler Scale Reading

0 (Reflex is absent with reinforcement)

1+ (Reflex is hypoactive with reinforcement)

2+ (Reflex is normal)

3+ (Reflex is hyperactive moving through range of motion)

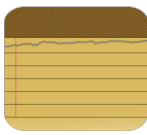
4+ (Reflex is hyperactive with transient clonus)

5+ (Reflex is hyperactive with sustained clonus)

Cancel

Finish

SOAP - Objective – Evaluation Tab – Reflexes (Pathological)



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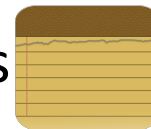
Reflexes

Test	Left (+)	Left (-)	Right (+)	Right (-)
Babinski Sign	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Bechterew's Wrist Sign	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Chaddock's Wrist Sign	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Forced Grasping	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Gordon's Finger Sign	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hoffman's Sign	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Palmomental Reflex	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rossolimo's Hand Sign	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Scapulohumeral Reflex	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Tromner's Sign	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Wrist Clonus	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Cancel

Finish

SOAP - Objective – Evaluation Tab – Muscle Strength Analysis



Muscle Strength Analysis CPT copyright 2013 American Medical Association. All rights reserved.

Right Left

Muscles	Muscles Grading - Wexler Scale						
Shoulder elevators (trapezius) - Left							
Trunk extensors (erector spinae)	<table style="width: 100%; text-align: center;"> <tr> <td style="background-color: green; width: 16.6%;">0</td> <td style="background-color: blue; width: 16.6%;">1</td> <td style="background-color: yellow; width: 16.6%;">2</td> <td style="background-color: orange; width: 16.6%;">3</td> <td style="background-color: red; width: 16.6%;">4</td> <td style="background-color: red; width: 16.6%;">5</td> </tr> </table>	0	1	2	3	4	5
0	1	2	3	4	5		
Trunk flexors (rectus abdominis, external oblique, internal oblique)	<table style="width: 100%; text-align: center;"> <tr> <td style="background-color: green; width: 16.6%;">0</td> <td style="background-color: blue; width: 16.6%;">1</td> <td style="background-color: yellow; width: 16.6%;">2</td> <td style="background-color: orange; width: 16.6%;">3</td> <td style="background-color: red; width: 16.6%;">4</td> <td style="background-color: red; width: 16.6%;">5</td> </tr> </table>	0	1	2	3	4	5
0	1	2	3	4	5		
Trunk rotators (external obliques, internal obliques) - Left							

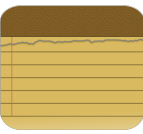
Edit List
Remove
Remove All

Muscles Grading

0. When tested there was no palpable contraction or joint motion.
1. When tested there was no range of motion. However, there was a traceable palpable contraction.
2. When tested range of motion was present, but only without gravity.
3. When tested there was a fair amount of range of motion against gravity.
4. When tested there was good range of motion with some resistance.
5. When tested the muscle/ muscle groups were within normal limits.

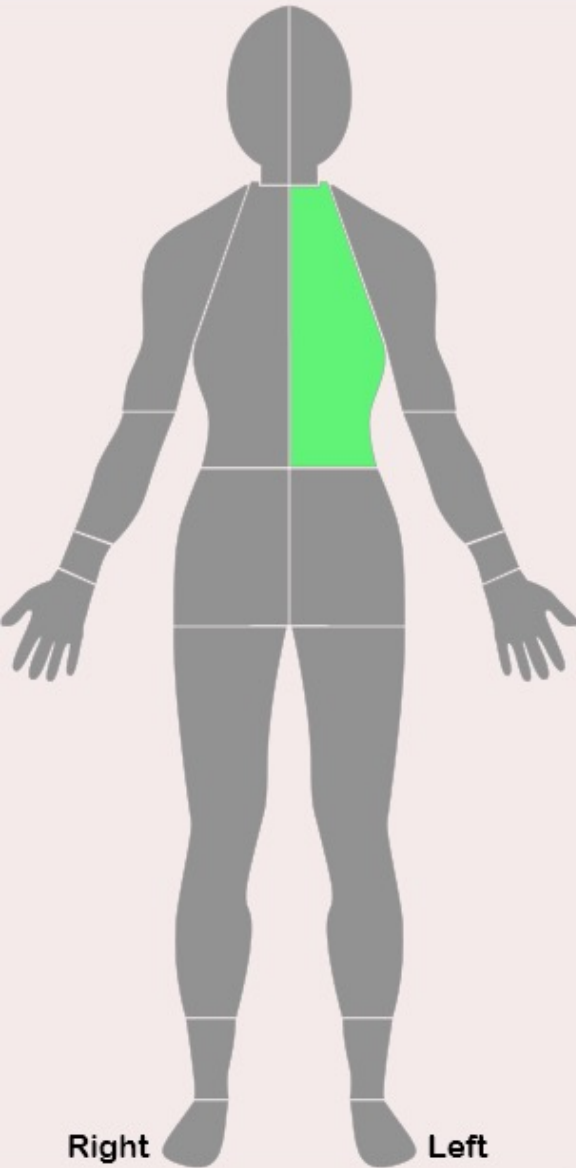
Cancel
Finish

SOAP - Objective – Evaluation Tab – Muscle Tone Analysis



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Muscle Tone Analysis



Muscles
Clavicle-Distal - Left
Clavicle-Proximal - Left
dd
First Rib - Left
Sternocostal Articulation - Left
Sternum-Manubrium - Left
Xiphoid - Left

Listings
Hypertonicity
Hypotonicity
Spasm
Flaccidity
Rigidity
Spasticity
Guarding

Selected Muscles Listings
Acromioclavicular Joint - Right Spasm
Acromioclavicular Joint - Right Flaccidity
Acromioclavicular Joint - Left Hypotonicity
Clavicle-Distal - Left Rigidity

Edit List

Edit List

Remove

Remove All

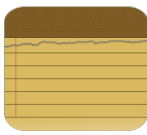
Cancel

Finish

Right

Left

SOAP - Objective – Evaluation Tab – Orthopedic Tests



Regions	Test	Positive	Negative	+ Left	- Left	+ Right	- Right	Neutral	Attributes
Cervical	Bakody's Sign/Shoulder Abduction Test	+	-	+L	-L	+R	-R	N	Select
Thoracic	Bikele's Sign	+	-	+L	-L	+R	-R	N	Select
Lumbar	Brachial Plexus Tension Test	+	-	+L	-L	+R	-R	N	Select
Sacroiliac	Brudzinski's Sign	+	-	+L	-L	+R	-R	N	Select
Shoulder	Cervical Distraction Test	+	-	+L	-L	+R	-R	N	Select
Elbow	DeKleyn/George/VBI Test	+	-	+L	-L	+R	-R	N	Select
Wrist/Hand	Extension Compression Test	+	-	+L	-L	+R	-R	N	Select
Hip/Thigh	Foraminal Compression Test	+	-	+L	-L	+R	-R	N	Select
Knee	Jackson Compression Test	+	-	+L	-L	+R	-R	N	Select
Ankle/Foot	L'hermitte's Sign/Cervical Hyperflexion	+	-	+L	-L	+R	-R	N	Select
	Maximal Cervical Compression	+	-	+L	-L	+R	-R	N	Select
	Naffziger's Test	+	-	+L	-L	+R	-R	N	Select
	O'Donoghue Maneuver	+	-	+L	-L	+R	-R	N	Select
	Rust's Sign	+	-	+L	-L	+R	-R	N	Select
	Shoulder Depression	+	-	+L	-L	+R	-R	N	Select
	Soto-Hall Test	+	-	+L	-L	+R	-R	N	Select

Arrange

Cancel

Arrange Tests

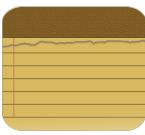
Edit Tests

Clear Items for Selected View

Clear Items for All Views

Finish

SOAP - Objective – Evaluation Tab – Sensory Evaluations



CPT copyright 2013 American Medical Association. All rights reserved.

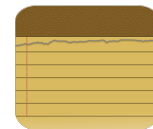
Sensory Evaluations

Test	WNL	Hyper	Hypo	N/A	Notes
C4	WNL	Hyper	Hypo	N/A	
C5	WNL	Hyper	Hypo	N/A	
C6	WNL	Hyper	Hypo	N/A	
C7	WNL	Hyper	Hypo	N/A	
C8	WNL	Hyper	Hypo	N/A	
L1	WNL	Hyper	Hypo	N/A	
L2	WNL	Hyper	Hypo	N/A	
L3	WNL	Hyper	Hypo	N/A	
L4	WNL	Hyper	Hypo	N/A	
L5	WNL	Hyper	Hypo	N/A	
S1	WNL	Hyper	Hypo	N/A	

Cancel

Finish

SOAP - Objective – Evaluation Tab – Vascular Evaluations



Vascular Evaluations

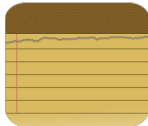
CPT copyright 2013 American Medical Association. All rights reserved.

Test	WNL	+ Left	- Left	+ Right	- Right	Notes
Wright's	<input type="button" value="WNL"/>	<input type="button" value="+L"/>	<input type="button" value="-L"/>	<input type="button" value="+R"/>	<input type="button" value="-R"/>	<input type="text"/>
Allens's	<input type="button" value="WNL"/>	<input type="button" value="+L"/>	<input type="button" value="-L"/>	<input type="button" value="+R"/>	<input type="button" value="-R"/>	<input type="text"/>
Adson's	<input type="button" value="WNL"/>	<input type="button" value="+L"/>	<input type="button" value="-L"/>	<input type="button" value="+R"/>	<input type="button" value="-R"/>	<input type="text"/>
Buerger's	<input type="button" value="WNL"/>	<input type="button" value="+L"/>	<input type="button" value="-L"/>	<input type="button" value="+R"/>	<input type="button" value="-R"/>	<input type="text"/>

Cancel

Finish

SOAP - Objective – Evaluation Tab – Special Evaluations



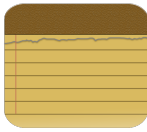
CPT copyright 2013 American Medical Association. All rights reserved.

Special Evaluations

Test	WNL	+ Left	- Left	+ Right	- Right	Notes
George's	<input type="button" value="WNL"/>	<input type="button" value="+L"/>	<input type="button" value="-L"/>	<input type="button" value="+R"/>	<input type="button" value="-R"/>	<input type="text"/>
Romberg	<input checked="" type="button" value="WNL"/>	<input type="button" value="+L"/>	<input type="button" value="-L"/>	<input type="button" value="+R"/>	<input type="button" value="-R"/>	<input type="text"/>

Cancel

Finish



SOAP – Product Orders

If you prescribe supplements to your patients, you will love Product Orders. Type in the search box and select your “product”. Once added to the list box indicate the number of doses for the schedule (see below). As an example, 1 at breakfast and 1 at snack. You can customize the schedule in Settings/Product Orders.

SOAP Note - Brady E Albery ALBBR000 DOB: 12/16/1979 Age: 41 Ins: BCBS CPT copyright 2020 American Medical Association. All rights reserved. Visit: 12/17/2020 23:15 PM

Adjustments Acupuncture Evaluation **Product Orders** Vitals Free Text

Ordered Products ? Show Active Only

	Arise	Breakfast	Between	Lunch	Supper	Snack	Bedtime	Other
Cataplex A - 180T	1	1		1			2	
Vitamin C		2						
B6-Niacinamide - 330T		1					3	
HerbaVital - 40T		1			1	2		
Vitamin D-3 - 180SG					1			
Zinc Test - 2 fl oz		1				1		
Vitamin A							2	

Edit Delete Copy Into Box ? 1 X Print Details

Close Dock Save Save & Sign Back Next Preview Dashboard

SOAP – Product Orders

Double clicking a product will open a dialog allowing you to edit any start or end date or mark inactive. If you click the “Re-Order Product” button the product will be added to the Charges section of the SOAP note. This saves you from having to manually add the charge when you know your patient needs it.

SOAP Note - Brady E Albery ALBBR000 DOB: 12/16/1979 Age: 41 Ins: BCBS CPT copyright 2020 American Medical Association. All rights reserved.

Visit: 12/17/2020 23:15 PM

Edit Product Order

Status
Active ▼ Active

Start Date 11-22-2020
End Date <MM-dd-yyyy>

Comments
Take with food.

Re-Order Product

General

Date of Service 12/17/20
Code 0510 - Cataplex A - 180T

Price 26.00
Units 1
Discount Amt 0.00
Is Taxed? Yes ▼
Tax Rate (%) 8.00

Is Claimable to Insurance?
BCBS

Note

Close Dock OK Cancel Dashboard

Front Desk Provider Patient History Monday, Dec 20, 2020 2:51 PM Dr. Brian Albery Log Out KB

SOAP – Vitals Tab

Here you can record patient vitals including:

- Height
- Weight
- Temperature
- Respirations
- Blood Pressure
- Pulse
- Pulse Oximetry

If Height and Weight are entered the patient's BMI will be calculated and displayed above the number pad.

BMI: 23.3 (Normal Weight)

If Height and Weight (and gender) are entered and your patient is between 2 and 20 years of age BMI percentile will be automatically calculated.

BMI Percentile

49.6

(Auto Calculated for ages 2-20 when gender is entered)

SOAP Note Murr Bishop DOB: 06/02/2016 Age: 0 Ins: Cash CPT copyright 2013 American Medical Association. All rights reserved. Visit: 07/05/2016 1:15 PM

Adjustments Acupuncture Vitals Labs Immunizations Free Text

S

Height Units in

Weight Units lbs

O

Temperature Units °F

Measurement Oral

A

Respirations (breaths per minute)

Pulse Oximetry

P

Notes

View Vitals History Clear All Fields

Close Dock Save Save & Sign Back Next Dashboard

Blood Pressure/Pulse

1

Systolic Diastolic Pulse

Position Extremity Used

Sitting

2

Systolic Diastolic Pulse

Position Extremity Used

Standing

3

Systolic Diastolic Pulse

Position Extremity Used

Supine

BMI:

1 2 3

4 5 6

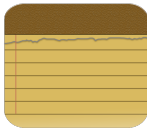
7 8 9

. 0 CI

For more than 80% of your patients who are age 3 and older, you have to record blood pressure in the certified EHR. For more than 80% of your patients of any age, you have to record height and weight in the certified EHR.

To view Vitals from previous visits, click the "View Vitals History" button.

View Vitals History



SOAP – Labs Tab

Here you can record lab orders for your patient. To record a lab order, click “Add Order”. Lab orders are used to keep track of which labs you ordered. You will still need to call the order into an outside lab to get the order performed for your patient.

SOAP Note Murr Bishop DOB: 06/02/2016 Age: 0 Ins: Cash CPT copyright 2013 American Medical Association. All rights reserved. Visit: 07/05/2016 1:15 PM

Adjustments Acupuncture Vitals Labs Immunizations Free Text

Internal Order #	Filler Order #	Lab Name	Status	Date Time Created	Date Ordered	Ordering Provider	Comment
------------------	----------------	----------	--------	-------------------	--------------	-------------------	---------

S
O
A
P

View Result History Add Order Edit Delete

Close Dock Save Save & Sign Back Next Dashboard

SOAP – Immunizations Tab

Here you can record Immunization history for your patient. There is also an Immunizations Tile in the Dashboard if you wish to record this information there as well.

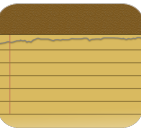
Power Tip: You can block (hide) any SOAP tab you wish on a per provider basis. This means if I wanted to hide the Immunizations tab in my Edit SOAP I could. To do this go to Settings/Users/User Rights.

SOAP Note Murr Bishop DOB: 06/02/2016 Age: 0 Ins: Cash CPT copyright 2013 American Medical Association. All rights reserved. Visit: 07/05/2016 1:15 PM

Vaccine Name	Date Administered	Provider	Administered By	Location Administered	Status	Vaccine Amount	Va
Adenovirus, unspecified formulation	07-05-2016	Dr. Brian DC	Dr. Brian DC	Left Deltoid	Administered	0.5 ml	

View Immunizations History Add Edit Delete

Close Dock Save Save & Sign Back Next Dashboard



SOAP - Objective – Macros/Free Text

Macros/Free Text

The Objective macros work exactly like the Subjective, Assessment and Plan macros. The only difference is there are different macros to choose from.

After spending ample time with the macros, you will be able to quickly write highly detailed SOAP notes.

SOAP Note - Brady E Albery ALBBR000 DOB: 12/16/1979 Age: 41 Ins: BCBS CPT copyright 2020 American Medical Association. All rights reserved. Visit: 12/17/2020 13:00 PM

Adjustments Acupuncture Evaluation Product Orders Vitals Free Text

S Barre-Lieou Sign was tested today. While Brady was seated, he slowly rotated his head from side to side. If Brady experienced pre-syncope, vertigo, nystagmus, visual changes and/or nausea on cervical rotation the test would be considered positive, indicating potential vertebrobasilar insufficiency. Results were negative. Dreyer's sign was absent on the right today. While lying supine Brady attempted to raise his leg without stabilization, and then with quadricep stabilization. If Brady is able to raise his leg while the quadricep is stabilized, but is unable to raise when the stabilizing force is removed, it indicates a fracture of the patella.

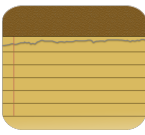
O

A Home Clear All

My Radiology Reports	Vital Signs	Extremity Subluxations	Motion Palpation	Palpable Pain
P.A.R.T.	Quadruple Visual Analog Pain Scale	Thermography Findings	Leveled Exams (E/M) - Exam Section	Personal Injury
Auto Accident	Outcome Assessment	Cerebellar Function Tests	Neurologic Tests	Cranial Nerve Evaluation

P

Close Dock Save Save & Sign Back Next Preview Dashboard



SOAP – Assessment - Diagnosis

ChiroSpring supports diagnosing in both ICD9 and ICD10. As you are likely aware, ICD10 is now the standard as of October 1, 2015. We also support diagnosing in SNOMED as this is an EHR requirement, however, we do NOT advise using SNOMED for diagnosis as it will not appear on your HCFA form.

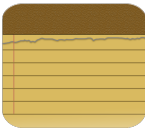
There are three tabs: ICD10, ICD9 and SNOMED. ICD10 is selected by default when the Edit SOAP Diagnosis tab is



Not only can you easily diagnose in ChiroSpring you can create your own ICD9 codes (**we provide EVERY SINGLE ICD10 code so ICD10 codes cannot be created by you**).

You can also customize your diagnosis grids for both ICD9 and ICD10. More on this on the next few pages.

SOAP – Assessment - Diagnosis



The Diagnosis tab is composed of a list box on the left and a button grid on the right. The button grid contains the most popular ICD diagnosis codes chiropractors use. To the left of the button grid are button groups. Selecting a group will reveal diagnoses that pertain to that group. This grid is editable in settings.

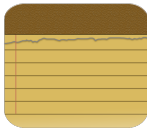
When a button (diagnosis) is selected it appears in the left list box. Diagnoses can be ordered (up or down) by using the green arrows below. As you may be aware, your primary diagnosis should appear at the top of your list. The primary diagnosis also sets the condition case. Changing the primary diagnosis will open a dialog letting you know you are also creating a new condition case.

IMPORTANT: The primary diagnosis is set by moving it to the top of the list box.

The Clear or Clear all buttons will remove a single diagnosis or remove all of them at the same time.

The screenshot shows the 'Diagnosis' tab in a SOAP Note application. The interface is divided into several sections:

- Top Bar:** Patient information (Brady E Albery, ALBBR000, DOB: 12/16/1979, Age: 41, Ins: BCBS) and a visit date/time (12/17/2020, 13:00 PM).
- Diagnosis Tab:** Includes 'Principal Diagnosis' (None Specified) and a 'Diagnosis' list box.
- Diagnosis List Box (Left):** Contains a list of ICD10 codes and descriptions:
 - G54.2 Cervical root disorders, not elsewhere classified
 - G54.3 Thoracic root disorders, not elsewhere classified
 - G54.4 Lumbosacral root disorders, not elsewhere classified
 - G54.8 Other nerve root and plexus disorders
 - G55 Nerve root and plexus compressions in diseases classified elsewhere
- Button Grid (Right):** Contains buttons for 'All Chapters', 'Common Chapters', 'Primary Diagnosis', 'Category 1', 'Category 2', 'Category 3', 'Medicare', 'Favorites', and 'Edit Groups'.
- Bottom Bar:** Includes 'Qualifier', 'Date of Current Illness' (11-17-2020), 'Copy', 'Other Date' (04-14-2020), and navigation buttons like 'Close', 'Dock', 'Save', 'Save & Sign', 'Back', 'Next', 'Preview', and 'Dashboard'.



SOAP – Assessment – ICD10 Diagnosis

Click on the “ICD10” Tab to reveal the ICD10 codes. **The entire code set is loaded into the system.** There is also a “Common Chiropractic Code Set” which will reduce the number of chapters making it easier finding the code you need. Use the “All Chapters” group if you want access to all 21 chapters.

Use the search box at the top to search by name or code.

Note, because EVERY ICD10 code is already loaded into the system, you cannot create your own. Only ICD9 codes can be created in Settings/Diagnoses.

Use the ICD9 to ICD10 Mapping Tool to open a website that maps these codes for you.

Visit our Help Center for a list of common chiropractic codes we have already mapped for you.

SOAP Note - Brady E Albery ALBBR000 DOB: 12/16/1979 Age: 41 Ins: BCBS CPT copyright 2020 American Medical Association. All rights reserved. Visit: 12/17/2020 13:00 PM

Diagnosis Free Text

Principal Diagnosis ? None Specified

Diagnosis ?

- G54.2 Cervical root disorders, not elsewhere classified
- G54.3 Thoracic root disorders, not elsewhere classified
- G54.4 Lumbosacral root disorders, not elsewhere classified
- G54.8 Other nerve root and plexus disorders
- G55 Nerve root and plexus compressions in diseases classified elsewhere

ICD10 ICD9 SNOMED ICD9 to ICD10 Mapping Tool

All Chapters

Common Chapters

Primary Diagnosis

Category 1

Category 2

Category 3

Medicare

Favorites

Edit Groups

Chapter 1 Certain infectious and parasitic diseases (A00-B99)

Chapter 2 Neoplasms (C00-D49)

Chapter 3 Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism (D50-D89)

Chapter 4 Endocrine, nutritional and metabolic diseases (E00-E89)

Chapter 5 Mental, Behavioral and Neurodevelopmental disorders (F01-F99)

Chapter 6 Diseases of the nervous system (G00-G99)

Chapter 7 Diseases of the eye and adnexa (H00-H59)

Chapter 8 Diseases of the ear and mastoid process (H60-H95)

Chapter 9

Qualifier ? Date of Current Illness 14 454 X 11-17-2020 15 X Copy

Qualifier Other Date 15 439 X 04-14-2020 15 X

Close Dock Save Save & Sign Back Next Preview Dashboard

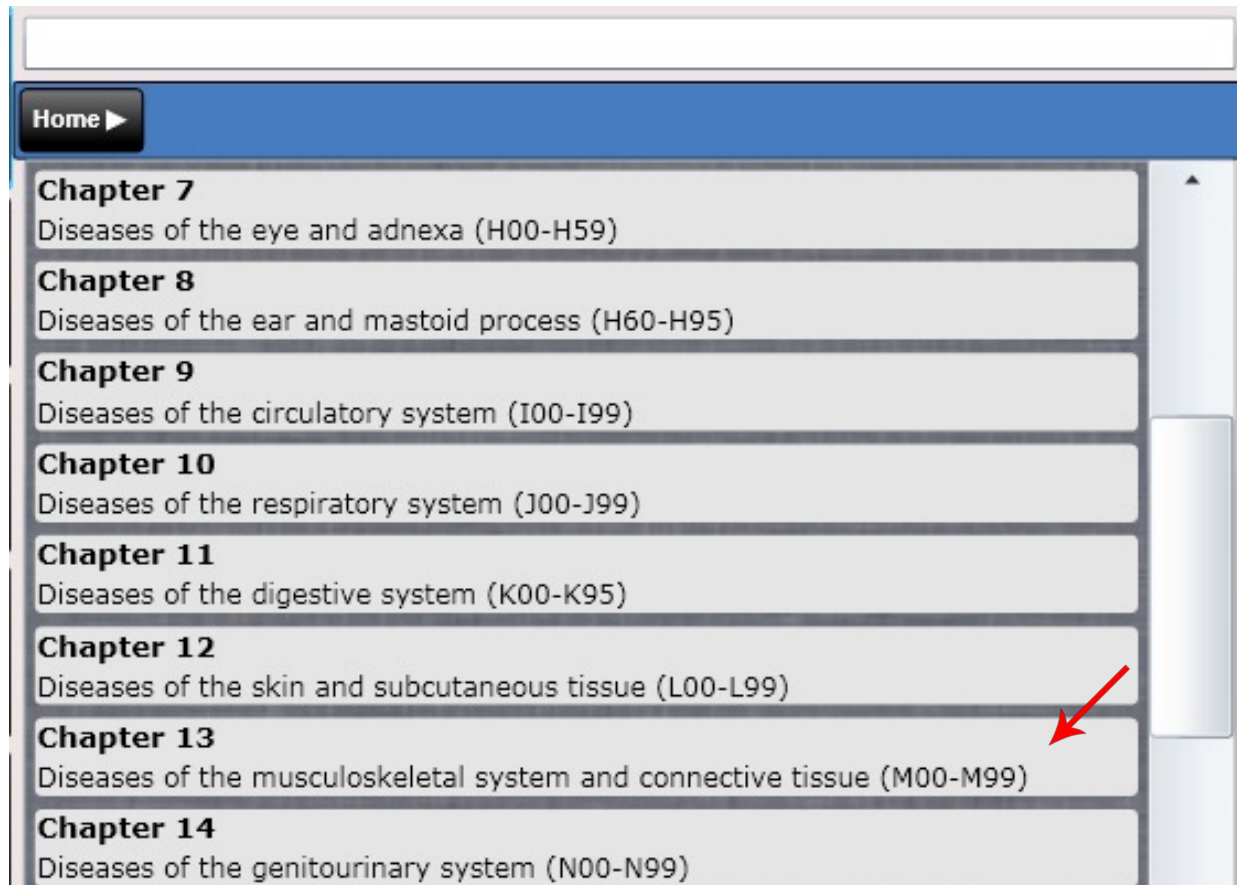
Power Tip: You can create your own groups and pin your favorite ICD10 codes into them. Each code has a “Pin” button. When selected you can determine the group you want to pin the code to. Click “Edit Groups” to create your own groups.

SOAP – Assessment – ICD10 Diagnosis

EXAMPLE: Searching for “Cervicalgia” using chapters.

As mentioned you can find a code by searching by CODE or NAME in the search box at the top. Because there are THOUSANDS of ICD10 codes we have also made it easy to search the chapters. To search by chapter, select the chapter you want to search in. The next few pages I will show you how I am searching for the code “Cervicalgia” by clicking DEEPER and DEEPER and DEEPER into the code book.

Here I am selecting Chapter 13. This contains codes for “Diseases of the musculoskeletal system and connective tissue (M000-M99).



The screenshot shows a web-based interface for the ICD10 code book. At the top, there is a search box. Below it is a blue navigation bar with a "Home" button. The main content area displays a list of chapters, each with a title and a range of codes. Chapter 13 is highlighted in a darker shade, and a red arrow points to it from the right side of the screen.

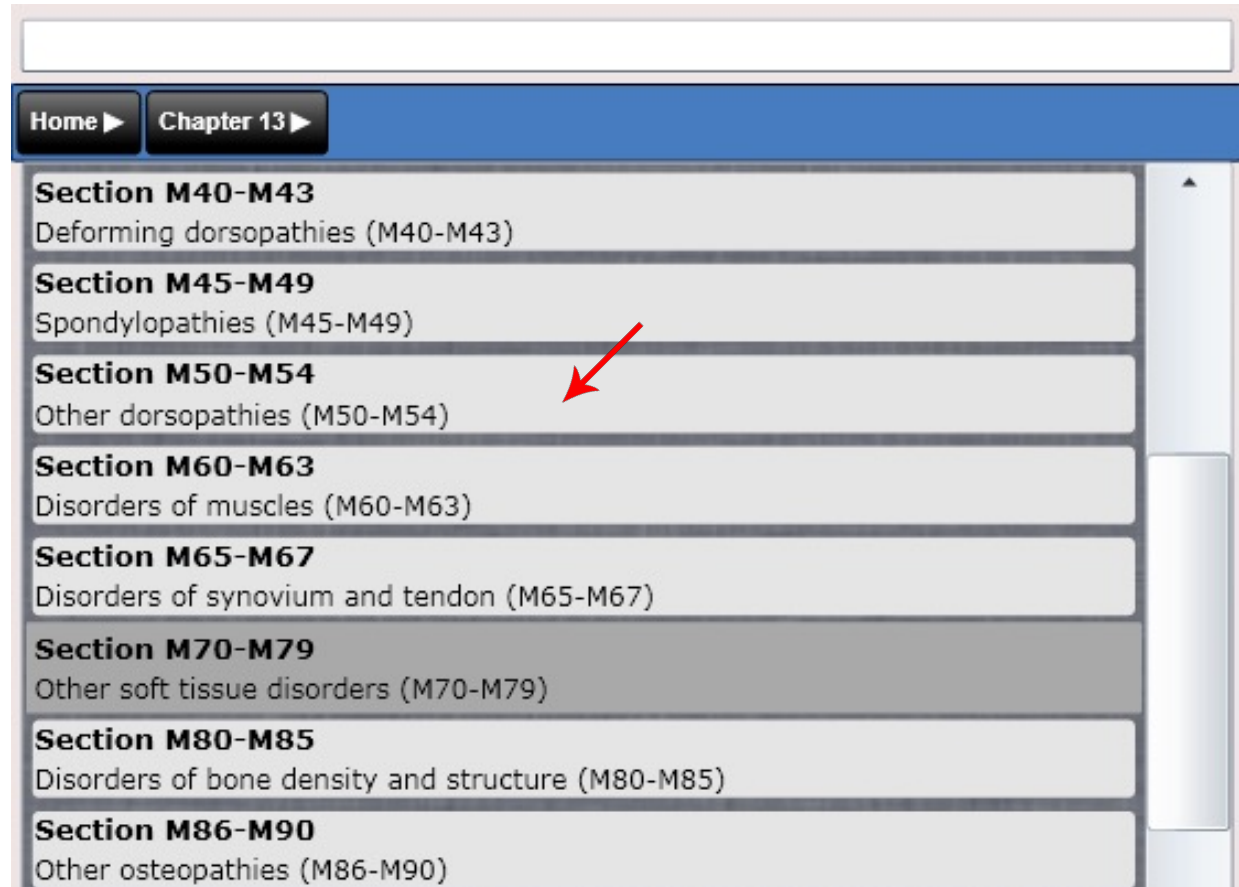
Chapter	Description
Chapter 7	Diseases of the eye and adnexa (H00-H59)
Chapter 8	Diseases of the ear and mastoid process (H60-H95)
Chapter 9	Diseases of the circulatory system (I00-I99)
Chapter 10	Diseases of the respiratory system (J00-J99)
Chapter 11	Diseases of the digestive system (K00-K95)
Chapter 12	Diseases of the skin and subcutaneous tissue (L00-L99)
Chapter 13	Diseases of the musculoskeletal system and connective tissue (M00-M99)
Chapter 14	Diseases of the genitourinary system (N00-N99)

SOAP – Assessment – ICD10 Diagnosis

EXAMPLE: Searching for “Cervicalgia” using chapters.

Next, I am selecting “Other dorsopathies (M50-M54).”

In doing so note we are one layer DEEP as notated by the newly exposed tab at the top “Chapter 13”.



The screenshot shows a web-based navigation interface for ICD10 Chapter 13. At the top, there is a search bar and a blue header bar with two tabs: "Home" and "Chapter 13". Below the header, a list of sections is displayed, each with a bold section title and a descriptive subtitle. A red arrow points to the "Section M50-M54" entry, which is "Other dorsopathies (M50-M54)".

Section	Description
Section M40-M43	Deforming dorsopathies (M40-M43)
Section M45-M49	Spondylopathies (M45-M49)
Section M50-M54	Other dorsopathies (M50-M54)
Section M60-M63	Disorders of muscles (M60-M63)
Section M65-M67	Disorders of synovium and tendon (M65-M67)
Section M70-M79	Other soft tissue disorders (M70-M79)
Section M80-M85	Disorders of bone density and structure (M80-M85)
Section M86-M90	Other osteopathies (M86-M90)

SOAP – Assessment – ICD10 Diagnosis

EXAMPLE: Searching for “Cervicalgia” using chapters.

To continue going deeper into the code book I am clicking “Dorsalgia (M54). Note, I am NOT selecting “Add” as this code is not specific enough for what I am looking for.

The screenshot shows a digital interface for navigating through ICD10 codes. At the top, there is a search bar and a breadcrumb trail: Home > Chapter 13 > Section M50-M54. Below this, a list of codes is displayed, each with a description and two buttons: 'Pin' and 'ADD'. A red arrow points to the 'Dorsalgia' entry under code M54.

Code	Description	Pin	ADD
M50	Cervical disc disorders	Pin	ADD
M51	Thoracic, thoracolumbar, and lumbosacral intervertebral disc disorders	Pin	ADD
M53	Other and unspecified dorsopathies, not elsewhere classified	Pin	ADD
M54	Dorsalgia	Pin	ADD

SOAP – Assessment – ICD10 Diagnosis

EXAMPLE: Searching for “Cervicalgia” using chapters.

Finally, I am deep enough to find the code I am looking for. You will see the code “Cervicalgia (M54.2). Now I can click “Add” to add it as my diagnosis.

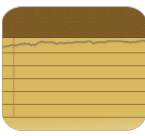
Code	Description	Pin	ADD
M54.0	Panniculitis affecting regions of neck and back	Pin	ADD
M54.1	Radiculopathy	Pin	ADD
M54.2	Cervicalgia	Pin	ADD
M54.3	Sciatica	Pin	ADD
M54.4	Lumbago with sciatica	Pin	ADD

Here is a closer look at the “breadcrumbs” as we call them. You can see we are three layers deep into the code book. You can go BACK a layer by clicking on the tab or return to “Home” by clicking “Home”.

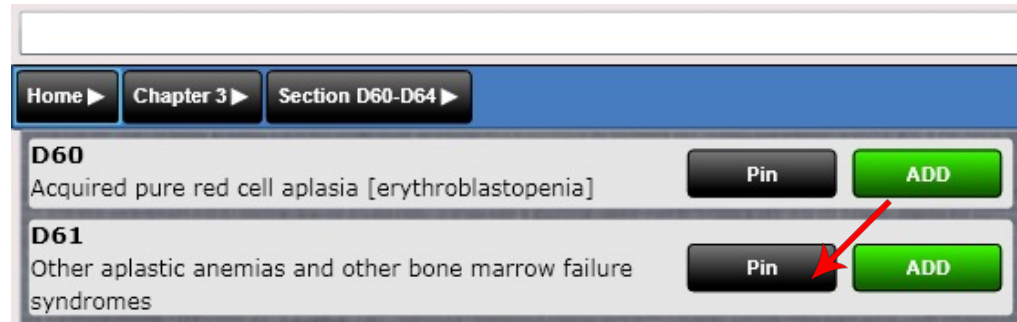
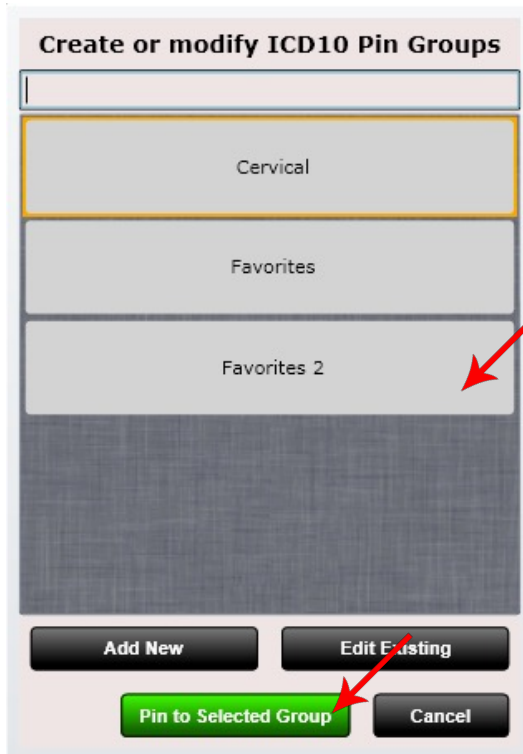
Home ▶ Chapter 13 ▶ Section M50-M54 ▶ M54 ▶

SOAP – Assessment – Diagnosis

Pin ICD10 Codes



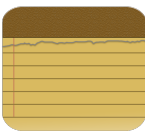
To pin an ICD10 code select “Pin”. This will allow you to “Pin” the code to your custom “Group”.



After selecting “Pin” you will see the dialog shown to the left. Here you can “Add New” to create a new group. Once you see your group in the dialog select the group and then select “Pin to Selected Group”.



SOAP – Assessment – Diagnosis



Pin ICD10 Codes

To create or Edit custom groups to PIN your ICD10 codes to click “Edit Groups”.

Edit Groups

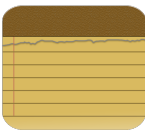
ICD10 ICD9 SNOMED ICD9 to ICD10 Mapping Tool

Home ▶

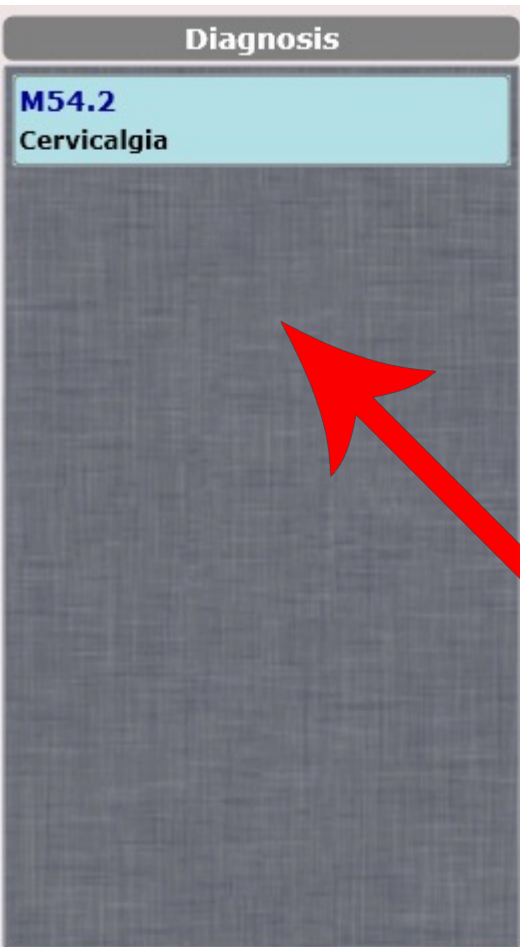
All Chapters	Chapter 1 Certain infectious and parasitic diseases (A00-B99)
Common Chapters	Chapter 2 Neoplasms (C00-D49)
Cervical	Chapter 3 Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism (D50-D89)
Lumbar	Chapter 4 Endocrine, nutritional and metabolic diseases (E00-E89)
Thoracic	Chapter 5 Mental, Behavioral and Neurodevelopmental disorders (F01-F99)
Edit Groups	Chapter 6 Diseases of the nervous system (G00-G99)
	Chapter 7 Diseases of the eye and adnexa (H00-H59)
	Chapter 8 Diseases of the ear and mastoid process (H60-H95)
	Chapter 9 Diseases of the circulatory system (I00-I99)

SOAP – Assessment – Diagnosis

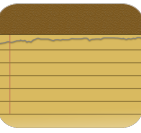
Add ICD10 Codes to Diagnosis List



To add an ICD10 code to the diagnosis list box select “Add”



After clicking “Add” you can see we have now added the ICD10 code to the “Diagnosis” list box.



SOAP – Assessment – ICD9 Diagnosis

ICD9 is no longer the standard for diagnosing your patient. However, you can still create your own ICD9 codes and customize your ICD9 Grid.

ICD9 Diagnosis Grid

To customize your ICD9 diagnosis grid go to Settings/Pin Diagnosis.



Settings

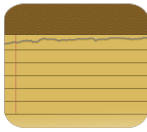


Pin Diagnosis

Cervical/Cranial	723.3 Cervicobrachial Syndrome (diffuse)	723.8 Other Syndromes Affecting Cervical Region	723.9 Unspecified Musculoskeletal Disorder/Symptoms Referable to Neck	307.81 Headache tension	333.83 Spasmodic torticollis
Extremities	346.0 Classical migraine without intractable migraine	346.01 Classical migraine with intractable migraine	346.1 Common migraine without intractable migraine	346.11 Common migraine with intractable migraine	346.2 Variants of migraine without intractable migraine
General	346.21 Variants of migraine with intractable migraine	346.8 Other forms of migraine without intractable migraine	346.81 Other forms of migraine with intractable migraine	346.9 Migraine, unspecified, without intractable migraine	346.91 Migraine, unspecified, with intractable migraine
Lumbar	350.2 Atypical face pain	351.0 Bells' Palsy	353.0 Brachial plexus lesions	353.2 Cervical root lesions	388.3 Tinnitus
Pelvic/Sacral					
Thoracic/Ribs					

The Pin Diagnosis app will let you create custom folders on the left (e.g. Extremities) and pin or un-pin diagnoses to the grid. As mentioned, this is done in Settings/Pin Diagnosis/Pin ICD9.

SOAP – Assessment - Diagnosis



SOAP Note - Brady E Albery ALBBR000 DOB: 12/16/1979 Age: 41 Ins: BCBS

CPT copyright 2020 American Medical Association. All rights reserved.

Visit: 12/17/2020
13:00 PM

Diagnosis
Free Text

Principal Diagnosis ?

None Specified

Diagnosis ?

G54.2
Cervical root disorders, not elsewhere classified

G54.3
Thoracic root disorders, not elsewhere classified

G54.4
Lumbosacral root disorders, not elsewhere classified

G54.8
Other nerve root and plexus disorders

G55
Nerve root and plexus compressions in diseases classified elsewhere

↑
↓
✕
ALL

Set Principal
Post Diagnosis

ICD10

All Chapters

Common Chapters

Primary Diagnosis

Category 1

Category 2

Category 3

Medicare

Favorites

Edit Groups

Home ▶

Chapter 1
Certain infectious and parasitic diseases (A00-B99)

Chapter 2
Neoplasms (C00-D49)

Chapter 3
Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism (D50-D89)

Chapter 4
Endocrine, nutritional and metabolic diseases (E00-E89)

Chapter 5
Mental, Behavioral and Neurodevelopmental disorders (F01-F99)

Chapter 6
Diseases of the nervous system (G00-G99)

Chapter 7
Diseases of the eye and adnexa (H00-H59)

Chapter 8
Diseases of the ear and mastoid process (H60-H95)

Chapter 9

Qualifier ?

454 ▼ ✕

Date of Current Illness

11-17-2020 15 ✕

Qualifier

439 ▼ ✕

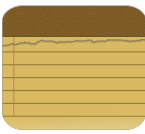
Other Date

04-14-2020 15 ✕

Copy

Close
Dock
Save
Save & Sign
Back
Next
Preview
Dashboard

SOAP – Assessment - Diagnosis



At the bottom of the Diagnosis screen are two HCFA boxes.

- Date of Current Illness (14)
 - Contents will be copied over on subsequent visits
- Other Date (15)
 - Contents will be copied over on subsequent visits

A screenshot of two HCFA boxes from a software interface. The first box, labeled '14', has a 'Qualifier' dropdown with '439' and a red 'X' icon, and a 'Date of Current Illness' field with '7/31/2014' and a red 'X' icon. The second box, labeled '15', has a 'Qualifier' dropdown with '471' and a red 'X' icon, and an empty 'Other Date' field with a red 'X' icon.

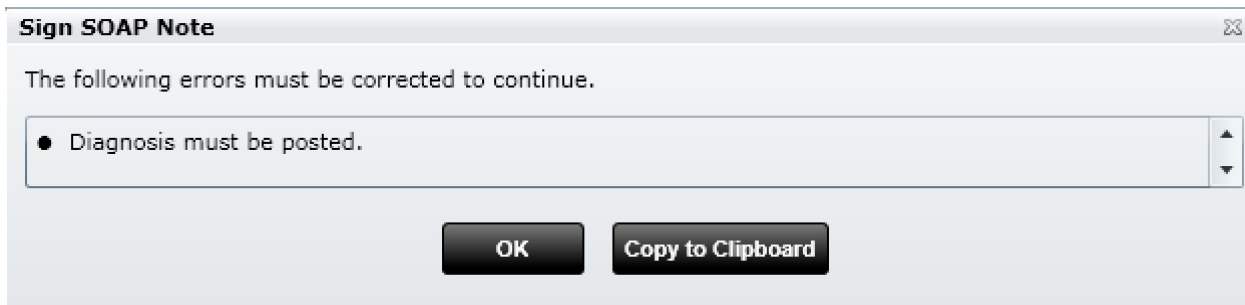
Qualifier	Date of Current Illness	14	Qualifier	Other Date	15
439 ▼ X	7/31/2014 ▼ X		471 ▼ X	▼ X	

Use the Qualifier box to select a qualifier if needed. You can also customize your qualifier master list.

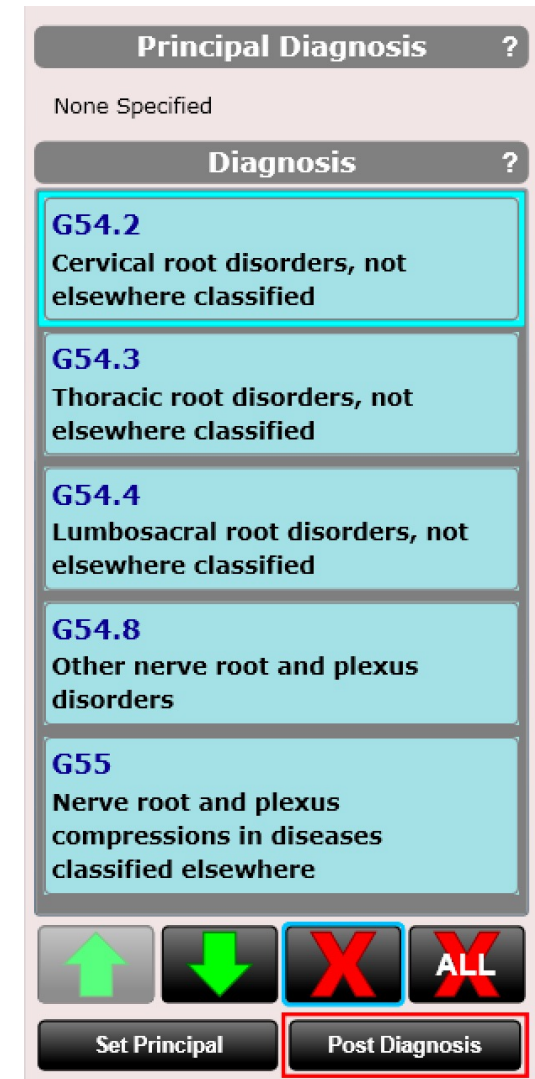
SOAP – Assessment - Diagnosis

Once you are satisfied with your diagnoses, you must click the “post diagnosis” button below. You cannot sign your SOAP without first posting the diagnosis. This serves as verification that the provider as reviewed the diagnosis for the visit.

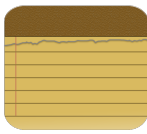
If you forget to post the diagnosis you will be prompted to do so when you click the green Save & Sign button.



Power Tip: If you have a provider that does not diagnose (e.g. massage therapist) you can avoid ever seeing this “Diagnosis Must Be Posted” message simply by removing the Diagnosis Tab from their Edit SOAP. As mentioned, this is done in Settings/Users/User Rights.



SOAP – Assessment – Risks, Assessments & Interventions



SOAP Note Chad Thompson DOB: 07/30/1997 Age: 18 Ins: Blue Cross and Blue Shield CPT copyright 2013 American Medical Association. All rights reserved. Visit: 07/07/2016 8:50 AM

Diagnosis Risks, Assessments & Interventions Free Text

Diagnosis ICD10 ICD9 SNOMED ICD9 to ICD10 Mapping Tool

S

O

A

P

S23.42
Sprain of sternum

F43.8
Other reactions to severe stress

S23.41
Sprain of ribs

T14
Injury of unspecified body region

All Chapters
Common Chapters
Cervical
Lumbar
Thoracic
Edit Groups

Home ▶

Chapter 1
Certain infectious and parasitic diseases (A00-B99)

Chapter 2
Neoplasms (C00-D49)

Chapter 3
Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism (D50-D89)

Chapter 4
Endocrine, nutritional and metabolic diseases (E00-E89)

Chapter 5
Mental, Behavioral and Neurodevelopmental disorders (F01-F99)

Chapter 6
Diseases of the nervous system (G00-G99)

Chapter 7
Diseases of the eye and adnexa (H00-H59)

Chapter 8
Diseases of the ear and mastoid process (H60-H95)

Chapter 9

↑ ↓ ✕ ALL

Post Diagnosis

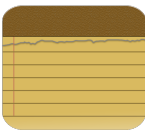
Qualifier Date of Current Illness 14 Qualifier Other Date 15

▼ ✕ 7/31/2014 ▼ ✕

▼ ✕ ▼ ✕

Close Dock Save Save & Sign Back Next Dashboard

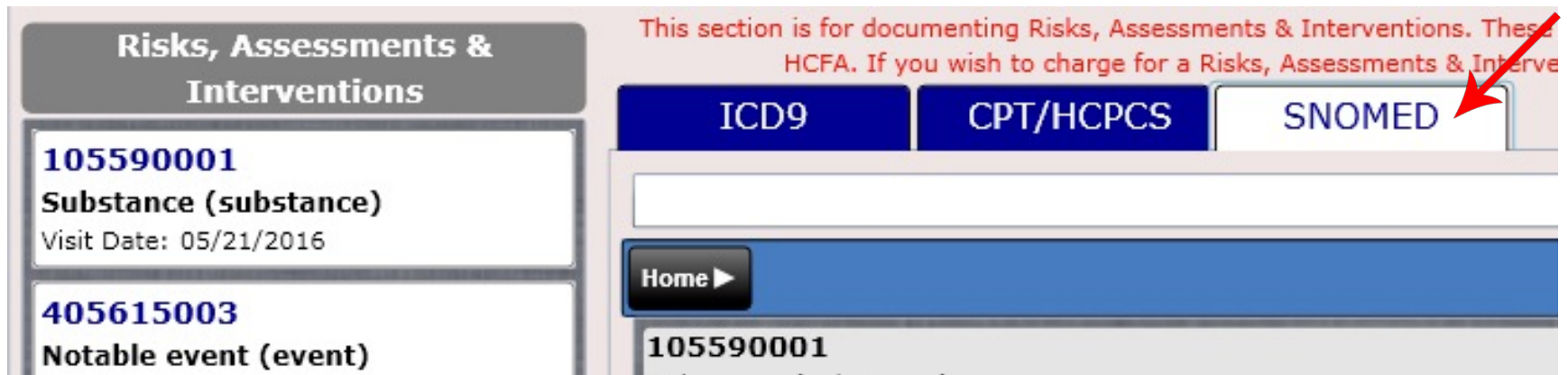
SOAP – Assessment – Risks, Assessments & Interventions



This feature was designed to support Meaningful Use and is no longer needed.

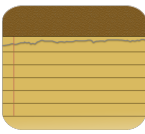
The Risks, Assessments & Interventions tab is used almost EXCLUSIVELY to document interventions to meet Clinical Quality Measure requirements. If you are not practicing Meaningful Use for Medicare, we advise you “hide” this tab in Settings/Users/User Rights.

If you are practicing meaningful use, you should have the Clinical Decision Support rules enabled (Settings/Clinical Decision Support). When enabled you will be prompted if and when you need to record an intervention using the Risks, Assessments & Interventions tab. You will be alerted with a pop-up message, for example, stating your patient is underweight and needs nutrition counseling. The software will provide you with a few SNOMED code options. You can then select one of these codes and manually type the code or code description into the SNOMED tab of the Risks, Assessments & Interventions section. This will then document the intervention and keep you compliant with the meaningful use requirement for that patient’s specific situation.



The screenshot shows the 'Risks, Assessments & Interventions' section of a software interface. On the left, there is a list of codes and descriptions: '105590001 Substance (substance)' with a visit date of '05/21/2016', and '405615003 Notable event (event)'. On the right, there are three tabs: 'ICD9', 'CPT/HCPCS', and 'SNOMED'. A red arrow points to the 'SNOMED' tab. Above the tabs, a red text box contains the instruction: 'This section is for documenting Risks, Assessments & Interventions. These are billable under Medicare (HCFA). If you wish to charge for a Risks, Assessments & Interventions, you must select a code from the SNOMED tab.' Below the tabs, there is a 'Home' button and a list of codes, with '105590001' visible at the top.

SOAP – Assessment – Risks, Assessments & Interventions



SOAP Note Janet Anderson DOB: 09/30/1986 Age: 30 Ins: Cash CPT copyright 2013 American Medical Association. All rights reserved.

Visit: 09/29/2016
15:00 PM

Diagnosis

Risks, Assessments & Interventions

Free Text

Risks, Assessments & Interventions

This section is for documenting Risks, Assessments & Interventions. These are not billable and will not appear on a HCFA. If you wish to charge for a Risks, Assessments & Interventions use the Charges Tab.

ICD9

CPT/HCPCS

SNOMED

103699006

Patient referral to dietitian
(procedure)

Visit Date: 09/29/2016

Home ▶

105590001

Substance (substance)

ADD

243796009

Situation with explicit context (situation)

ADD

254291000

Staging and scales (staging scale)

ADD

260787004

Physical object (physical object)

ADD

272379006

Event (event)

ADD

308916002

Environment or geographical location (environment / location)

ADD

123037004

Body structure (body structure)

ADD

123038009

Specimen (specimen)

ADD

48176007

Social context (social concept)

ADD

Edit



ALL

Load More

Close

Dock

Save

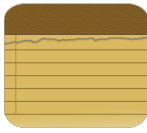
Save & Sign

Back

Next

Dashboard

SOAP – Assessment – Macros/Free Text



Macros/Free Text

The Assessment macros work exactly like the Subjective, Objective and Plan macros. The only difference is there are different macros to choose from.

After spending ample time with the macros, you will be able to write fast highly detailed SOAP notes.

The screenshot shows a software interface for writing a SOAP note. At the top, it displays patient information: "SOAP Note - Brady E Albery ALBBR000 DOB: 12/16/1979 Age: 41 Ins: BCBS" and a visit date/time: "Visit: 12/17/2020 13:00 PM". The interface has a vertical sidebar on the left with tabs for "S", "O", "A", and "P". The main area is titled "Diagnosis" and "Free Text". The text in the "Free Text" field reads: "Brady states he is tolerating treatment well. Brady is feeling worse after his treatment today. Brady is currently in the repair phase of healing. Due to the presentation of Brady's current condition/symptoms it is recommended he go on light duty at work for 10 days." Below the text field is a grid of assessment macros. The macros are: "Better After Treatment", "Same After Treatment", "Worse After Treatment", "Tolerated Treatment Well", "Patient States", "Patient Compliance", "Phase of Healing", "Type of Care", "Complicating Factors", "Problem Category", "Leveled Exams (E/M) - Medical Decision Making Section", "Diagnostic Classification of Low Back Pain", "Light Duty", "Excused From Sports/P.E.", and "Excused From Work". At the bottom of the interface are buttons for "Close", "Dock", "Save", "Save & Sign", "Back", "Next", "Preview", and "Dashboard".

SOAP – Plan - Charges

Charges

Entering charges is as easy as tapping the buttons on your grid. Like the Diagnosis screen, there is a list box on the left and a grid of buttons on the right. There are also up to 11 button groups that can be selected. Remember, the grid is completely customizable by provider in Settings/Pin Charge Codes.

To add a charge, select it from the grid, or use the search bar at the top. Search by name or CPT code. Once the charge is selected it will be added to the “Charges” list box. If you wish to add multiple units for that charge, use the green arrows to increment up or down the number of units.

Use the “Remove” or “Remove All” buttons to remove charges from the Charges list.

SOAP Note - Brady E Albery ALBBR000 DOB: 12/16/1979 Age: 41 Ins: BCBS CPT copyright: 2020 American Medical Association. All rights reserved. Visit: 12/17/2020 13:00 PM

Charges

Free Text Care Plan Treatment Wrap Up CPOE

Charges

98941 Manipulation 3-4 Regions 1 Units
PRC: \$40.00 DISC: \$0.00

97110 Therapy-Therapeutic Exercise 1 Units
PRC: \$40.00 DISC: \$0.00

500 New Patient Cash Visit

0000 Records Fee

99201-25 New Patient Problem Focused Examination

99202-25 New Patient Expanded Problem Focused Examination

99203-25 New Patient Detailed Examination

99204-25 New Patient Comprehensive Examination

99205-25 New Patient Comprehensive (High Complexity) Exam

99211-25 Established Patient Minimal Examination

99212-25 Established Patient Problem Focused Exam

99213-25 Established Patient Expanded Exam

99214-25 Established Patient Detailed Exam

99371 Phone Call-Brief

99372 Phone Call-Intermediate

99373 Phone Call-Lengthy

97750 Physical Performance test with Report

00001 No Charge Office Visit

Cash Charge Claimable Charge Care Plan

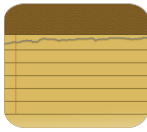
Chiro Visit Yes

Therapy Visit No

Diagnosis Pointers Toggle Care Plan Toggle Insurance Claimable Change Price Discount by Amount Discount by Percent Taxed

Close Dock Save Save & Sign Back Next Preview Dashboard

SOAP – Plan - Charges



SOAP Note – Brady E Albery ALBBR000 DOB: 12/16/1979 Age: 41 Ins: BCBS

CPT copyright 2020 American Medical Association. All rights reserved.

Visit: 12/17/2020
13:00 PM

Charges
Free Text
Care Plan
Treatment
Wrap Up
CPOE

Charges ?

98941
Manipulation 3-4 Regions

1 Units

■ PRC: \$40.00 DISC: \$0.00

97110
Therapy-Therapeutic Exercise

1 Units

■ PRC: \$40.00 DISC: \$0.00

■ Cash Charge ■ Claimable Charge ■ Care Plan

↑
↓
X
ALL

Chiro Visit

Yes ▼

Therapy Visit

No ▼

Charges **Care Plan Charges**

Add From Charge Groups

Exam/Consult

Adjustment

Therapy

Radiography

Analgesics

Electrotherapy

Exercise/Rehab

Heat/Cold Therapy

Supplements

Orthopedics

Pillows

500 New Patient Cash Visit	0000 Records Fee	99201-25 New Patient Problem Focused Examination	99202-25 New Patient Expanded Problem Focused Examination
99203-25 New Patient Detailed Examination	99204-25 New Patient Comprehensive Examination	99205-25 New Patient Comprehensive (High Complexity) Exam	99211-25 Established Patient Minimal Examination
99212-25 Established Patient Problem Focused Exam	99213-25 Established Patient Expanded Exam	99214-25 Established Patient Detailed Exam	99371 Phone Call-Brief
99372 Phone Call-Intermediate	99373 Phone Call-Lengthy	97750 Physical Performance test with Report	00001 No Charge Office Visit

Diagnosis Pointers

Toggle Care Plan

Toggle Insurance Claimable

Change Price

Discount by Amount

Discount by Percent

Taxed

Close

Dock

Save

Save & Sign

Back

Next

Preview

Dashboard

SOAP – Plan - Charges

Editing Charges

The charges tab is made of of several components

- **Charges Grid** – This is completely customizable in the Settings app/Pin Charge Codes app



The charges grid allows you to add (pin) your favorite charges into custom folders.

Add From Charge Groups [Input Field]

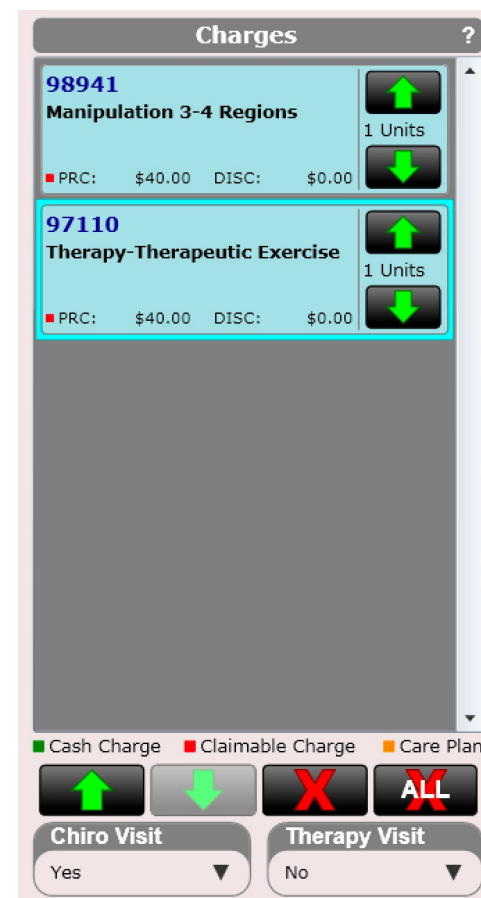
Charges | **Care Plan Charges**

Exam/Consult	500 New Patient Cash Visit	0000 Records Fee	99201-25 New Patient Problem Focused Examination	99202-25 New Patient Expanded Problem Focused Examination
Adjustment	99203-25 New Patient Detailed Examination	99204-25 New Patient Comprehensive Examination	99205-25 New Patient Comprehensive (High Complexity) Exam	99211-25 Established Patient Minimal Examination
Therapy	99212-25 Established Patient Problem Focused Exam	99213-25 Established Patient Expanded Exam	99214-25 Established Patient Detailed Exam	99371 Phone Call-Brief
Radiography	99372 Phone Call-Intermediate	99373 Phone Call-Lengthy	97750 Physical Performance test with Report	00001 No Charge Office Visit
Analgesics				
Electrotherapy				
Exercise/Rehab				
Heat/Cold Therapy				
Supplements				
Orthopedics				
Pillows				

Diagnosis Pointers | **Toggle Care Plan** | **Toggle Insurance Claimable** | **Change Price** | **Discount by Amount** | **Discount by Percent** | **Taxed**

SOAP – Plan - Charges

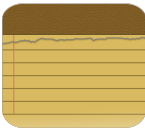
- **Charges list box (shown to the right)** – Lists the individual charges. Allows you to add or subtract units (using the arrow buttons) as well as delete a charge or delete all charges.
- **Charges Editing Buttons (shown below)** – These buttons allow you to input diagnosis pointers, toggle a charge as insurance or cash, toggle a charge to care plan, change the price or discount or tax a charge.
- **Charges Grid** – Allows you to select a charge from the grid (shown on next page)
- **Charges Search Bar** – Allows you to search for a charge by name or CPT code (above charges grid)



Charges Editing Buttons



SOAP – Plan - Charges



Charges Grid – Allows you to select a charge by selecting the button associated with that charge. The grid is organized into pages as notated by the dot(s) at the bottom.

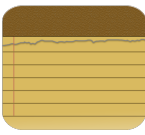
To the left of the grid are folders. Each folder, such as “Exam” will display charges in the “Exam” folder. The charges grid can be customized in the Settings/Pin Charges app. You can also create new charges or edit existing charges in the Settings/Products app or Settings/Services app.

Below the grid are a series of buttons that allow you to input diagnosis pointers, toggle between claimable or cash, change the price, toggle a care plan/non-care plan charge, add a discount or tax or un-tax a charge.

Charges Grid Shown Below

The screenshot shows a software interface for managing charges. At the top left, there is a button labeled "Add From Charge Groups" next to an empty input field. Below this, there are two tabs: "Charges" and "Care Plan Charges", with "Care Plan Charges" currently selected. On the left side, there is a vertical list of folder buttons: Exam/Consult, Adjustment, Therapy, Radiography, Analgesics, Electrotherapy, Exercise/Rehab, Heat/Cold Therapy, Supplements, Orthopedics, and Pillows. The main area is a grid of charge items, each with a code and a description. The grid is organized into four columns and four rows. Below the grid, there is a row of control buttons: Diagnosis Pointers, Toggle Care Plan, Toggle Insurance Claimable, Change Price, Discount by Amount, Discount by Percent, and Taxed.

Code	Description	Code	Description	Code	Description	Code	Description
500	New Patient Cash Visit	0000	Records Fee	99201-25	New Patient Problem Focused Examination	99202-25	New Patient Expanded Problem Focused Examination
99203-25	New Patient Detailed Examination	99204-25	New Patient Comprehensive Examination	99205-25	New Patient Comprehensive (High Complexity) Exam	99211-25	Established Patient Minimal Examination
99212-25	Established Patient Problem Focused Exam	99213-25	Established Patient Expanded Exam	99214-25	Established Patient Detailed Exam	99371	Phone Call-Brief
99372	Phone Call-Intermediate	99373	Phone Call-Lengthy	97750	Physical Performance test with Report	00001	No Charge Office Visit



SOAP – Plan - Charges

Buttons Below Charges Grid

There are a series of buttons located at the bottom of the charges grid. These buttons allow you to edit individual charges or diagnosis pointers. Buttons include:

- **Diagnosis Pointers** – This opens the diagnosis pointer dialog allowing you to select which charges are associated with which diagnosis
- **Toggle Care Plan** – Change a charge to or from a care plan. This will turn the charge orange (when it is a care plan charge). Only care plan payments can be applied to a care plan charge.
- **Toggle Bill Insurance/Patient** – This button will change the status of a charge to Cash or Ins
- **Change Price** – This button will open a dialog box allowing you to freely change the price for a charge
- **Discount by Amount** – This button will open a dialog box allowing you to discount a charge by a specified amount
- **Discount by Percent** – This button will open a dialog box allowing you to discount a charge by a specific percent
- **Taxed** – This button will add tax (denoted by a “T”) or remove tax from a charge

Diagnosis
Pointers

Toggle Care
Plan

Toggle
Insurance
Claimable

Change Price

Discount by
Amount

Discount by
Percent

Taxed

SOAP – Plan - Charges

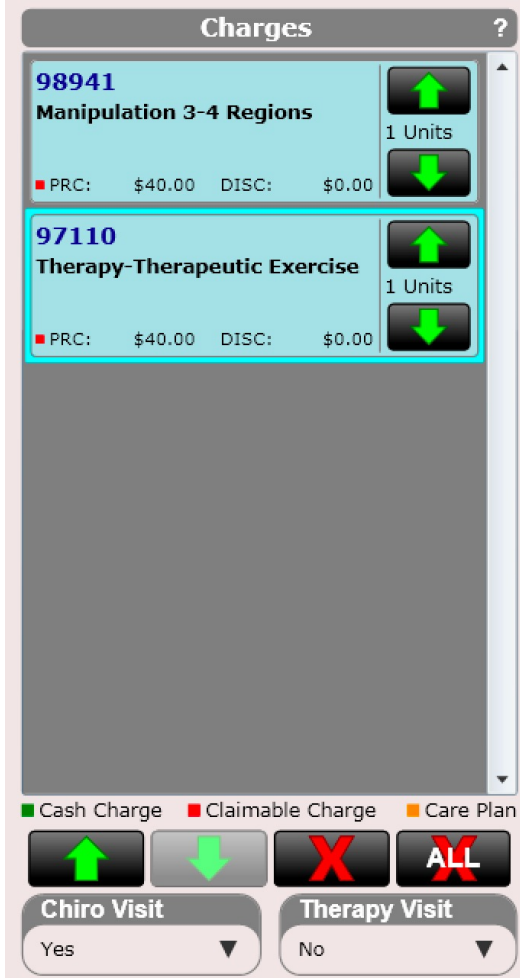
Charges List Box

The charges list box shows you a list of charges. Each charge contains the following information:

- **Cash, Claimable or Care Plan Charge** – This is noted by the red or green square in the lower left-hand corner of the charge. Green = Cash Charge. Red = Claimable Charge. Claimable is another word for insurance charge. Care Plan charges appear as orange.
- **CPT Code** – Number in upper left corner such as “98941”
- **Description** – Charge description such as “Manipulation 3-4 Regions”
- **PRC:** - This is the price of the product or service
- **DISC:** This is the amount discounted
- **T** – If there is a “T” displayed it means the charge is taxed. Notice the Basic Cervical Support Pillow to the right has a “T” after the price.
- **Units** – The number of billable units for that charge

At the bottom of the charges list box are 4 buttons.

- **Up Arrow** – Move a selected charge up
- **Down Arrow** – Move a selected charge down
- **X** – Delete a selected charge
- **X All** – Delete all charges



The screenshot shows a software interface titled "Charges" with a search icon. It displays two charge entries:

- 98941 Manipulation 3-4 Regions**: A green square in the bottom-left corner indicates it is a Cash Charge. The price is \$40.00 (PRC) and the discount is \$0.00 (DISC). It has 1 Unit. There are green up and down arrow buttons to its right.
- 97110 Therapy-Therapeutic Exercise**: A red square in the bottom-left corner indicates it is a Claimable Charge. The price is \$40.00 (PRC) and the discount is \$0.00 (DISC). It has 1 Unit. There are green up and down arrow buttons to its right.

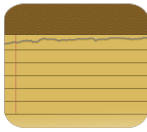
At the bottom of the interface, there is a legend:

- Green square: Cash Charge
- Red square: Claimable Charge
- Orange square: Care Plan

Below the legend are four buttons: an up arrow, a down arrow, an "X" button, and an "ALL" button. At the very bottom, there are two dropdown menus: "Chiro Visit" with "Yes" selected, and "Therapy Visit" with "No" selected.

Charges copy over visit to visit saving you time from having to re-enter them. Delete charges that are not related to today's visit. You can also specify at the charge level in Settings/Services or Settings/Products if you do not want a specific charge (like an exam) to automatically copy over to the next visit.

SOAP – Plan - Charges



Chiro and Therapy Visit Counters

Visit Counter Dropdowns – Here you can select Yes or No for both the chiropractic visit counter and therapy visit counter. These counters will update the insurance case and deduct a chiro or therapy visit from the count.

Power Tip: You can set defaults for these visit counters in Settings/Users.

My Treatments Default as a 'Chiro Visit' ?
Yes ▼

My Treatments Default as a 'Therapy Visit' ?
No ▼

Below is the check in dialog which is one place where you can see these counters in action.

General | **Care Plan**

Brady E Albery

Select Visit Insurance Case: BCBS | Edit Insurance | Patient Portal: Not Enrolled | Appt Reminder: Text (Mobile) | Fee Schedule: Cash

Insurance Carriers	Chiro Visits	Therapy	Chiro Amt
Primary: 3456 WECOME WAY	21 of 20	1 of 10	\$1,950 of \$0
Secondary:			
Tertiary:			

Member Responsibility: Deductible: None, Copay: \$20.00, Co-insurance: 0%

Reason for Visit: Adjustment | Reason/Visit Notes: | Treatment Plan: 3x per week for 4 week(s) to 12/2/2020, 2x per week for 4 week(s) to 1/27/2021, 12 of 20 completed | Account Information: Previous Balance: \$50.76

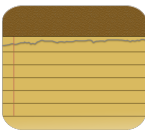
Charges ?

98941
Manipulation 3-4 Regions
1 Units
PRC: \$40.00 DISC: \$0.00

97110
Therapy-Therapeutic Exercise
1 Units
PRC: \$40.00 DISC: \$0.00

Legend: ■ Cash Charge ■ Claimable Charge ■ Care Plan

Chiro Visit: Yes ▼ | Therapy Visit: No ▼



SOAP – Plan - Charges

Diagnosis Pointers (24e)

The diagnosis dialog allows you to select which charges are associated with what diagnosis

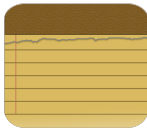
By default, all boxes are checked.

On subsequent visits the selections you made previously will be copied over. Therefore, you do not need to check them again if nothing has changed.

Below is an example of what can be populated into the Diagnosis Pointer section on the CMS-1500 HCFA form using the diagnosis pointer dialog.



Diagnosis Pointers		Diagnosis
Charges	723.1	
	Cervicalgia	
98941	Manipulation 3--	<input checked="" type="checkbox"/>
97012	Therapy-Tractio	<input checked="" type="checkbox"/>
00000	Care Plan - 20 \	<input checked="" type="checkbox"/>



SOAP – Plan - Charges

Power Tip: Charges can be entered by a provider or a non-provider. However, in order to submit charges to insurance the SOAP note must be signed by the provider. Therefore, claims will NOT go into the Claims app until the provider has signed the SOAP Note.

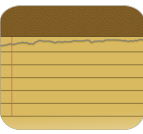
The minimum action necessary to checkout a patient is to enter the charges and save the SOAP note. Then move the patient to awaiting checkout and on to checkout. The provider can utilize the “Unfinished SOAP Note” list box on the front desk at anytime to complete a SOAP.

The Front Desk has a list box called “Unfinished SOAP Notes” to alert the provider of any SOAP Notes they still need to complete.

Remember, insurance (claimable) charges will NOT show up in the Claims app until AFTER the provider has signed the SOAP Note.

Unfinished SOAP Notes (on Front Desk)

Unfinished SOAP Notes		
Brandon Fisher	Appt Time: Jun 26, 2:42 PM	Dr. Brian
Chad Thompson	Appt Time: Jun 26, 4:00 PM	Dr. Brian
Chad Thompson	Appt Time: Jun 27, 10:00 AM	Dr. Brian
Chad Thompson	Appt Time: Jun 27, 12:30 PM	Dr. Brian
Matt Woods	Appt Time: Jun 28, 9:15 AM	Dr. Brian
Bella Rogers	Appt Time: Jun 28, 10:15 AM	



SOAP – Plan - Charges

Editing Charges

Above the charges grid is a search bar. You can search by the following:

- Charge name
- Charge code (CPT code)

Once you find the charge you are looking for by searching, simply select it to add it to the Charges List Box.

biofreez

1000
Biofreeze Cryospray - 4 Oz

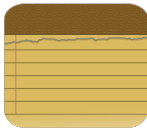
1005
Biofreeze Gel Tube with Touch Free Applicator - 4 Oz

1007
Biofreeze Roll-On - 3 Oz

1006
Biofreeze Tube - 4 Oz

Electrotherapy	99213-25	99214-25	99215-25	99371
Exercise/Rehab	Established Patient Expanded Exam	Established Patient Detailed Exam	Established Patient Comprehensive Exam	Phone Call-Brief

SOAP – Plan – Macros/Free Text

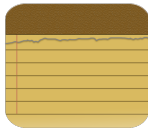


Macros/Free Text

The Plan macros work exactly like the Subjective, Objective, and Assessment macros. The only difference is there are different macros to choose from.

After spending ample time with the macros, you will be able to quickly write highly detailed SOAP notes.

The screenshot displays a medical software interface for a SOAP note. At the top, the patient information is shown: "SOAP Note - Brady E Albery ALBBR000 DOB: 12/16/1979 Age: 41 Ins: BCBS". The visit date and time are "12/17/2020 23:15 PM". The interface has a vertical sidebar on the left with sections labeled S, O, A, and P. The top navigation bar includes tabs for "Charges", "Free Text", "Care Plan", "Treatment", "Wrap Up", and "CPOE". The main text area contains the following text: "An at home exercise plan was personalized and demonstrated to the patient to help him get in better shape. The following treatment was performed on Brady today: upper extremity manipulation. Treatment was performed for 12 minutes. |". Below the text area is a grid of macro buttons for the Plan section, including "Treatment Performed", "Goals", "Short Term Goals", "Long Term Goals", "Continue Current Treatment Plan", "Additional Plan - Cryotherapy", "Additional Plan - Heat", "Stretching", "Strengthening", "Home Exercise Plan", "Weight Loss Plan", "RICE", "Report of Findings Next Visit", "X-Rays Next Visit", and "Additional Diagnostic Testing Requested". At the bottom, there are buttons for "Close", "Dock", "Save", "Save & Sign", "Back", "Next", "Preview", and "Dashboard".



SOAP – Plan – Care Plan

SOAP Note – Brady E Albery ALBBR000 DOB: 12/16/1979 Age: 41 Ins: BCBS

CPT copyright 2020 American Medical Association. All rights reserved.

Visit: 12/17/2020
23:15 PM

S
O
A
P

Charges
Free Text
Care Plan
Treatment
Wrap Up
CPOE

Goals

Increase Range of Motion
 Expected Completion Date: None Selected
 Evaluation Due Date: None Selected
 Last Evaluation Date: Dec 17, 2020
 Percent Achieved: 90%

Add New
Re-Evaluate

Delete
Edit

Treatment Plan

As Needed for 0 visits Created By: Dr. Brian Albery

3 times per week
for 4 week(s)

then 2 times per week for 4 week(s)

then 0 times per week for 0 week(s)

then 0 times per week for 0 week(s)

New Plan

Count This Visit in Treatment Plan? Yes ▼

11 previously completed 20 total
12/2/2020 to 1/27/2021

Planned Care Show Active Only

Add
Edit
Delete

Health Concerns Show Active Only

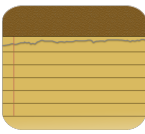
Add
Edit
Delete

Care Team Members Select Remove

Dr. Brian Albery

Reason for Referral (this visit only)

Close
Dock
Save
Save & Sign
Back
Next
Preview
Dashboard



SOAP – Plan – Care Plan

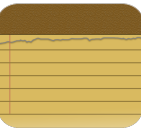
Treatment Plan

Here you can create a treatment plan. Select the “as needed” check box or use the drop-down arrows to customize a plan. An example of a treatment plan is shown below:

- 3 times per week for 4 weeks
- 2 times per week for 4 weeks
- 1 time per week for 4 weeks

Power Tip: If you do not want to count this visit as part of the treatment plan change the “Count This Visit in Treatment Plan?” to “No”.

The screenshot shows a web form titled "Treatment Plan". At the top, there is a checkbox for "As Needed" which is unchecked, followed by a checked checkbox and the text "for 21 visits". To the right, it says "Created By: Dan". Below this, there are three rows of frequency settings, each starting with "then 0" and followed by "times per week" and "for 0 week(s)". The first row has "3" in a dropdown for "times per" and "4" in a dropdown for "week(s)". At the bottom, there is a dropdown menu for "Count This Visit in Treatment Plan?" with "Yes" selected. A red arrow points to this dropdown. At the bottom of the form, it displays "3 previously completed 33 total" and "6/14/2016 to Present". A "New Plan" button is located on the right side of the form.



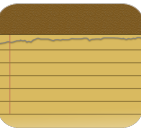
SOAP – Plan – Care Plan

Care Team Members

Care Team Members are an EHR requirement for becoming certified. The software is smart and defaults the rendering provider as the Care Team Member for the visit. However, you can select additional care team members if you wish. For example, perhaps a nurse assisted the patient, and you want to list them as one of the patient's care team members. You can do so here.

Care Team Members appear on the Clinical Summary.





SOAP – Plan – Care Plan

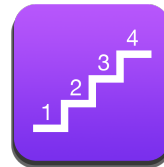
Goals

Create Goals for your patient. Then on subsequent visits you can re-evaluate the goal and select the percent achieved. When a goal is complete you can use the buttons at the bottom to close the goal.

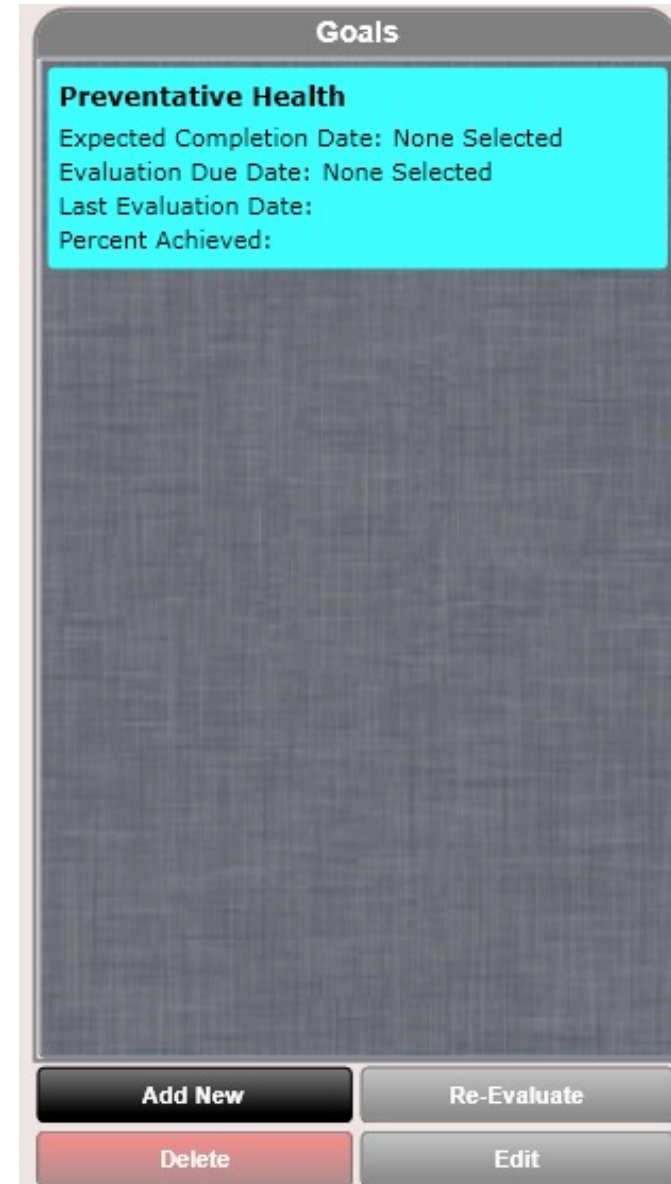
Power Tip: You can edit the Goals Master list in Settings/Goals



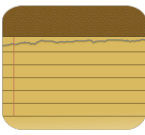
Settings



Goals



SOAP – Plan – Care Plan



When entering a goal for your patient you can:

- Include goal instructions
- Percent achieved (this helps you monitor progress)
- Set an evaluation date (a pop up will remind you when this date is past due when you Edit SOAP)
- Visit comments (specific comments related to this visit only)

If you provide your patient with a clinical summary goals as well as their instructions will be present. Clinical Summaries can be printed at checkout or in Dashboard/Visits/Clinical Summary.

Visit Comments for this Goal

Goal
Smoking Cessation ▼ [Edit Goals Master List](#)

Expected Goal Completion Date (this is the date you expect the patient to achieve their goal)
▼ ▼ Expected Goal Completion Date: None Selected [Clear Date](#)

Goal Instructions (modifying instructions affects previous visits)
Stop smoking

Percent Acheived

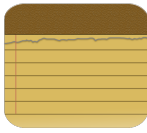
0	10	20	30	40	50	60	70	80	90	100
---	----	----	----	----	----	----	----	----	----	-----

Evaluation Date (Use this date for the next time you want to evaluate this goal)
▼ ▼ Last Evaluation Date: Next Evaluation Date: None Selected

Visit Comments

[Cancel](#) [Open Goal](#) [Close Goal](#) [Finish](#)

SOAP – Plan – Wrap Up



The treatment tab will allow you to quickly document treatments such as ART, Laser, Decompression, AIS, Manual Therapy, Relaxation Massage, Traction, Diathermy, Ultrasound and Muscle Stimulation. You can customize which treatments you want shown in this list box (e.g. remove ones you do not use as well as set a color you like).

SOAP Note - Brady E Albery ALBBR000 DOB: 12/16/1979 Age: 41 Ins: BCBS CPT copyright: 2020 American Medical Association. All rights reserved. Visit: 12/17/2020 23:15 PM

S Charges Free Text Care Plan **Treatment** Wrap Up CPOE

- UltraSound
- Class IV Laser Therapy
- Infrared
- Instrument Assisted Soft Tissue Manipulation
- Heat Therapy
- Massage
- Cryotherapy
- Muscle Stimulation
- Trigger Point Therapy
- Graston IASTM
- Therapeutic Exercises
- Neuromuscular Re-education
- Dry Needling

O

A

P

HIIT Exercise **Last Treatment:** 04/14/2020
Active Release Technique (ART) was performed for 30 minutes to the following regions: **Body:** Coracobrachialis - Right, Bicipital aponeurosis - Right, Abductor pollicis longus - Left, Obturator externus - Left, Biceps brachii - Left.

Laser Treatment **Last Treatment:** 11/27/2020
Laser was performed at 55 watts for 30 minutes to the following regions: **Body:** Biceps brachii - Left, Gluteus minimus - Right, Hamstrings - Left.

Decompression Treatment **Last Treatment:** 12/09/2020
Decompression Treatment was performed to the following regions: L1, L2, L3, L4, L5.

Manual Therapy **Last Treatment:** 07/27/2020
Manual Therapy was performed for 30 minutes to the following regions: **Body:** Biceps brachii - Left, Coracobrachialis - Left, Plantaris - Right, Peroneus brevis - Right.

Massage **Last Treatment:** 08/19/2020
Relaxation Massage was performed for 30 minutes to the following regions: **Spine:** C6. **Body:** Galea aponeurotica - Left, Brachialis - Left, Gluteus medius - Right, Pectineus - Left, Anterior scalene - Right.

Traction **Last Treatment:** 07/13/2020
Traction was performed for 30 minutes to the following regions: **Spine:** T3, T4, T2, C2. **Body:** Iliacus - Right, Pectineus - Left.

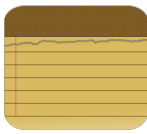
UltraSound **Last Treatment:** 12/02/2020
UltraSound was performed at 80 watts for 15 minutes at 55 MHz frequency to the following regions: **Body:** Brachialis - Right, Diaphragm - Right, Deltoid - Left.

Muscle Stimulation **Last Treatment:** 04/15/2020
Muscle Stimulation was performed at 10 volts for 20 minutes to the following regions: **Body:** Biceps brachii - Right, Coracobrachialis - Right.

Edit Arrange New Treatment Edit Treatment Re-Evaluate Treatment Delete Treatment

Close Dock Save Save & Sign Back Next Preview Dashboard

SOAP – Plan – Wrap Up



SOAP Note - Brady E Albery ALBBR000 DOB: 12/16/1979 Age: 41 Ins: BCBS CPT copyright 2020 American Medical Association. All rights reserved. Visit: 12/17/2020 23:15 PM

Charges **Free Text** **Care Plan** **Treatment** **Wrap Up** **CPOE**

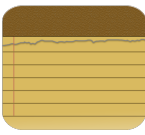
S **Patient Discharge Instructions** (Available on Receipt)
At home stretches were demonstrated to help you avoid further injury, relieve pain associated with musculoskeletal stiffness, and improve range of motion to the affected areas. After reviewing your history, exam and/or x-ray findings, I am recommending that you have a/an basic metabolic panel, CAT scan and celiac profile.

O **Note to Front Desk** (not part of SOAP Note) **Edit**
schedule patient 2 days from now
schedule patient 2 days from now

A **Next Appointment**
12/29/2020 9:00 AM

P **Home**

Continue Current Treatment Plan	Additional Plan - Cryotherapy	Additional Plan - Heat	Stretching	Strengthening
Home Exercise Plan	Weight Loss Plan	RICE	Increase Water Intake	Goals
Report of Findings Next Visit	X-Rays Next Visit	Additional Diagnostic Testing Requested	Referral	Sports/School Restrictions



SOAP – Plan – Wrap Up

Wrap Up

- Patient Discharge Instructions (appear on receipt as well as clinical summary)
- Note to Front Desk (visible at check-out but not part of SOAP Note)

The Patient Discharge Instructions will be printed on the visit receipt. It is also part of the SOAP note.

The Note to the front desk will appear when you check out the patient at the cash register and will **NOT** be printed on the visit receipt. It is also **NOT** part of the SOAP note.

Create pre-canned messages using the Edit button.

Use the discharge macros or type free text to instruct your patient on what to do prior to their next visit.

Patient Discharge Instructions (Available on Receipt)

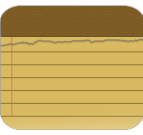
A screenshot of a software interface showing a large, empty rectangular box for entering Patient Discharge Instructions. The title bar at the top reads "Patient Discharge Instructions (Available on Receipt)".

Note to Front Desk (not part of SOAP Note) Edit

▼ X

schedule patient 2 days from now
check patient account
schedule in 1 week

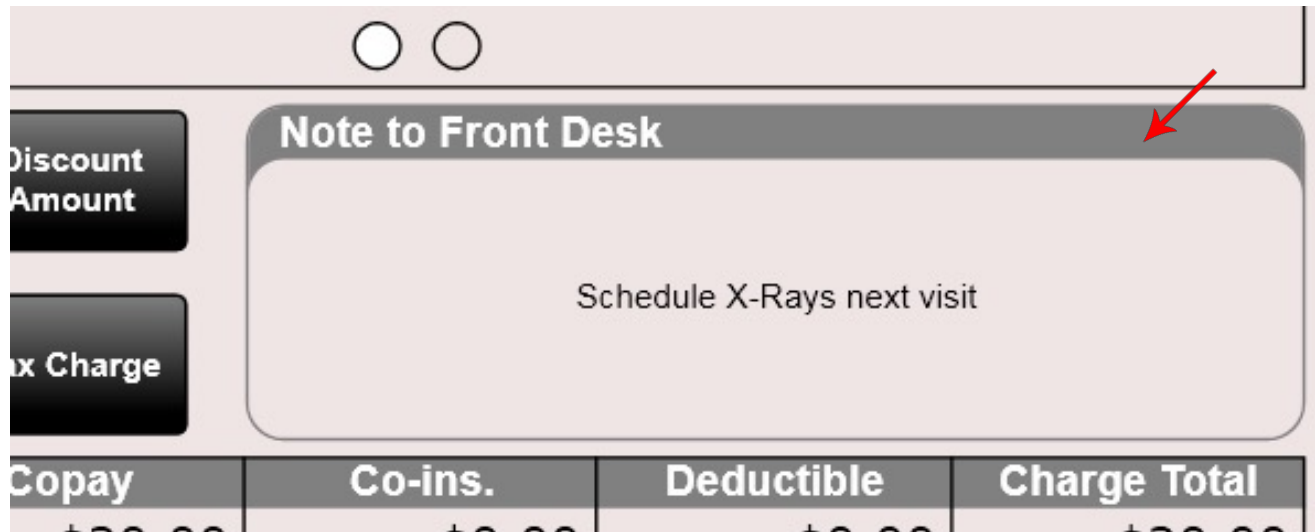
A screenshot of a software interface showing a "Note to Front Desk" form. The title bar reads "Note to Front Desk (not part of SOAP Note)" and includes an "Edit" button. A red arrow points to the "Edit" button. Below the title bar is a text area containing the text: "schedule patient 2 days from now", "check patient account", and "schedule in 1 week". There are also a dropdown arrow and a red "X" icon in the top right corner of the text area.

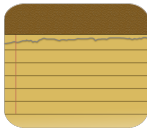


SOAP – Plan – Wrap Up

- Note to Front Desk

Pictured to the right is an image showing the Note to Front Desk at the cash register.





SOAP – Plan – CPOE

- CPOE

CPOE stands for “computerized physician order entry”. This tab allows you to create a medication order for your patient.

As chiropractors do not traditionally prescribe medications, we recommend removing this tab in Settings/Users.

This information will appear on the Clinical Summary AND when adding the medication order if you select the “Add to Medication List” then the medication/supplement will appear in MIST as well.

SOAP Note Chad A Thompson DOB: 12/12/1957 Age: 59 Ins: BLUE CROSS CPT copyright 2013 American Medical Association. All rights reserved. Visit: 04/30/2017 9:35 AM

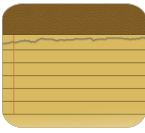
Charges Free Text Care Plan Treatment Wrap Up CPOE Pt. Education

Medications	Dose	Route	Frequency	Duration	Date Ordered	Status
Meclizine Oral Tablet [Medivert]					04/30/2017	Ordered

View Prescription History Add Edit Delete

Close Dock Save Save & Sign Back Next Dashboard

SOAP – Plan – CPOE



SOAP Note Chad Thompson DOB: 12/12/1957 Age: 58 Ins: Blue Cross and Blue Shield CPT copyright 2013 American Medical Association. All rights reserved. Visit: 09/15/2016 8:40 AM

Medications Details

Medication glipiZIDE 10 MG Oral Tablet		Rx Norm Code 310488
Dose 1	Unit Tablet	Route ORAL (PO)
Frequency QD (Daily)	PRN <input type="checkbox"/>	Dose Given <input type="radio"/> Yes <input checked="" type="radio"/> No
Frequency Details <input type="checkbox"/> Sun <input type="checkbox"/> Mon <input type="checkbox"/> Tue <input type="checkbox"/> Wed <input type="checkbox"/> Thu <input type="checkbox"/> Fri <input type="checkbox"/> Sat		
Duration <input type="text"/> <input type="radio"/> Days <input type="radio"/> Weeks <input type="radio"/> Months		Is CPOE <input checked="" type="checkbox"/>
Refill Quantity 0	Dispense Quantity 0	
Status Ordered	Date Ordered 09-15-2016	
Start Date <MM-dd-yyyy>	End Date <MM-dd-yyyy>	
Ordering Provider Dr. Brian Albery	Add to Medications List <input checked="" type="radio"/> Yes <input type="radio"/> No	
Fill Instructions <input type="text"/>		

Save & Close Cancel

When adding a medication order be aware of two important check boxes.

- CPOE (this defaults to yes. If you are practicing meaningful use this box must be checked in order for the medication order to count toward your numerator).
- Add to Medication List – When this is checked “Yes” your medication order will be added to the Edit SOAP MIST tab in the Medications list.

SOAP – Plan – Pt. Education

- Pt. Education

The patient education tab allows you to view educational content for your patients' medications, allergies, problems and labs.

You can also document if a handout was given to your patient. It is an EHR requirement to provide a handout to your patient.

There are two ways to document a handout was given:

1. Select "Add Handout" and type in the handout name
2. Click an "Info" button. Then select "Handout Given".

The screenshot displays the 'Pt. Education' tab in a SOAP Note for Chad A. Thompson (DOB: 12/12/1957, Age: 59, Ins: BLUE CROSS). The interface is divided into several columns: Medications, Allergies, Problems, Labs, and Handout Given. Each item in the Medications, Allergies, and Problems columns has an 'Info' button. The Handout Given section shows 'Warfarin Information' and 'Alkaline phosphatase (Adults: 25-60 yo)' as items that have been provided to the patient. At the bottom, there are buttons for 'Close', 'Dock', 'Save', 'Save & Sign', 'Back', 'Next', and 'Dashboard'. A note at the bottom of the screen states: 'Patient Education is not part of the SOAP Note. Use this screen to find educational resources for your patient.'

You can also search for educational content using the Search Bar at the top. Click on the blue hyperlinks to find more information such as a drug-drug interaction checker and more.

SOAP – Plan – Pt. Education

We have already discussed clicking the “info” button on the MIST screen. On the Patient Education screen these info buttons are NOT connected to Medline Plus (as they are in MIST). Instead, they are connected to educational material that you uploaded. For example, I have added a Warfarin Handout in Settings/Patient Education for the medication Warfarin. Now when I click the “info button” a dialog will open displaying this information. You can then mark “Handout Given” to quickly record that you gave this educational material to your patient. If you are practicing meaningful use you will need to provide handouts to your patient. There is no requirement as to what you provide them so in theory you could have a stack of pamphlets to provide them. Use the Patient Education tab to document that educational material was provided to your patient.



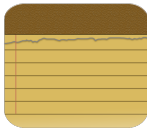
Settings



Patient
Education

Upload your own educational handouts and associate them with medications, allergies, problems or labs in Settings/Patient Education.

SOAP – Plan – Pt. Education



After clicking the “info button” the content appears. Click “Handout Given” to record this as given for this patient visit.

A screenshot of a software interface for a SOAP note. The main window is titled "Documents Viewer" and contains text about Warfarin. The text is organized into sections: a general description, "How Does Warfarin Work?", "Monitoring and Dosing Tips", and a final paragraph. A red arrow points to a "Handout Given" button at the bottom of the document viewer. The interface also shows a sidebar with SOAP note sections (S, O, A, P) and a right-hand panel with a "Given" button and a "Dashboard" button. The date and time "09/15/2016 8:40 AM" are visible in the top right corner.

SOAP Note Cl Documents Viewer

Warfarin (brand names Coumadin and Jantoven) is a prescription medication used to prevent harmful blood clots from forming or growing larger. Beneficial blood clots prevent or stop bleeding, but harmful blood clots can cause a [heart attack](#), [stroke](#), deep vein thrombosis or pulmonary embolism. Because warfarin interferes with the formation of blood clots, it is called an [anticoagulant](#). Many people refer to anticoagulants as "blood thinners"; however, warfarin does not thin the blood but instead causes the blood to take longer to form a clot.

How Does Warfarin Work?
The formation of a clot in the body is a complex process that involves multiple substances called clotting factors. Warfarin decreases the body's ability to form blood clots by blocking the formation of vitamin K–dependent clotting factors. Vitamin K is needed to make clotting factors and prevent bleeding. Therefore, by giving a medication that blocks the clotting factors, your body can stop harmful clots from forming and prevent clots from getting larger.

Monitoring and Dosing Tips
The goal of warfarin therapy is to decrease the clotting tendency of blood, not to prevent clotting completely. Therefore, the effect of warfarin must be monitored carefully with blood testing. On the basis of the results of the blood test, your daily dose of warfarin will be adjusted to keep your clotting time within a target range. The blood test used to measure the time it takes for blood to clot is referred to as a prothrombin time test, or protime (PT). The PT is reported as the International Normalized Ratio (INR).

The INR is a standardized way of expressing the PT value. The INR ensures that PT results obtained by different laboratories can be compared. It is important to monitor the INR (at least once a month and sometimes as often as twice weekly) to make sure that the level of warfarin remains in the effective range. If the INR is too low, blood clots will not be prevented, but if the INR is too high, there is a risk of bleeding.

Close Handout Given

Close

Dashboard

09/15/2016 8:40 AM

Given

Remove

Out KB

Writing a SOAP – Save & Sign

As mentioned, there are two green buttons at the bottom of the SOAP; “Save” and “Save & Sign.” Their distinctions are notated below:

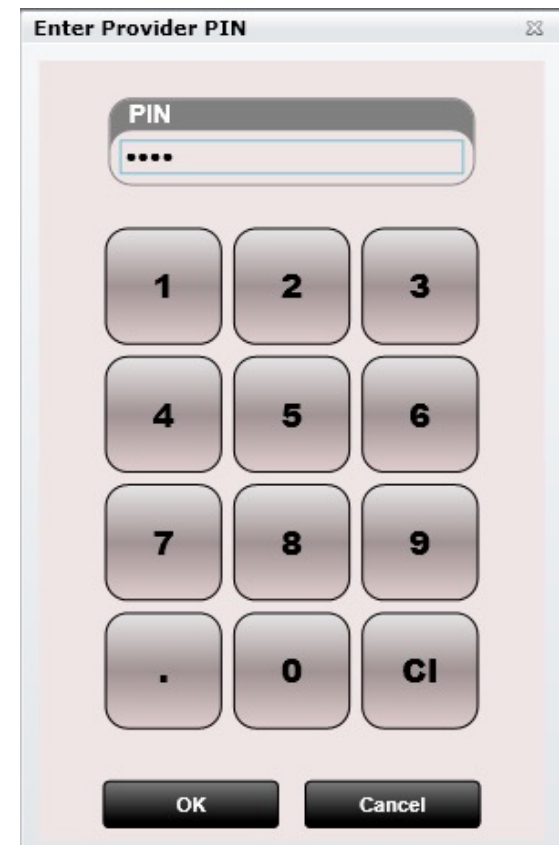
Save – This button will save any progress made in the SOAP. Therefore, if you close the SOAP no data is lost. You can always re-open the SOAP and continue right where you left off. Saving a SOAP does NOT mark it as complete. Therefore, it will appear in the in the Unfinished SOAP Notes list box on the front desk (or in the provider view tab accessed from the front desk). **Subsequently any charges related to that SOAP cannot yet be billed to insurance until the SOAP is signed.**

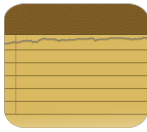
Save & Sign – This button not only saves the progress of the SOAP but also signs it. The provider must enter their pin number in order to sign the SOAP. Once signed, charges can now be billed to insurance.

Tip: Upload your signature in Settings/Users/Provider Info. Your signature will then appear at the bottom of signed SOAP notes.



If you have trouble uploading your signature you can email it to support@ChiroSpring.com and we can do this for you.





Unfinished SOAP Notes

One of the most powerful features in ChiroSpring is the ability to track unfinished SOAP Notes. In a busy practice it is not always possible to complete a SOAP Note prior to checking out the patient... or by the end of the day for that matter. This is why we have created a box on the Front Desk called "Unfinished SOAP Notes." This list box will list every patient that has an unfinished SOAP Note and display the provider's name at the bottom.

When you are ready to finish the SOAP, simply right click on the patient name and click "Edit SOAP Note". Complete the SOAP and then click "Save and Sign." Enter your PIN and you are done.

Visits with Unfinished SOAP notes cannot be billed to insurance. This is because often times providers have not completed the charges or diagnoses associated with the visit. Once the SOAP is signed by the provider it can then be submitted to insurance.

The minimum action necessary to checkout a patient is to enter the charges and save the SOAP note. Then move the patient to awaiting checkout and on to checkout. The provider can utilize the "Unfinished SOAP Note" list box on the front desk at anytime to complete a SOAP.

Note: Charges can be entered by a provider or a non-provider. However, in order to submit charges to insurance, the SOAP note must be signed by the provider.

Unfinished SOAP Notes (on Front Desk)

Unfinished SOAP Notes	
Brandon Fisher Appt Time: Jun 26, 2:42 PM Dr. Brian	
Chad Thompson Appt Time: Jun 26, 4:00 PM Dr. Brian	
Chad Thompson Appt Time: Jun 27, 10:00 AM Dr. Brian	
Chad Thompson Appt Time: Jun 27, 12:30 PM Dr. Brian	
Matt Woods Appt Time: Jun 28, 9:15 AM Dr. Brian	
Bella Rogers Appt Time: Jun 28, 10:15 AM Dr. Brian	
Mr Kashmir Singh Appt Time: Jun 30, 9:15 AM	

Digital Keyboard

ChiroSpring has a custom digital keyboard that can be turned on or off on the fly. In the lower right corner of every screen, you will see a “KB” button. Clicking this will turn on the digital keyboard. Then, when you click on any area where text input is necessary, the keyboard will launch. To disable the keyboard, click the “KB” button again. The disabled “KB” icon will now be displayed over the “KB” symbol.



Keyboard Disabled



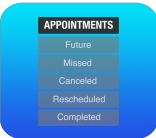
Keyboard Enabled

If you wish to keep the keyboard enabled but want to temporarily hide it, click the keyboard icon in the lower right portion of the digital keyboard.



#Appointments (Dashboard)





Dashboard - Appointments

Appointments - Brady E Albery ALBBR000 DOB: 12/16/1979 Age: 41 INS: BCBS CPT copyright 2020 American Medical Association. All rights reserved.

Appointments

363	■ Completed	3	■ Canceled
451	■ Missed	0	■ Rescheduled
6	■ Future		■ Signed SOAP

Dec 29, 2020 - 10:00 AM	Tue	Dr. Brian Albery	Scheduled
Dec 29, 2020 - 9:00 AM	Tue	Dr. Brian Albery	Scheduled
Dec 27, 2020 - 2:00 PM		Dr. Brian Albery	Missed
Dec 27, 2020 - 1:00 PM		Dr. Brian Albery	Missed
Dec 25, 2020 - 7:00 PM		Dr. Brian Albery	Missed Repeat Apt
Dec 23, 2020 - 7:00 PM		Dr. Brian Albery	Missed Repeat Apt
Dec 22, 2020 - 10:00 AM		Dr. Brian Albery	Missed
Dec 22, 2020 - 9:00 AM		Dr. Brian Albery	Missed
Dec 21, 2020 - 7:00 PM		Dr. Brian Albery	Missed Repeat Apt

Load more future Load more past

● = Un-signed SOAP Note

Visit Type (Primary)
 Adjustment

Visit Type (Secondary)

Visit Type (Tertiary)

Visit Type (Quaternary)

Reason/Visit Notes

Reason Missed/Canceled/Rescheduled

General Visit Note

Checked In Time
Not checked in - Computer Time
Not checked in - UTC Server Time

Checked Out Time
Not checked out - Computer Time
Not checked out - UTC Server Time

Is New Patient Visit
No

Appointment Type
Scheduled

Is Out Of Office Visit ?
No

Scheduled By
Dr. Brian Albery
Dec 10, 2020, 12:30 PM - Computer Time
Dec 10, 2020, 6:30 PM - UTC Server Time

Facility Location
Spinal Care Chiropractic

Appointment Length
15 minutes ▼ X

Close Dock Delete New Appointment Calendar Save Print Future Appointments

Dashboard - Appointments

The appointments Tile allows you to:

- View appointment history
 - Completed
 - Missed
 - Future
 - Canceled
 - Rescheduled
- Edit “Reason Missed or Cancelled”
- View or Edit “Visit Type”
- View Reason/Visit Notes
- View or Edit “General Visit Note”
- View or Edit “Is New Patient Visit”
- View or Edit “appointment Type”

Reason/Visit Notes

Want's Massage Every Visit

Reason Missed/Canceled/Rescheduled

General Visit Note

Checked In Time

Oct 3, 2015, 5:49 AM - Computer Time

Oct 3, 2015, 10:49 AM - UTC Server Time

Is New Patient Visit

No ▼

Appointment Type

Unknown ▼

Visit Type (Primary)

1 - Adjustment ▼ X

Visit Type (Secondary)

▼ X

Visit Type (Tertiary)

▼ X

Visit Type (Quaternary)

▼ X

Dashboard - Appointments

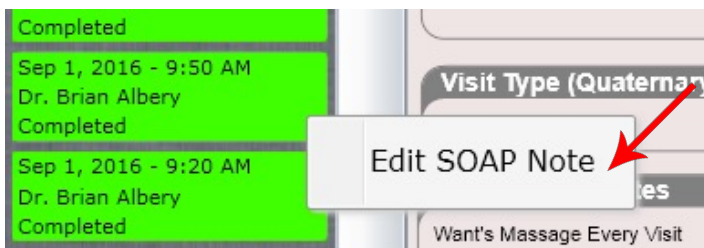
Appointments

The appointments List box shows a history of the patient's appointment history. Here you can see the patients:

- Completed – Green
- Missed – Yellow
- Future – White
- Canceled – Red
- Rescheduled – Orange
- Signed SOAP - Black

53	■	Completed	0	■	Canceled
39	■	Missed	1	■	Rescheduled
0	■	Future		■	Signed SOAP

Power Tip: Hovering over a missed or cancelled appointment will show you the reason if it was entered



Power Tip: You can right click and select “Edit SOAP Note” on completed visits or even missed visits.

#View Statements (Dashboard)





Dashboard – View Statements

Once a statement is created, it is saved on file in the patient’s Dashboard/View Statements tile. Here is an example of a patient that has one statement that has been created.

Date Created: 02/17/16
Date Billed: Never
Amount Due: \$55.15

Once a statement is billed, it will include the “Date Billed” here as well.

Date Created: 03/10/16
Date Billed: 03/10/16
Amount Due: \$55.15

View Statements - Chad Thompson THOCH000 DOB: 10/22/1975 Age: 40 INS: Blue Cross/Medicaid/Medicare ©PT copyright 2013 American Medical Association. All rights reserved.

Date Created:	10/31/14
Date Billed:	Never
Amount Due:	\$15.00

Spinal Care Chiropractic
1515 Brady St.
Davenport, IA 52806
563-545-4565

Patient: Chad Thompson
Patient Account: THOCH000
Statement Date: 10/31/14
Due Date: 11/20/14
Amount Due: \$15.00
Amount Enclosed: \$ _____

If Credit Card Payment, Please Complete.

CARD COMPANY (i.e. VISA, MASTERCARD)	AMOUNT
CARD NUMBER	CSC (3 digits on bac
SIGNATURE	EXP. DATE

Chad Thompson
123 Sunny Dr
Davenport, IA 54356

PLEASE CUT AND RETURN THIS STUB WITH YOUR PAYMENT

DATE	DESCRIPTION	UNITS	CHARGED AMOUNT	INS. SAVINGS	INS. PAID	COPAY	CO-INS	DEDUCT.	PATIENT PAID	PATI OW
10/31/14	99205-25 New Patient Comprehensive (	1	150.00	0.00	0.00	0.00	15.00	0.00	0.00	15
	AMOUNT DUE									
	\$15.00									
	0 TO 30 DAYS									
	\$15.00									
	31 to 60 DAYS									
	\$0.00									
	61 TO 90 DAYS									
	\$0.00									
	91 TO 120 DAYS									
	\$0.00									
	121+ DAYS									
	\$0.00									
	DUE DATE									
	11/20/2014									

Close Dock Create Current Statement Print

You can even create a statement by clicking the “Create Current Statement” button.

#Patient Notes (Dashboard)



Dashboard – Patient Notes



Patient Notes Steve Jackson

Created 5/9/14 by drbrian
This is a patient note

Updated 5/9/14 by drbrian

Note Detail

This is a patient note

Add New

Delete

Cancel

Save

Close

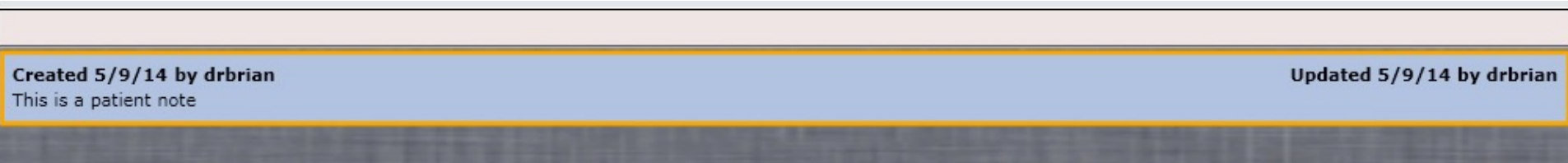
Dock

Dashboard – Patient Notes



This Tile is used for general patient notes (not SOAP notes). Once a note is created it is given a created date, a last updated date, and displays who created and updated the note.

At the top is a filterable list box making it easy to search through and find a particular note.



#Vitals (Dashboard)



Dashboard – Vitals



The Vitals Tile allows you to view vitals history for your patient as well as edit a vital.

Vitals - Chad Thompson THOCH000 DOB: 07/30/1966 Age: 48 INS: Blue Cross/Medicaid CPT copyright 2013 American Medical Association. All rights reserved.

Date	Height	Weight	Temperature	Respirations	Blood Pressure and Pulse	BMI	Oximetry	Notes
06/27/15	72.0 in	180.0 lbs	98.6 °F	22	Sitting 120/80 mmHg - 60 BPM	24.4 (Normal weight)	99.00	
06/27/15	75.0 in	188.0 lbs			Sitting 155/90 mmHg - Standing 170 / mmHg - Supine 200 / mmHg -	23.5 (Normal weight)		
06/23/15	72.0 in	180.0 lbs			Sitting 150/90 mmHg -	24.4 (Normal weight)		
01/15/15	72.0 in	259.0 lbs	98.6 °F		Sitting 120 / mmHg -	35.1 (Obese)		
01/05/15	182.9 cm	81.6 kg	37.0 °C	22	Sitting 120/90 mmHg - 55 BPM	24.4 (Normal weight)		
12/18/14	72.0 in	187.0 lbs	98.6 °F	22	Sitting 120/80 mmHg - 62 BPM Standing 120/80 mmHg - 63 BPM	25.4 (Overweight)		
12/17/14	66.0 in	123.0 lbs				19.9 (Normal weight)		
12/04/14	72.0 in	200.0 lbs				27.1 (Overweight)		

Show visits with no data

■ =Low
 ■ =Normal
 ■ =High



Dashboard – Vitals

Pressing “Edit Selected” will allow you to edit the vital for the selected visit.

Height

Weight

BMI Percentile

(Auto Calculated for ages 2-20 when gender is entered)

Temperature

Measurement

Respirations (breaths per minute)

Pulse Oximetry

Blood Pressure/Pulse

1

Systolic	Diastolic	Pulse
<input type="text"/>	<input type="text"/>	<input type="text"/>
Position	Extremity Used	
Sitting	<input type="text"/>	

2

Systolic	Diastolic	Pulse
<input type="text"/>	<input type="text"/>	<input type="text"/>
Position	Extremity Used	
Standing	<input type="text"/>	

3

Systolic	Diastolic	Pulse
<input type="text"/>	<input type="text"/>	<input type="text"/>
Position	Extremity Used	
Supine	<input type="text"/>	

Notes

BMI: 25.5 (Overweight)

1	2	3
4	5	6
7	8	9
.	0	Cl

For more than 80% of your patients who are age 3 and older, you have to record blood pressure in the certified EHR. For more than 80% of your patients of any age, you have to record height and weight in the certified EHR.

Close

#Labs (Dashboard)



Dashboard – Labs



Labs - Chad Thompson THOCH000 DOB: 07/30/1997 Age: 18 INS: Blue Cross and Blue Shield CPT copyright 2013 American Medical Association. All rights reserved

Lab Orders

Lab Results

Internal Order #	Filler Order #	Lab Name	Status	Date Time Created	Date Ordered	Ordering Provider	Comment
3129	343434	Ferritin (Female)	Order Entered	6/9/2016 2:11 AM	6/9/2016	drbrian	
3126	343434	ALT - Alanine aminotransferase (Female)	Order Entered	6/7/2016 3:37 PM	6/7/2016	drbrian	
3125	3443434	ALT - Alanine aminotransferase (Female)	Order Entered	6/7/2016 3:32 PM		drbrian	
3108	TEst	ALT - Alanine aminotransferase (Male)	Order Entered	4/21/2016 7:00 AM		drbrian	dfdsf safsa

Close

Dock

Add Order

Edit

Delete

Enter Results

Dashboard – Labs



The Labs Tile allows you to create a lab order as well as enter a lab result.

To create a lab order, click the “Add Order” button. The dialog to the right will open. Populate any information you need.

The “Filler Order Number” box is the number you enter when you call the order into a lab. They should create an order number and since they are FILLING your lab order this is deemed the “filler order number”. It is not a required field but is nice for record keeping.

To enter a result, select the original lab order and click “Enter Results”. This will open the Results Dialog. Fill in the appropriate information.

High values will be recorded in red. Low values will be recorded in blue.

Lab Order

MSH-6 ID
CHIROSPRING_500

Internal (Placer) Order Number ID
3146

Date Scheduled
<MM-dd-yyyy> 15

Filler Order Number (order number from lab processing your lab order)

Lab Name

LOINC Code

Code (CPT®)

Visit Date Lab Ordered

Date Ordered
07-08-2016 15

Ordering Provider
Dr. Brian

Status
Order Entered

Comment

Save & Close Cancel

Dashboard – Labs



When you select your lab order you can then click “Enter Results” (see below). Alternatively, if you do not have a lab order you can click the “Lab Results” tab and then “Add Result” there.

Labs - Chad Thompson THOCH000 DOB: 12/12/1957 Age: 58 INS: Blue Cross and Blue Shield CPT copyright 2013 American Medical Association. All rights reserved.

Lab Orders **Lab Results**

Internal Order #	Filler Order #	Lab Name	Status	Date Time Created	Date Ordered	Ordering Provider	Comment
3182		Alkaline phosphatase (Adults: 25-60 yo)	Order Entered	9/9/2016 6:17 AM	9/9/2016	Miranda	as

Close Dock Add Order Edit Delete **Enter Results**

Dashboard – Labs



The Lab Result dialog will allow you to populate information related to results.

There are two check boxes at the bottom. The first is to document if you have reviewed the results with your patient. The second, “reconciled”, indicates that the lab was received from another facility and was not ordered by you.

You can also have labs SENT to you. Received labs will be available to incorporate in the Launcher/Receive Data app. The Launcher is located on the lower left corner of the Front Desk.

Lab Result

Internal Order Number 2801	Filler Order Number <input type="button" value="Select Order"/> X	Specimen Condition ▼ X	
Lab Name ▼		Specimen Type ▼ X	
LOINC Code	Reference Range (min - max)	Specimen Reject Reason	
Numerical Result	Units	Universal Service ID Code	Universal Service ID Text
Result ▼ X	Collection Date <MM-dd-yyyy> 15	Ordering Provider First Name	Ordering Provider Last Name
Date Result Received <MM-dd-yyyy> 15	Observation Date <MM-dd-yyyy> 15	Performing Organization	
OrderType ▼ X	Abnormal Flags	Facility Name	
Observation Value Text	Observation Value ID	Address	
Observation Identifier ID	Observation Identifier Text	City	State Abbr.
Observation Result Status	Observation Note	Zip	Phone
Comment		Country	Country Parish Code
<input type="checkbox"/> Results reviewed with patient	<input type="checkbox"/> Reconciled	Designation	

Dashboard – Labs



Labs - Chad Thompson THOCH000 DOB: 07/30/1997 Age: 18 INS: Blue Cross and Blue Shield

CPT copyright 2013 American Medical Association. All rights reserved

Lab Orders

Lab Results

■ =Low ■ =Normal ■ =High

Internal Order #	Filler Order #	Lab Name	Date Received	Result	Numerical Result	Units	Abnormal Flags	Result Status	Reference Range
		Anion Gap	10/5/2015		23.00	Meq/L			8.00 - 16.00
R 1004		Alkaline phosphatase (Adults: 25-60 yo)	6/25/2015		55.00	U/L			33.00 - 131.00

Result Details

LOINC Code	123	Order Type	
Collection Start Date Time		Specimen Condition	Contaminated
Universal Service Id Code		Specimen Reject Reason	
Observation Date Time		Specimen Type Text	Urine
Observation Identifier Id		Universal Service Id Text	
Observation Identifier Text		Performing Organization	
Observation Value Id		Ordering Provider	
Observation Value Text		Reconciled	Yes
Comment			

Close

Dock

Add Result

Edit

Delete

#Immunizations (Dashboard)



Dashboard – Immunizations



Immunizations Jeff Mosby

CPT copyright 2013 American Medical Association. All rights reserved.

VaccineName	Date Administered	Provider	Administered By	Location Administered	Status	Vaccine Amount	Vaccine Route
Tdap (115)	07-28-2014	Brian Albery	Brian Albery	Hy-Vee	Administered	0.5 ml	IM

Close Dock

Add Edit Delete

Dashboard – Immunizations



The Immunizations Tile allows you to record immunization data for your patient.

To record an immunization, click “Add”. The following dialog will appear. Simply populate the fields, then click “Save & Close”.

Note: If you are practicing meaningful use one of the clinical quality measures you will be capturing is when your patient had a pneumonia vaccine. We have built a CDS rule alert that will prompt you to record this information.

Immunization

Vaccine Name <input type="text"/>	Ordering Provider Select Provider <input checked="" type="checkbox"/> Dr. Brian
Administered by <input type="text"/>	Specify Other <input type="text"/>
Status Not Administered	Location Administered <input type="text"/>
Date Administered <MM-dd-yyyy>	Reason for Refusal <input type="text"/>
Route Administered <input type="text"/>	Amount Administered <input type="text"/>
Date of Next Dose <MM-dd-yyyy>	Body Site Administered <input type="text"/>
Vaccine Lot Expiration Date <MM-dd-yyyy>	Vaccine Lot Number <input type="text"/>
Vaccine Manufacturer <input type="text"/>	
Comments <input type="text"/>	

Save & Close **Cancel**

#Documents (Dashboard)





Dashboard – Documents

Upload and store patient documents. Tag documents with date, name, type or add any pertinent notes.

Documents - Chad Thompson THOCH000 DOB: 10/22/1975 Age: 40 INS: Blue Cross/Medicaid/Medicare CPT copyright 2013 American Medical Association. All rights reserved.

Folders	Documents	Document Details
<ul style="list-style-type: none">All DocumentsUnfiled DocumentsAmendments2016	<ul style="list-style-type: none">03/10/2016 HIPPA Policy .docx01/15/2016 New Patient Intake Form .docx12/18/2015 Auto Accident Form .jpg08/20/2015 Personal Injury Form .jpg	<p>← Move Document Into Folder</p> <p>View Document</p> <p><i>Note, if this button is grayed out this means the document type cannot be viewed using ChiroSpring. To view you must export the document to your computer and then open. Use the 'Export Document' button below.</i></p> <p>Date 3/10/16</p> <p>Name HIPPA Policy</p> <p>Type Edit</p> <p>Format .docx</p> <p>Notes</p>

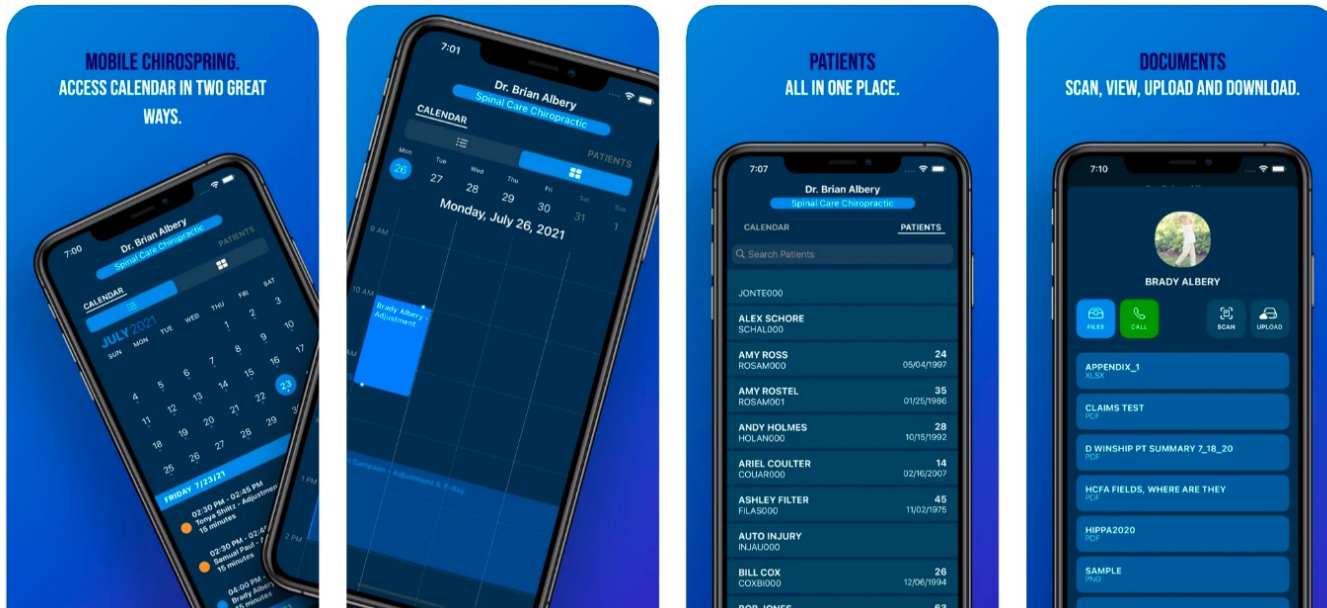
Unfile Document Load more

Close Dock Export Document Import Document Delete Cancel Save

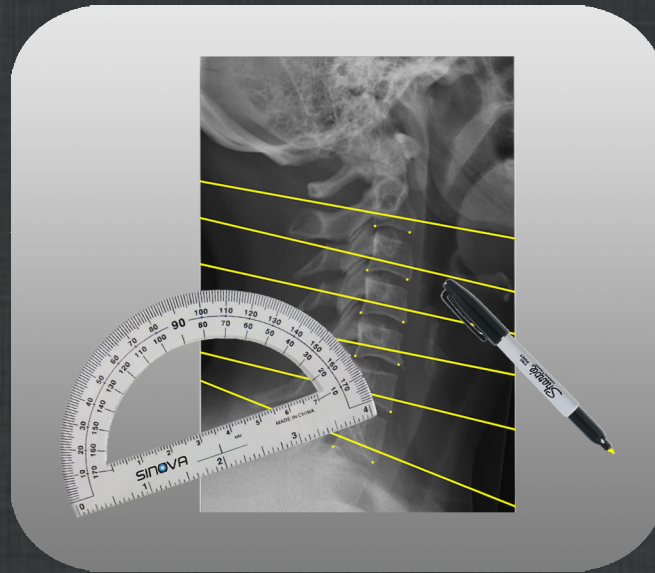


Dashboard – Documents

With our iPhone app (ChiroSpring) you can scan patient documents (paper) and have it automatically upload into the patient's Document's tile.



#Images (Dashboard)



Dashboard – Images



Like Labs, Images allows you to create an Image Order and Image Result. It is not necessary to enter an Image Order for practices that prefer to simply record their results.

The process is, however, extremely simple. Click “Add Order” to create an Image Order. Again, the filler order # is the number the facility filling your order provides you with. It’s not mandatory to fill out but nice to record if you have this information.

LOINC Code and CPT code are not editable here. Remember, in Settings/Images you can edit image details or even add your own.

Images - Tom Andresen ANDTO000 DOB: 08/06/1984 Age: 31 INS: CSG CPT copyright 2013 American Medical Association. All rights reserved.

Image Orders Image Results

Internal Order #	Filler Order #	Orientation	Type	View	Region	Date Ordered	Status	Comment
1008								

Image Order

Internal Order # 1008 Filler Order #

Date Ordered <M/d/yy> 15

Orientation Type

Region View

LOINC Code Code (CPT®)

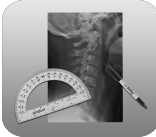
Ordering Provider Status

Comment

Save & Close Cancel

Close Dock Add Order Edit Delete Enter Results

Dashboard – Images



Upload and store patient images such as x-rays, thermography scans and more. Tag images with date, orientation, type, view, region and notes. Images must be in .PNG or .JPEG format.

Images - Chad Thompson THOCH000 DOB: 12/12/1957 Age: 58 INS: Blue Cross and Blue Shield CPT copyright 2013 American Medical Association. All rights reserved.

Image Orders Image Results

Selected Image

Image Order Details

8/31/2016 X-Ray Cervical

X-Ray Lumbar X-Ray

X-Ray Cervical

Load more

Close Dock

Add Image Result Edit Delete Save Cancel

11.66 mm

12.95 mm

16.89 mm

16.02 mm

15.65 mm

Internal Order # 1023

Filler Order #

Date Received

Orientation Left

Type X-Ray

View

Region Cervical 5001-8

Ordering Provider

Notes

Show Annotations

Annotate Image View Image Export Image

Dashboard – Images



Along the bottom are four buttons:

- **Add Image Result** – Select this to import an image (must be in PNG or JPEG format). If your image is in the form of a DICOM there are several free DICOM to .PNG converters available via a quick Google Search.
- **Annotate Image** – This allows you to do line drawings on the image.
- **View Image** – This allows you to view the image, move the image to any orientation using touch gestures including pinch to zoom.
- **Export Image** – This allows you to export the selected image to your computer.

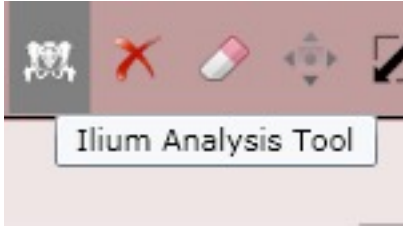
Add Image Result

Annotate Image

View Image

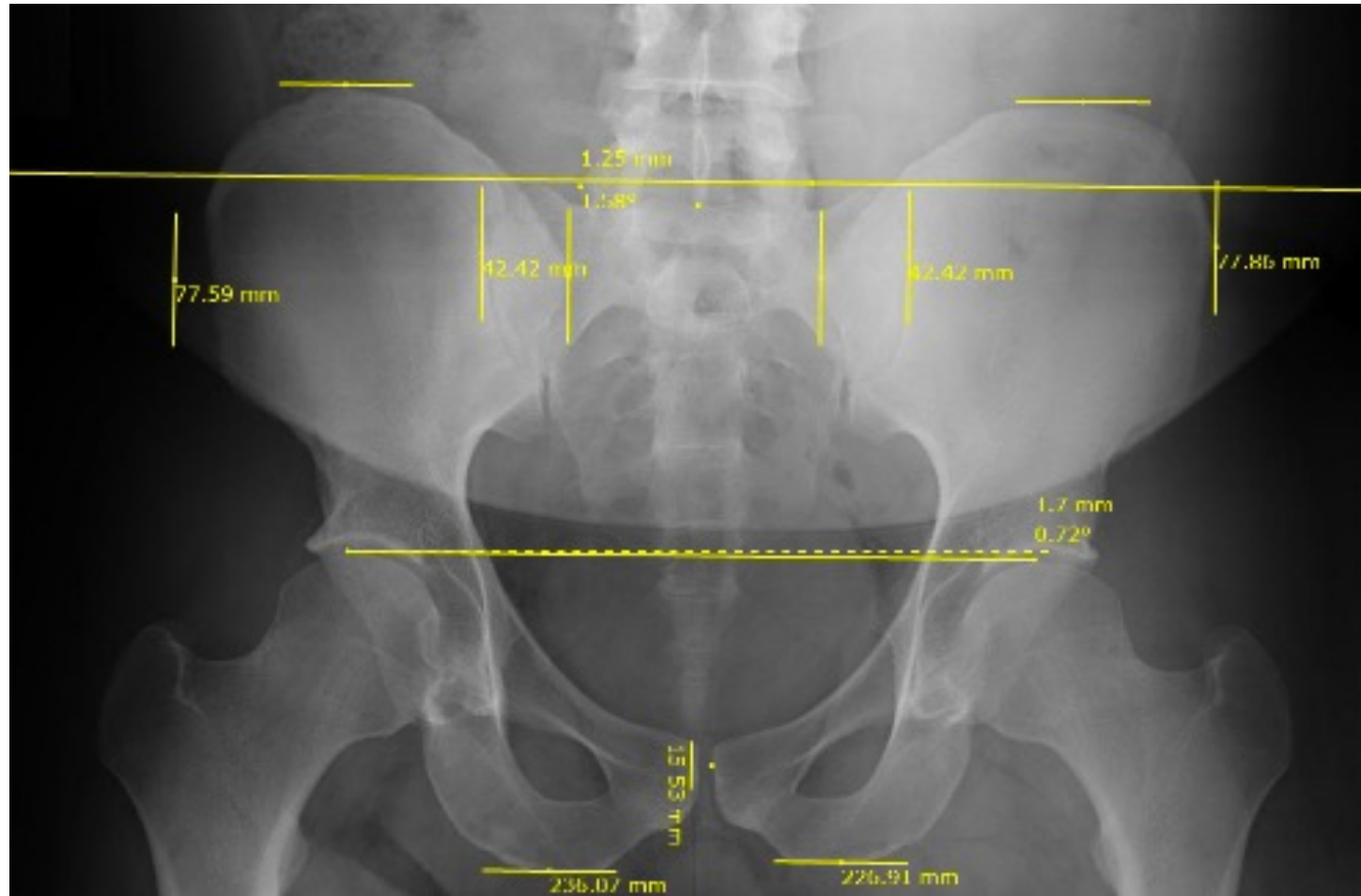
Export Image

Dashboard – Images



Ilium Analysis Tool

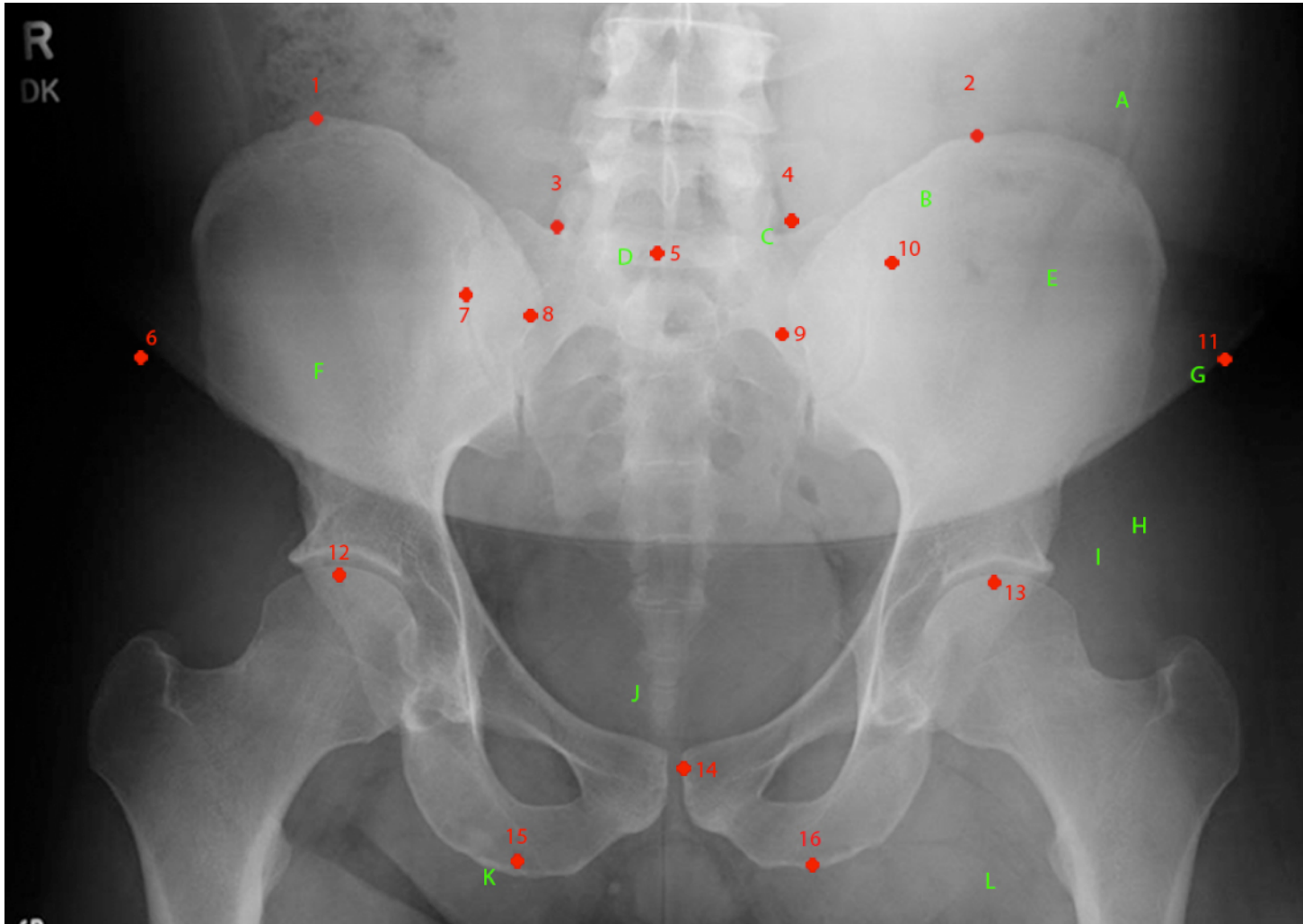
The ilium analysis tool can be used to analyze the AP Pelvic image and will evaluate the degree of hip rotation and/or misalignment. When you use this tool, it will ask you to click on several points.



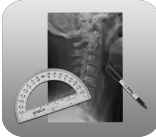
Dashboard – Images



Below we have mapped out a “cheat sheet” to show you where these 16 points are. Each of the points is numbered and marked with a red dot in the image below.



Dashboard – Images

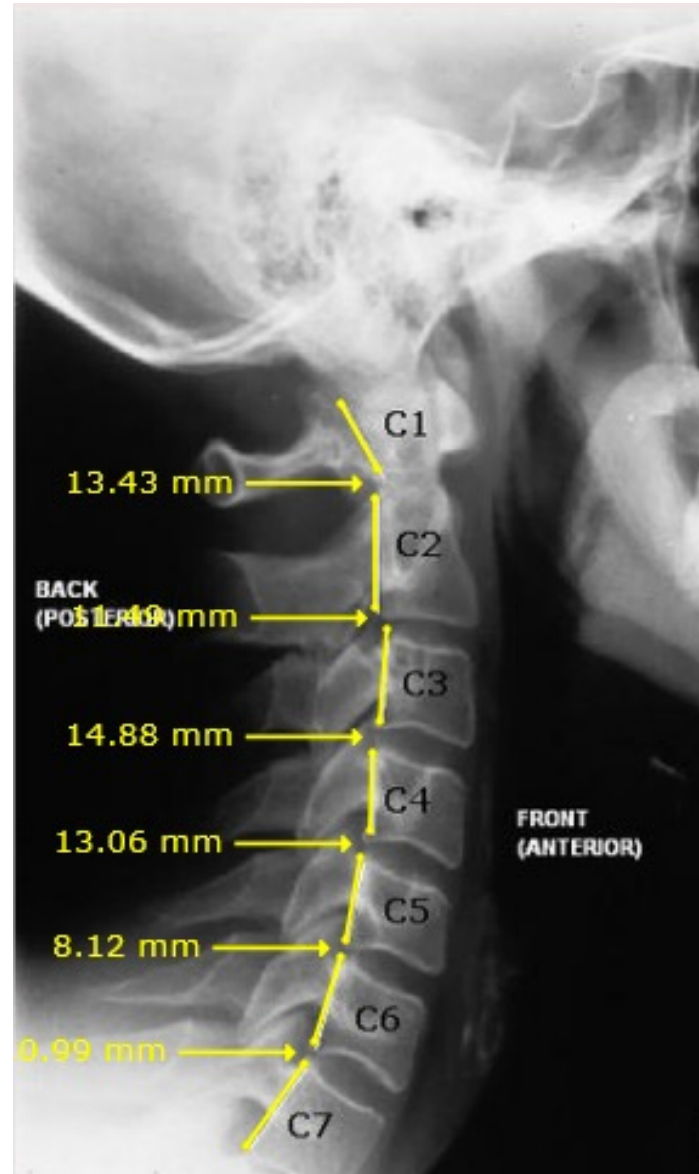


ALL RIGHTS RESERVED.

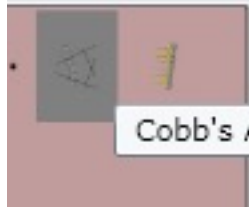


George's Line Tool

The George's Line Tool can show you the amount of anteriority or posteriority that a vertebrae has in relation to the segment below it. Simply click the top and bottom of the posterior vertebral body for each segment from C2 to C7.



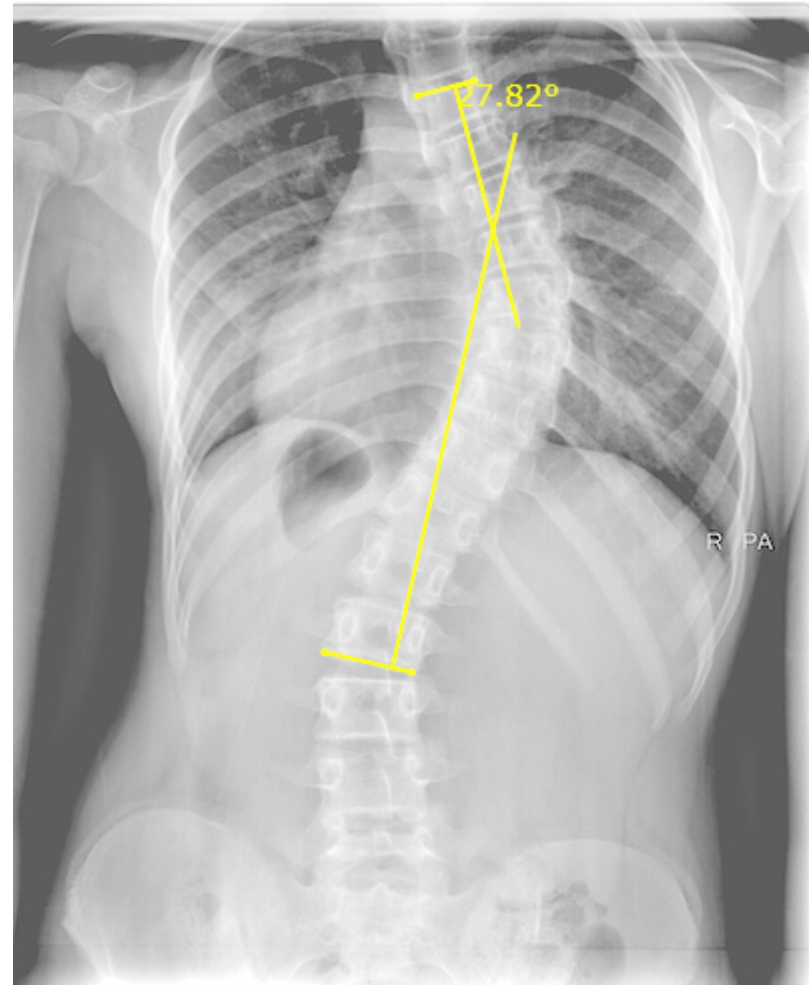
Dashboard – Images



Cobb's Angle Tool

Cobb's Angle Tool

The Cobb's Angle Tool is used to measure the degree of scoliosis. Click the Left, then Right aspects of the superior end plate of the most superior vertebrae contributing to scoliosis. Then click the Left, then Right aspects of the inferior end plate of the lowest vertebrae contributing to scoliosis.

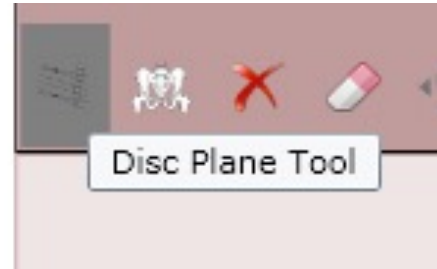
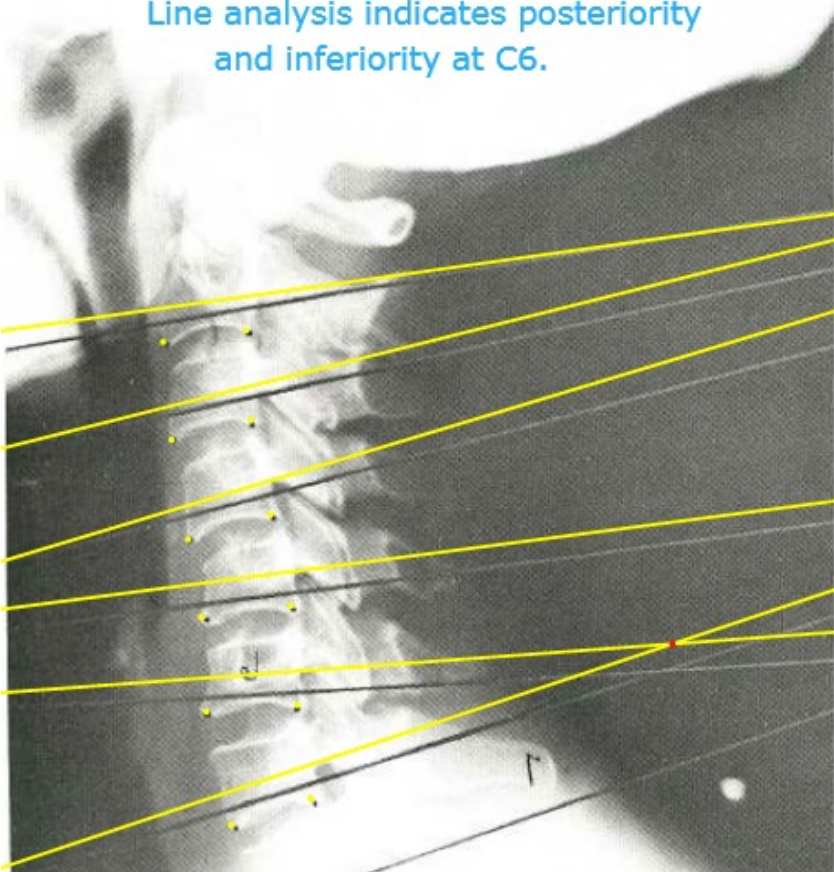


Dashboard – Images



Disc Plane Tool

Line analysis indicates posteriority and inferiority at C6.

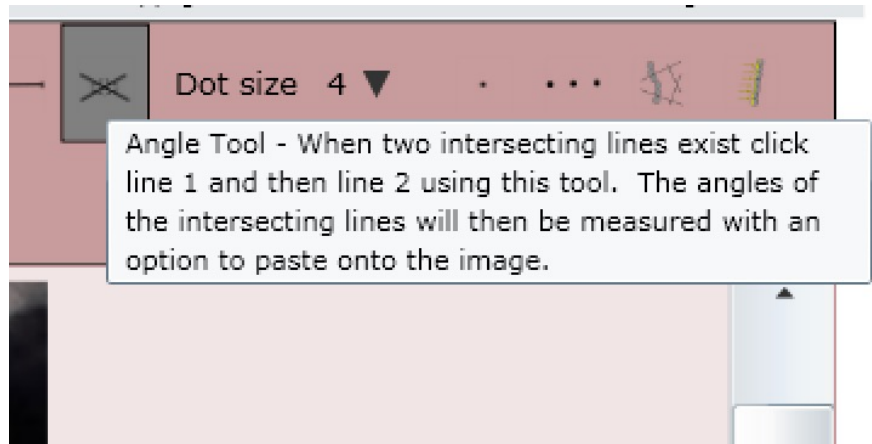
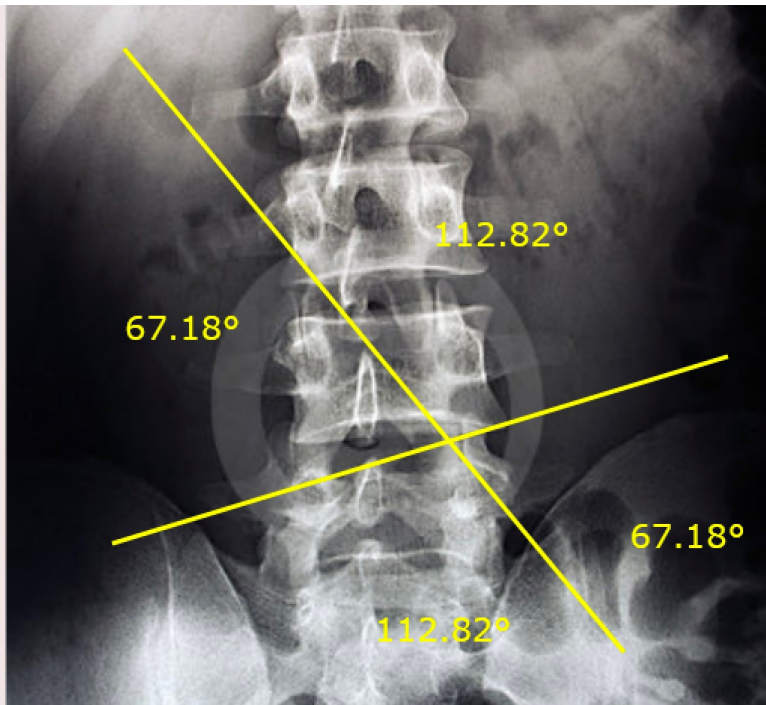


The Disc Plane Tool looks for posterior or inferior abnormalities. Start by clicking the C2 anterior inferior vertebral body. Then click its posterior inferior vertebral body. Follow these steps for C2, C3, C4, C5, C6 and C7.

Dashboard – Images



Angle Tool



The Angle Tool will tell you all four angles with intersecting lines. When the tool is selected click line 1 and then line 2. The angles of the intersecting lines will then be measured with an option to paste onto the image.

#Stop Managers (Dashboard)





Dashboard – Stop Managers

Stop Managers

Stop Managers allow you to create custom “alerts” for a single patient. These alerts can be set to trigger at various locations.

Locations Include

- Calendar
- Dashboard
- Edit SOAP
- Check-In
- Awaiting Checkout
- Check-Out

Stop Managers - Chad Thompson THOCH000 DOB: 10/22/1975 Age: 40 INS: Blue Cross / Medicare CPT copyright 2013 American Medical Association. All rights reserved.

Current Stop Manager Encounter # 79 (Last increased 10/2/16)
The encounter number will increase by 1 after the next appointment is complete (patient is checked out).
A max of 1 increase is allowed per DAY even if the patient was seen multiple times. [Reset Encounter #](#)

Message	When	Repeat	Where
\$20 copay	Encounter # 76	After 1 Encounters	Check-Out

[Close](#) [Dock](#) [Add New](#) [Edit](#) [Delete](#)



Dashboard – Stop Managers

Stop Managers

You have two options when a Stop Manager opens:

- **Snooze** – this “snoozes” the stop manager and essentially tells the system you did NOT see it. Therefore, the stop manager is not acknowledged, and you will see it the next time you view your patient at the stop manager’s trigger location.
- **Acknowledge** – Use this option to tell the system that you acknowledged the stop manager. This way the next time you see the stop manager you will know the task has already been handled.





Dashboard – Stop Managers

Stop Managers

Here we are creating a stop manager. There are three components to a stop manager.

1. Message – this is the message you want to be reminded of
2. When – when would you like to see the stop manager. You can set the 'When' by visit # or by date and set repeat intervals.
3. Where – this is where you would like to see the stop manager. This can be set for any of the following locations
 1. New appointment
 2. Dashboard
 3. Edit SOAP
 4. Check-In
 5. Awaiting Checkout
 6. Check-Out

Stop Manager

Message to be Shown
Have patient sign outcome assessment

Show Message When

Stop Manager Encounter # is Equal to **OR** Visit date is equal to 7/8/16 15
 and Repeat Every Encounters and Repeat Every 30 Days

Where to Show

New Appointment
 Dashboard
 Edit SOAP
 Check-In
 Awaiting Checkout
 Check-Out

User Permissions



Dashboard – Stop Managers

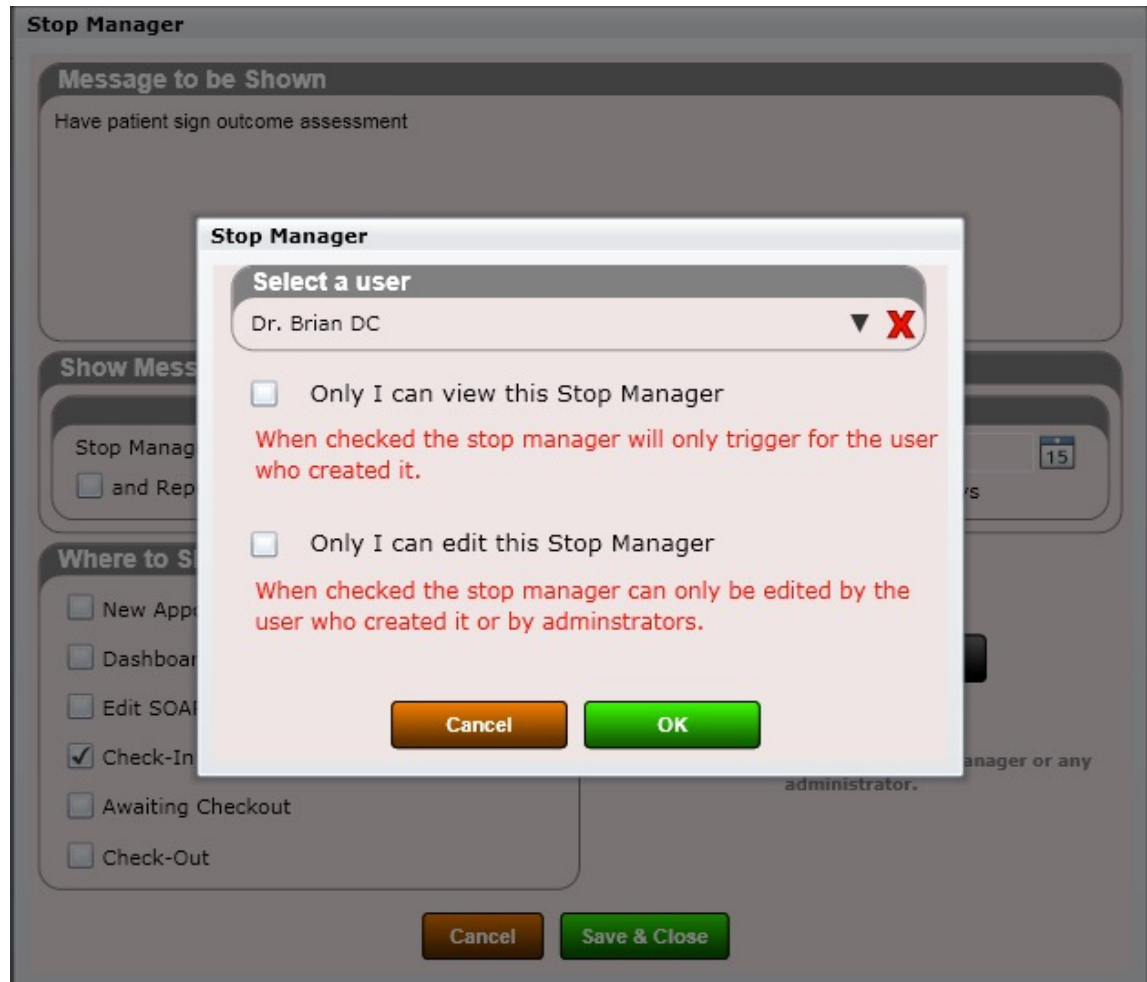
Stop Managers

You can also set “User Permissions” for a stop manager. See image to the right. There are two options.

1. Only I can view this Stop Manager
2. Only I can edit this Stop Manager

This is extremely useful in a large practice where you might not want stop managers you created being seen by others or edited for that matter.

NOTE: Administrators can edit ALL stop managers. This is by design in the event an employee quits, and you want to edit or delete one of their stop managers.





Dashboard – Stop Managers

Stop Managers

Here is an example of a stop manager in action. As previously mentioned, there are two options (aside from Edit).

1. **Snooze** – this tells the system that you did not see the stop manager and that you want to see it again. The next time you see the stop manager it will be in the non-acknowledged position.
2. **Acknowledge** – this acknowledges that you have seen the stop manager. The next time you see the stop manager it will be in the already acknowledged position.

Dashboard - Brady E Albery

Brady E Albery

Notes Documents Images * document/image associated

Message to be Shown

Get new insurance

Show Message When

Stop Manager Encounter # is Equal to 15 and Repeat Every Encounters Expire after Encounters OR Visit date is equal to <MM-dd-yyyy> 15 and Repeat Every Days End by <MM-dd-yyyy> 15

Where to Show

New Appointment
 Dashboard
 Edit SOAP
 Check-In
 Awaiting Checkout
 Check-Out

Summary

User Permissions

Snooze Acknowledge Edit



Dashboard – Stop Managers

Stop Managers

Here is an example of a stop manager that has been acknowledged by clicking the “Acknowledge” button.

The stop manager will remain in the “Already Acknowledged” state until the next day. It will then reset and be displayed during the next “When” for that patient.

Chad Thompson

Message to be Shown
Obtain X-Ray consent form

Show Message When

Stop Manager Encounter # is Equal to **OR** Visit date is equal to

and Repeat Every Encounters and Repeat Every Days

Where to Show

- New Appointment
- Dashboard
- Edit SOAP
- Check-In
- Awaiting Checkout
- Check-Out

User Permissions

Only Dr. Brian DC can view this stop manager.
Only Dr. Brian DC can edit this stop manager or any administrator.

Already Acknowledged **Edit**



Dashboard – Stop Managers

Stop Managers – Understanding Encounter

At the top of the Stop Manger, you will see text indicating the current encounter number. Here you will see when the last visit date the stop manager last increased. This will help you identify EXACTLY what encounter you are currently at. For example, in the image below you can see we are at encounter # 79. However, let's say today's date is 10/15/2016. This would tell me that the stop manager has NOT INCREMENTED YET today. And if I was creating a new stop manager, I would want to understand this. If I wanted the stop manager to trigger at the NEXT visit in this example, I would select #81 (NOT 80). Why? This is because I am seeing my patient and the stop manager ENCOUNTER has NOT yet been recorded. It will increase to #80 TODAY after I have checked my patient out.

Current Stop Manager Encounter # 79 (Last increased 10/2/16)

The encounter number will increase by 1 after the next appointment is complete (patient is checked out).
A max of 1 increase is allowed per DAY even if the patient was seen multiple times.

As you can see in this text... The encounter will increase by 1 after the patient has been checked out.



Dashboard – Stop Managers

Stop Managers

If you want to reset the encounter number, select the “Reset Encounter #” button.

Reset Encounter #



The image shows a dialog box titled "Stop Manager". Inside the dialog, there is a sub-section titled "Change Stop Manager Encounter #". This section contains two radio button options: "Reset to zero" (which is selected) and "Reset to" followed by an empty text input field. At the bottom of the dialog, there are two buttons: a red "Cancel" button and a green "Save & Close" button.

Resetting the encounter number will in NO WAY mess up SOAP notes, visits, etc. The encounter number is ONLY used for stop managers.



Stop Managers Templates

Stop Manager Templates

You will find an app in Settings called Stop Manager Templates. This allows you to create large and complex templates, if you wish, as a template.

Then when adding an actual Stop Manager for a patient simply select the Add From Template option.



#Health History (Dashboard)





Dashboard – Health History

Health History

Use the Health History tile to record your patient's:

- Smoking status
- Alcohol intake
- Caffeine intake
- Cognitive/Functional Status
- Family Health History

Power Tip – Patients can fill out daily habits and family health history at the patient kiosk/online intake.

Health History - Chad Thompson THOCH000 DOB: 07/30/1997 Age: 18 INS: Blue Cross and Blue Shield CPT copyright 2013 American Medical Association. All rights reserved.

Daily Habits Cognitive/Functional Family Health History

Daily Caffeinated Beverages
4 to 6

Weekly Alcoholic Drinks
4 to 6

Must record smoking status for more than 80 percent of all unique patients 13 years and older

Exercise
Unknown

Smoking Status (Current on Top)
Never Smoker
266919005
Recorded: Jun 22, 2016

Add Edit Remove

Close Dock Save



Dashboard – Health History

Family Health History

Use the Health History tile to record your patient's family health history. Here you can add a family member and then record their problems.

Health History - Janet Anderson ANDJA002 DOB: 09/30/1986 Age: 30 INS: Cash CPT copyright 2013 American Medical Association. All rights reserved.

Daily Habits **Cognitive/Functional** **Family Health History**

Family	Problems
Mark Anderson Father Alive	<input type="text"/> No Known Problems
	No known problems ⓘ Last Modified: Oct 3, 2016

Add **Edit Master Problems List**

Edit **Remove** **Edit** **Delete**

Close **Dock** **Save**

#CPOE (Dashboard)





Dashboard – CPOE

CPOE

CPOE stands for “computerized physician order entry”. This Dashboard Tile works in conjunction with the CPOE Tab in “Edit SOAP”. Here the provider can order a medication. There is not much functionality beyond ordering a medication (or supplement for that matter). For practices that prescribe a lot of supplements this could be very useful.

The screenshot displays a software interface for entering medication orders. At the top, patient information is shown: "CPOE - Chad Thompson THOCH000 DOB: 12/12/1957 Age: 58 INS: Blue Cross and Blue Shield". A copyright notice for the American Medical Association is also visible. The main window is titled "Medications" and contains a list of medications, with "glipiZIDE 10 MG Oral Tablet" selected. A "Medications Details" dialog box is open, containing the following fields and controls:

- Medication:** A text input field.
- Rx Norm Code:** A text input field.
- Dose:** A text input field.
- Unit:** A dropdown menu.
- Route:** A dropdown menu.
- Frequency:** A dropdown menu.
- PRN:** A checkbox.
- Visit Date Medication Ordered:** A dropdown menu.
- Frequency Details:** Radio buttons for days of the week (Sun, Mon, Tue, Wed, Thu, Fri, Sat).
- Duration:** Radio buttons for "Days", "Weeks", and "Months".
- Is CPOE:** A checked checkbox.
- Refill Quantity:** A text input field with the value "0".
- Dispense Quantity:** A text input field with the value "0".
- Status:** A dropdown menu with "Ordered" selected.
- Date Ordered:** A date picker showing "09-18-2016".
- Start Date:** A date picker showing "<MM-dd-yyyy>" and "15".
- End Date:** A date picker showing "<MM-dd-yyyy>" and "15".
- Ordering Provider:** A dropdown menu with "Dr. Brian Albery" selected.
- Add to Medications List:** Radio buttons for "Yes" (selected) and "No".
- Fill Instructions:** A large text input area.

At the bottom of the dialog box are two buttons: "Save & Close" (green) and "Cancel" (black). The background interface includes "Close" and "Dock" buttons at the bottom left.

#ROS (Dashboard)



Dashboard – ROS

ROS

With the Review of Systems tile you will be able to view past review of systems, edit them or print them.

Review of Systems - Chad Thompson THOCH000 DOB: 12/12/1957 Age: 58 INS: Blue Cross and Blue Shield CPT copyright 2013 American Medical Association. All rights reserved.

7/7/16
Dr. Brian Albery

6/14/16
Dr. Brian Albery

Date of Service: 7/7/16 Patient: Chad Thompson DOB: 12/12/1957

Get Well Clinic
1002 Healthcare Dr., Portland, OR 97005

Review of Systems

<p><u>Musculoskeletal</u></p> <p>Had - Arm/hand pain Have - Back pain No - Feet/leg pain Had - Hip No - Knee Have - Lower back pain L5 Had - Mid back pain Have - Muscle or joint pain No - Redness of joints</p>	<p><u>Cardiovascular/Respiratory</u></p> <p>Have - Dizziness/lightheaded No - Irregular heartbeat Have - Persistent coughing Had - Shortness of breath Had - Sudden awakening with a shortness of breath (paroxysmal nocturnal dyspnea)</p>	<p><u>Head/Neck</u></p> <p>No - Lumps Have - Pain Had - Sore throat No - Stiffness Had - Tooth problems No - Trouble swallowing</p>
<p><u>Eyes</u></p> <p>Had - Glaucoma Have - Pain Had - Specks No - Vision problems</p>	<p><u>Ears</u></p> <p>Had - Ear infections No - Poor hearing Had - Ringing in ears (tinnitus)</p>	<p><u>Nose</u></p> <p>No - Allergies No - Blocked sinuses No - Discharge No - Excessive mucus No - Hay fever No - Itching No - Nose bleeds No - Sinus pressure or pain No - Stuffiness/blockage No - Other</p>
<p><u>Throat/Mouth</u></p> <p>No - Dentures No - Difficulty swallowing</p>	<p><u>Urinary</u></p> <p>No - Urine in blood (hematuria) No - Burning or pain</p>	<p><u>Gastrointestinal</u></p> <p>Had - Rectal bleeding No - Yellow eyes or skin</p>

Reload Load more

Close Dock Find Edit Print Print Date Range

#Amendments (Dashboard)



Dashboard – Amendments



Amendments - Chad Thompson THOCH000 DOB: 12/12/1957 Age: 58 INS: Blue Cross and Blue Shield

CPT copyright 2013 American Medical Association. All rights reserved.

Created 9/8/16 11:46 AM by drbrian
Source Text: Chad Thompson

Status: Accepted

Updated 9/8/16 11:46 AM by drbrian

Amendments

Requested Changes

Change DOB to 12/12/1957

Source Text

Chad Thompson|

Status

Accepted ▼

Done **Cancel**

Change DOB to 12/12/1957

Add New Edit Delete Cancel Save

Close

Dock

Dashboard – Amendments

Amendments

The Amendments tile is used for one and only one purpose... to document patient requests to modify their account. This is an EHR requirement (to have in the system) but you certainly are not required AT ALL to use it. Here is how it works.

Record what change the patient requested in the “Requested Changes” box.

Record WHO requested the change (e.g. The patient’s name, a family member, a provider, etc). This goes into the “Source Text” box.

The “Status” box will then record if the change was accepted or rejected.

The screenshot shows a mobile application interface for recording amendments. The form is titled "Amendments" and contains three main sections:

- Requested Changes:** A text input field containing the text "Change DOB to 12/12/1957".
- Source Text:** A text input field containing the name "Chad Thompson".
- Status:** A dropdown menu currently displaying "Accepted".

At the bottom of the form, there are two buttons: a black "Done" button and a red "Cancel" button.

#Patient Education (Dashboard)



Dashboard – Patient Education



Patient Education - Chad Thompson THOCH000 DOB: 12/12/1957 Age: 58 INS: Blue Cross and Blue Shield

Submit Search Web Med ▼

A-Z Interaction Check **A-Z AllergyFacts** **A-Z** **Index Results Tests**

Medications	Allergies	Problems	Labs	Handout Given
warfarin sodium 5 MG Oral Tablet Active Last Modified: Jul 23, 2016R	Codeine Last Modified: Sep 13, 2016R	Type I diabetes mellitus without complication (disorder) Last Modified: Aug 3, 2016R	Alkaline phosphatase (Adults: 25-60 yo) LDL - Cholesterol	Diabetes Handout Jan 9, 2015
warfarin sodium 2.5 MG Oral Tablet Active Last Modified: Jul 23, 2016R		Brittle diabetes mellitus (finding) Last Modified: Sep 8, 2016R		
Simvastatin 40 MG Active Last Modified: Sep 8, 2016R				
glipiZIDE 10 MG Oral Tablet Active Last Modified: Sep 18, 2016R				
Active Last Modified: Sep 18, 2016R				

Close **Cancel** **Save**

Add Handout **Edit** **Remove**



Dashboard – Patient Education

Patient Education

The Patient Education tile will allow you to quickly document educational material was provided to your patient (an EHR requirement if you are practicing meaningful use). As previously mentioned, this can be done in Edit SOAP within the Patient Education tab. However, it is convenient to have the ability to do this in the dashboard as well.

We have already discussed clicking the “info” button on the MIST screen. On the Patient Education screen these info buttons are NOT connected to Medline Plus (as they are in MIST). Instead, they are connected to educational material that you uploaded. For example, I have added a Warfarin Handout in Settings/Patient Education for the medication Warfarin. Now when I click the “info button” a dialog will open displaying this information. You can then mark “Handout Given” to quickly record that you gave this educational material to your patient. If you are practicing meaningful use, you will need to provide handouts to your patient. There is no requirement as to what you provide them so in theory you could have a stack of pamphlets to provide them. Use the Patient Education tab to document that educational material was provided to your patient.



Settings



Patient Education

Upload your own educational handouts and associate them with medications, allergies, problems or labs in Settings/Patient Education.

Dashboard – Patient Education



If you do not have any educational material loaded for the medication, allergy, problem or lab info button(s) you can still easily document educational material was provided by clicking the “Add Handout” button and typing anything you would like in the “Patient Education given to Patient” box.

Remember, it is an EHR requirement to provide educational content to more than 10% of your patients if you are practicing meaningful use.

If you are not practicing meaningful use, then you do not need to worry about documenting handouts provided.

The screenshot displays an EHR dashboard with several sections: "Problems" (listing "Type I diabetes mellitus without complication (disorder)" and "Brittle diabetes mellitus (finding)"), "Labs" (listing "Alkaline phosphatase (Adults: 25-60 yo)" and "LDL - Cholesterol"), and "Handout Given" (listing "Diabetes Handout" dated "Jan 9, 2015"). A modal window titled "Handout" is open, featuring a text input field labeled "Patient Education given to Patient", a date picker labeled "Date Given" set to "09-18-2016", and "Save" and "Cancel" buttons. A red arrow points to the "Add Handout" button at the bottom right of the dashboard.

#Med Rec (Dashboard)





Dashboard – Med Rec

Med Rec

The Med Rec tile is used to reconcile your patient's medication list, allergy list and problems list MANUALLY. What do we mean by manually? Well, there are two ways to reconcile. The first way is done in Launcher/Receive Data when you RECEIVE a transition of care from another provider.

Use the Med Rec tile to reconcile in these scenarios:

- In the case that a patient provides a list from a hospital discharge
- A provider mails you this information
- A patient provides a list of their medications, allergies and problems they deem up-to-date

Dashboard – Med Rec



Med Rec

Medications, Allergies & Problems

Sender Info

Medications

Allergies

Problems

Morphine Oral Solution

106841 (RxNorm)

Keep

Remove

Bumex 1 MG Oral Tablet

205489 (RxNorm)

Keep

Remove

simethicone 125 MG Oral Tablet

198853 (RxNorm)

Keep

Remove

Ketorolac Ophthalmic Solution [Acular]

363846 (RxNorm)

Keep

Remove

Khaya senegalensis bark extract

1307601 (RxNorm)

Keep


Remove

Diabetic renal disease (disorder)

Keep

Remove

Cancel

 = Reconciled

Complete Reconciliation



Dashboard – Med Rec

Med Rec

To perform Med Rec is easy. Just click “Keep” or “Remove” on the patient’s existing medications. Then add new medications by searching (this works the same way as MIST).

Repeat the same steps for Allergies and Problems.

Medications

Morphine Oral Solution 106841 (RxNorm)	<input checked="" type="radio"/> Keep <input type="radio"/> Remove
Bumex 1 MG Oral Tablet 205489 (RxNorm)	<input type="radio"/> Keep <input checked="" type="radio"/> Remove
simethicone 125 MG Oral Tablet 198853 (RxNorm)	<input checked="" type="radio"/> Keep <input type="radio"/> Remove
Ketorolac Ophthalmic Solution [Acular] 363846 (RxNorm)	<input type="radio"/> Keep <input checked="" type="radio"/> Remove

Dashboard – Med Rec



Next you will need to record the “Sender Info”. This is typical an outside provider, hospital, etc. If this information is not known, just type “unknown” or “per patient”.

When complete click “Complete Reconciliation”.

Med Rec

Medications, Allergies & Problems | **Sender Info**

Provider Name
Dr. Jason Smith, M.D.

Performing Organization
Facility Name
Genesis Hospital

Address

City

State Abbr.

ZIP

Phone

Complete Reconciliation

Cancel = Reconciled **Complete Reconciliation**

#Transfer Care (Dashboard)





Dashboard – Transfer Care

Transfer Care

The Transfer Care tile is used to transition your patient **OUTSIDE** of your practice **INTO** another care setting. Here you can create a “Transfer of Care” (also known as a “Summary of Care”) C-CDA and then send to another provider.

To create a Transfer of Care document first click the “Add New” button.

Next fill out the following fields:

- **Referring Provider** - this is the provider IN YOUR FACILITY transferring the patient OUT OF YOUR FACILITY)
- **Date Referred** – this is the date you are transferring your patient (e.g. today’s date is standard)
- **Referred to Provider** – this is the provider you are transferring your patient to.
- **Appointment Date** – this text box can include the patient’s scheduled appointment if known
- **Reason for Referral** – this is the reason the patient needs to be transferred (e.g. needs an MRI, pulmonary function tests, etc.)
- **Date Summary of Care Provided** – this is the date you provided the transfer of care document to the outside provider
- **Transfer Method** – this is how you provided the C-CDA transfer of care (summary of care) document to the outside provider. ChiroSpring no longer supports direct messaging (due to lack of demand). If you are sending via post mail or another means type this here.

#Launcher
















Launcher



The Launcher contains additional Front Desk apps.

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Help

 Cash Register Ledger	 Patient List	 Audit Log	 Pt. Self Check-in	 Ins. Accounts Receivable	 Help Center	 Online Appt. Manager	 Process Payments	 Time Clock
 ChiroSpring Share	 Wait List	 Account Management	 ChiroSpring Pay Portal					

Close **Dock**

Front Desk Provider View Patient Flow **Tuesday, Oct 4, 2022** **1:09 PM** **Dr. Brian Albery** Log Out KB

Cash Register Ledger



Cash Register Ledger

CPT copyright 2013 American Medical Association. All rights reserved.

Filters:

This app is used to delete non-patient cash register transactions.

Filter by date

Filter by description

Filter by amount

Clear Filters

From: <MM-dd-yyyy 15 To: <MM-dd-yyyy 15

Amount Low: Amount High:

Date	Description	Units	Amount
08/29/2016	1000 Biofreeze Cryospray - 4 Oz	1	17.12
08/16/2016	1000 Biofreeze Cryospray - 4 Oz	1	17.12
12/18/2015	1031 Imbue Pain Relief Patch - 4/Box	1	25.68
12/17/2015	1000 Biofreeze Cryospray - 4 Oz	1	17.12
07/10/2015	1338 10 Inch Universal Criss-Cross Support	1	28.89
07/10/2015	1338 10 Inch Universal Criss-Cross Support	1	28.89
12/17/2014	TEST	1	0.00

Close

Dock

Delete Selected

Load More Charges

Cash Register Ledger



The Cash Register Ledger will show you all cash register transactions where a PATIENT was not selected. Here you can delete them if necessary.

12/18/2015	1031 Imbue Pain Relief Patch - 4/Box
12/17/2015	1000 Biofreeze Cryospray - 4 Oz
07/10/2015	1338 10 Inch Universal Criss-Cross Support
07/10/2015	1338 10 Inch Universal Criss-
12/17/2014	TEST

Confirm Delete ✕

Are you sure you want to delete the selected charge? This action cannot be undone.

#Patient List





Launcher - Patient List

The Patient List app satisfies an EHR requirement which is creating a list of patients based on multiple criteria such as problems and medications. Aside from satisfying this EHR requirement this can be very useful. Perhaps you want to generate a list of patients with a certain diagnosis. No problem.

This app works similar to the Clinical Decision Support app in that you create rules based on criteria. Once you have created your rules, select Generate List. Once your list is generated (this may take a lot of time depending on patient volume and the complexity of your criteria) select View Results.

You can even send patients a message. To do this when you are viewing results select Send Message to Selected. This will open a dialog allowing you to type a message. The message will be sent to your patients based on their Message Contact preference. This is set in the patient profile. You must have an account with www.remindercall.com in order for the message feature to work.

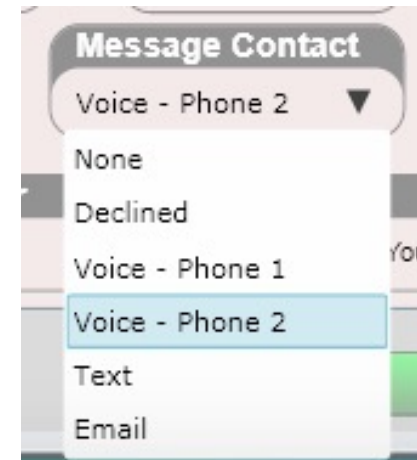
The Patient List app is located in the Launcher.



Launcher



Patient List





Launcher - Patient List



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Patient List

Search Rules

85

4 ****Age > 65 and < 85 / Gender is Male**
DEMOGRAPHIC LIST

5 ****Lab Test Result - LDL Cholesterol 0 to 85 or Magnesium 1-5 within 6 months (tested and working)**
LAB RESULT LIST

Rule Definition

Title

4 ****Age > 65 and < 85 / Gender is Male**

Description

DEMOGRAPHIC LIST

Criteria Joining Operator

AND

Use this App to generate patient lists based on criteria. First select your criteria type below, then click "Generate List". The status of your generated list will be shown below. It may take several minutes to hours to complete your list depending on criteria and patient volume.

Include Checked Items in List

- DOB
- Age
- Phone
- Email
- Account #
- Address
- City
- State
- Zip
- Message Contact

Criteria

Name	Criteria Type	Delete	Edit
Age b/w 65-85 or Male	Demographics	Delete	Edit
gender is male	Demographics	Delete	Edit

Criteria Type

[Add](#)

[View Results](#)

[Generate List](#)

Patient List Status: Ready

Date/Time Created: 10/19/2016 2:44 AM

[Close](#)

[Dock](#)

[Add New](#)

[Delete](#)

[Cancel](#)

[Save](#)



Launcher - Patient List



Patient List

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Search Rules

	Patient First Name	Patient Last Name	Account #	DOB	Age	Email	Phone	Address
<input checked="" type="checkbox"/>	Tom	Andresen	ANDTO000	1932-06-08	84	vishalk_sipl@systematixindia.c	555-433-3222	1234 Main St.
<input checked="" type="checkbox"/>	Tom	Andresen	ANDTO000	1932-06-08	84	vishalk_sipl@systematixindia.c	555-433-3222	1234 Main St.
<input checked="" type="checkbox"/>	Victor	Canders	CANVI000	1936-12-15	79	a@b.com		
<input checked="" type="checkbox"/>	Victor	Canders	CANVI000	1936-12-15	79	a@b.com		
<input checked="" type="checkbox"/>	Mike	Mickelson	MICMI000	1944-09-03	72			
<input checked="" type="checkbox"/>	Mike	Mickelson	MICMI000	1944-09-03	72			
<input checked="" type="checkbox"/>	Corey	Cummings	CUMCO000	1942-02-01	74	test		
<input checked="" type="checkbox"/>	Corey	Cummings	CUMCO000	1942-02-01	74	test		
<input checked="" type="checkbox"/>	Scott	Jenkins	JENSC000	1945-01-03	71			
<input checked="" type="checkbox"/>	Scott	Jenkins	JENSC000	1945-01-03	71			
<input checked="" type="checkbox"/>	Max	McGee	MCGMA000	1940-06-08	76			
<input checked="" type="checkbox"/>	Max	McGee	MCGMA000	1940-06-08	76			
<input checked="" type="checkbox"/>	Tony	Meenan	MEETO000	1944-06-16	72		563-505-1807	
<input checked="" type="checkbox"/>	Tony	Meenan	MEETO000	1944-06-16	72		563-505-1807	
<input checked="" type="checkbox"/>	Tiger	Shroff	SHRTI000	1937-10-10	79	vishalk_sipl@systematixindia.c	741-561-8153	
<input checked="" type="checkbox"/>	Tiger	Shroff	SHRTI000	1937-10-10	79	vishalk_sipl@systematixindia.c	741-561-8153	

Check All

Clear All

Title: 4 **Age > 65 and < 85 / Gender is Male

Send Message to Selected

Close



Launcher - Patient List



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Patient List

Search Rules

	Patient First Name	Patient Last Name	Account #	DOB	Age	Email	Phone	Address
<input checked="" type="checkbox"/>	Tom							ain St.
<input checked="" type="checkbox"/>	Tom							ain St.
<input type="checkbox"/>	Victor							
<input type="checkbox"/>	Victor							
<input type="checkbox"/>	Mike							
<input type="checkbox"/>	Mike							
<input checked="" type="checkbox"/>	Corey							
<input checked="" type="checkbox"/>	Corey							
<input type="checkbox"/>	Scott							
<input type="checkbox"/>	Scott							
<input type="checkbox"/>	Max							
<input type="checkbox"/>	Max							
<input checked="" type="checkbox"/>	Tony							
<input checked="" type="checkbox"/>	Tony							
<input checked="" type="checkbox"/>	Tiger							
<input checked="" type="checkbox"/>	Tiger							

Text Message
Type the message you want sent as a text here

Copy to Voice Copy to Email

Voice Message
Type the message you want sent as a voice here

Copy to Text Copy to Email

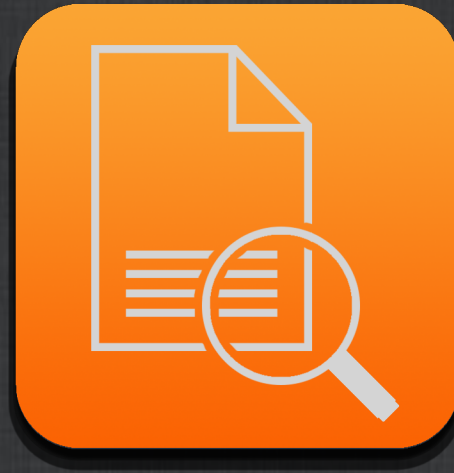
Email
Subject
Email Subject Goes Here

Message
Type the message you want sent as a an email here

Copy to Text Copy to Voice

Check All **Cancel** **Send Message To Selected Patients** [Acceptable Use Policy](#) **Close** **Message to Selected**

#Audit Log





Launcher – Audit Log

This app records user access to several areas of the software including the patient profile, Edit SOAP and MIST. We recommend turning Audit Log to “OFF” in Settings/Practice Info/General. This is because this is a heavy “data hog” and will use a lot of cloud storage if left on over a long period of time. However, the choice is up to you.

The audit log can be beneficial if you want to track which staff member made an edit to a particular patient for example.

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General	Default Place Of Service Code 24b	Taxonomy Code 32b	Audit Log Enabled?
	11	33L	No ▼
Facility Locations	Missed Appointment Time Limit	Clock Settings	Automatic Log-off After
	20 hours ▼	HH:MM ▼	Do Not Log Off ▼



Launcher – Audit Log

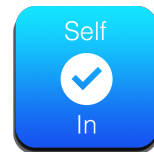
Audit Log								CPT copyright 2013 American Medical Association. All rights reserved.	
Date & Time ▾	Account No.	Patient Name	User (ID)	Emg	Action	Section	Checksum		
2016-10-19 04:32:14	ABRJO000	Abraham, John	drbrian (3)	No	Deleted	Health Status -> Smoking Status	Good		
2016-10-19 04:32:07	ABRJO000	Abraham, John	drbrian (3)	No	Viewed	Health History	Good		
2016-10-19 04:13:48	THOCH000	Thompson, Chad	chirospring (2)	No	Viewed	Edit SOAP	Good		
2016-10-19 03:40:08	COITA000	Coit6, Tabatha	drbrian (3)	No	Viewed	Edit SOAP	Good		
2016-10-19 02:49:11	ANDTO000	Andresen, Tom	drbrian (3)	No	Viewed	Patient Profile	Good		
2016-10-18 11:51:16	THOCH000	Thompson, Chad	drbrian (3)	No	Viewed	Edit SOAP	Good		
2016-10-18 11:30:36	THOCH000	Thompson, Chad	drbrian (3)	No	Viewed	Edit SOAP	Good		
2016-10-18 11:21:11	THOCH000	Thompson, Chad	drbrian (3)	No	Viewed	Edit SOAP	Good		
2016-10-18 11:07:20	THOCH000	Thompson, Chad	drbrian (3)	No	Viewed	Edit SOAP	Good		
2016-10-18 10:17:51	THOCH000	Thompson, Chad	drbrian (3)	No	Viewed	Edit SOAP	Good		
2016-10-18 10:14:14	THOCH000	Thompson, Chad	drbrian (3)	No	Viewed	Edit SOAP	Good		
2016-10-18 02:49:13	THOCH000	Thompson, Chad	chirospring (2)	No	Viewed	Edit SOAP	Good		
2016-10-18 02:36:14	THOCH000	Thompson, Chad	chirospring (2)	No	Viewed	Edit SOAP	Good		
2016-10-18 02:27:26	THOCH000	Thompson, Chad	chirospring (2)	No	Viewed	Edit SOAP	Good		
2016-10-18 02:22:46	THOCH000	Thompson, Chad	chirospring (2)	No	Viewed	Edit SOAP	Good		

Log Details

CloseGenerate HashGenerate Audit Log Report

#Pt. Self Check-in

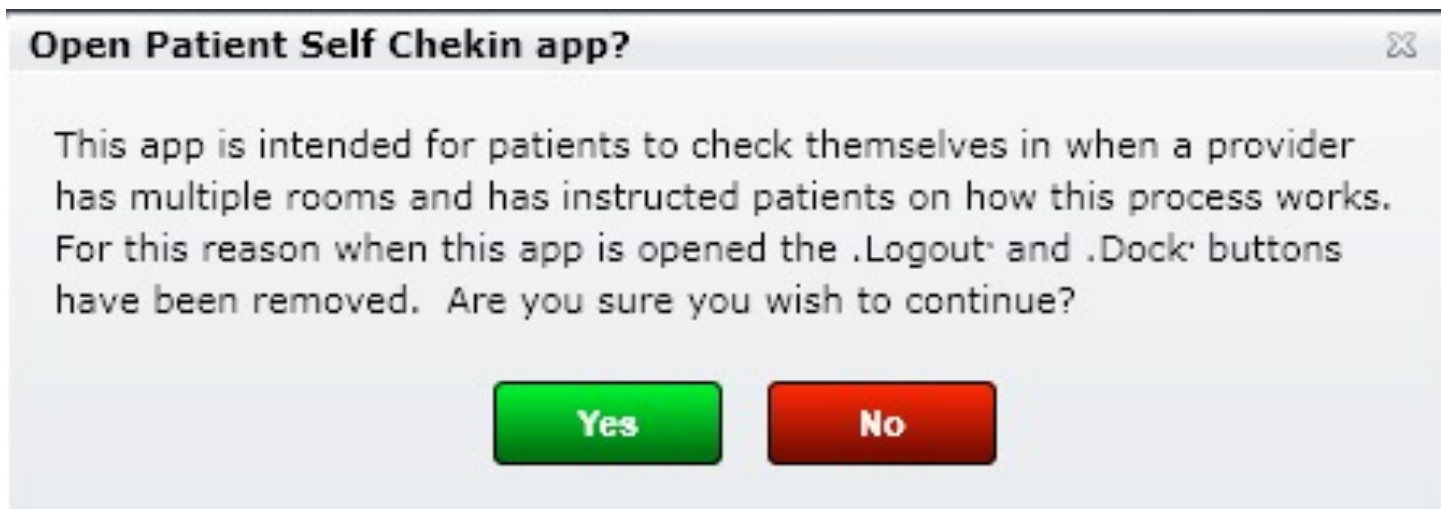




Launcher – Pt. Self Check-in

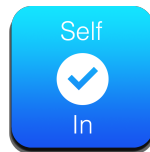
This app will allow your patient the ability to check themselves in. This is NOT a kiosk. It simply allows your patient to see when a room is AVAILABLE and then move themselves into that room. This app should be used in conjunction with a provider who is using Patient Flow.

When the Self Check-in app is opened it cannot be DOCKED and the user has no access to ANY area of ChiroSpring. The intention is to open this app on a computer where patients can check themselves in. The app cuts off some of the patient first and last name to keep in compliance with HIPAA.





Launcher – Pt. Self Check-in



Pt. Self Check-in

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Patient Self Check-In - Main location

Instructions

To use, open the Pt. Self Check-in app on a computer. Then train patients to right click (or double click) on their name followed by selecting an available room.

Waiting for Room

Jo. Abr 10/10
Appt Time: Oct 15, 9:10 AM
Checked In: 11:04 PM
Dr. Brian Albery

Ti. Shr 10/15
Appt Time: Oct 15, 9:30 AM
Checked In: 1:29 AM
Dr. Brian Albery

Ch. Tho 12/12
Appt Time: Oct 15, 10:00 AM
Checked In: 4:40 AM
Dr. Brian Albery

Ta. Col 09/13
Appt Time: Oct 16, 5:35 PM
Checked In: 7:37 AM
Dr. Brian Albery

Exam Room 1	Exam Room 2
Ch. Tho 12/12 Appt Time: Oct 14, 10:50 AM Checked In: 9:22 AM Dr. Brian Albery	
Treatment Room 1	Treatment Room 2
	Su. Jon 10/16 Appt Time: Oct 16, 9:40 AM Checked In: 4:28 AM Dr. Brian Albery

Awaiting Checkout

Ch. Tho 12/12
Appt Time: Oct 15, 11:40 AM
Checked In: 4:38 AM
Dr. Brian Albery

#Insurance AR





Launcher – Insurance AR

This app will provide management of insurance accounts receivable. Use a variety of filters including date range, aging, insurance carrier, provider and patient.

Insurance Accounts Receivable CPT copyright 2019 American Medical Association. All rights reserved.

Visit Date	Charge	Disputed	First Billed	Last Billed	Aged 0 to 30	Aged 31 to 60	Aged 61 to 90	Aged 91 to 120	Aged 121 +	Total Owed
------------	--------	----------	--------------	-------------	--------------	---------------	---------------	----------------	------------	------------

Select Date Range ?

From Date: 01-20-2020

To Date: 01-20-2020

Select All Dates

Filters

Select Filters

Insurance Carriers

Patients

Select Filters

Select Provider

All Providers

Insurance Billing Status

Primary Billed

Secondary Billed

Tertiary Billed

Aging

0-30

31-60

61-90

91-120

121+

Save Default

OK Cancel

Close Dock Print

#Help Center





Launcher – Help Center

The Help Center provides a Google Search interface with over 500 customer written articles. We constantly add new content to provide you fast and simple solutions to common problems.



New Customer Training Videos

Apps - Launcher
Learn about the various apps in CHIROSPPRING's Launcher app.

Apps - Settings
Learn about the various apps in CHIROSPPRING's Settings app.

Apps - Front Desk
Get help on the various apps on the CHIROSPPRING Front Desk.

CHIROSPPRING PAY

Help Center - Find Answers Quick and Easy
You can quickly find answers to your questions about using CHIROSPPRING software.

#Online Scheduling





Launcher – Online Scheduling

In the Launcher you will find an app called Online Appt. Manager. This is the Admin Portal for Online Scheduling. Here is where you confirm patient requested appointments.

Manage Appointments							
#	Name	Email	DOB	Phone	Date/Time	Patient Status	Appointment Status
1	Robin Portland	robinportland123@gmail.com	05-05-1987	555-555-5555	11-12-2019 15:00	Unmatched	Pending
2	Mike Gremlin	mike@gmail.com	02-05-2001	555-555-5555	12-06-2019 16:00	Unmatched	Pending

The patient facing Online Scheduling URL can be found in Settings/Users/Online Scheduling.

#Process Payments



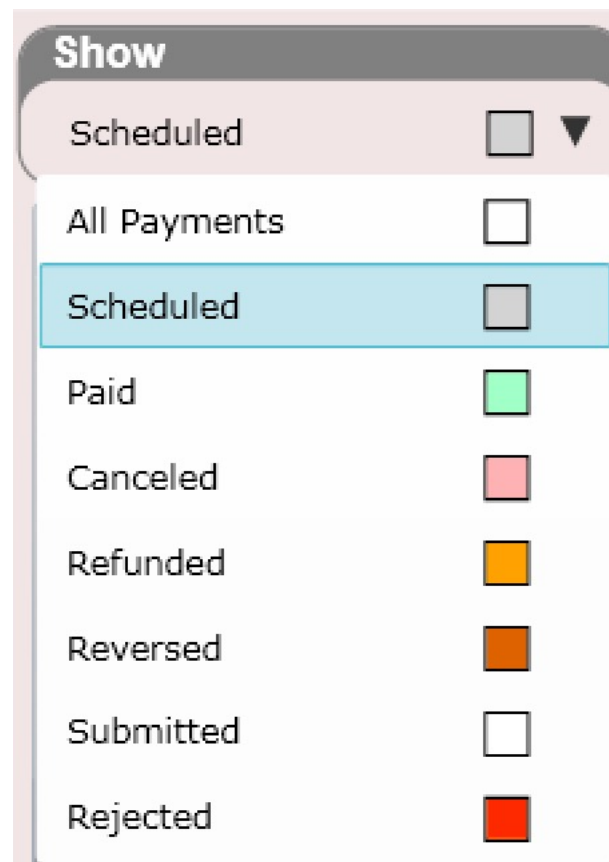


Launcher – Process Payments

This app will allow you to process all your scheduled payments in a single click.

Scheduled payments can be created in the patient Ledger under the Scheduled Payments tab. Then inside this Process Payments app, select a date range (this is the scheduled date). Then select the payments you want to process and click “Process Checked”. The software will then process all the payments (e.g. bill the patient’s credit card or bank (ACH payment).

Use the “Show” dropdown to view payments by a different status.





Launcher – Process Payments



Process Payments

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Show

Scheduled ▼

Filter by Scheduled date

From: <MM-dd-yyyy> To: <MM-dd-yyyy>

Filter by Patient

Clear Filters

	Patient	Scheduled Date ▲	Amount	CC#	EXP (MM/YY)	Status	Date Created	Note
<input type="checkbox"/>	Daniel Abraham	04/27/17	5.00	XXXX-XXXX-XXXX-9424	04/18	Scheduled	04/27/17	
<input type="checkbox"/>	Chad A Thompson	04/28/17	50.00	XXXX-XXXX-XXXX-2229	04/18	Scheduled	04/28/17	
<input type="checkbox"/>	John Abraham	05/10/17	3.00	2121		Scheduled	03/10/17	
<input type="checkbox"/>	Peg Moneybags	05/24/17	100.00	XXXX-XXXX-XXXX-2229	04/18	Scheduled	03/24/17	
<input type="checkbox"/>	Chad A Thompson	05/28/17	50.00	XXXX-XXXX-XXXX-2229	04/18	Scheduled	04/28/17	
<input type="checkbox"/>	Chad A Thompson	06/28/17	50.00	XXXX-XXXX-XXXX-2229	04/18	Scheduled	04/28/17	
<input type="checkbox"/>	Cash Johnson	07/07/17	50.00	2121		Scheduled	03/07/17	
<input type="checkbox"/>	Peg Moneybags	07/24/17	100.00	XXXX-XXXX-XXXX-2229	04/18	Scheduled	03/24/17	
<input type="checkbox"/>	Daniel Abraham	07/27/17	5.00	XXXX-XXXX-XXXX-9424	04/18	Scheduled	04/27/17	
<input type="checkbox"/>	Chad A Thompson	07/28/17	50.00	XXXX-XXXX-XXXX-2229	04/18	Scheduled	04/28/17	
<input type="checkbox"/>	Daniel Abraham	08/27/17	10.00	XXXX-XXXX-XXXX-1004	04/18	Scheduled	04/27/17	
<input type="checkbox"/>	Daniel Abraham	08/27/17	5.00	XXXX-XXXX-XXXX-9424	04/18	Scheduled	04/27/17	

#ChiroSpring Share









Launcher – ChiroSpring Share

ChiroSpring Share allows you to post or download Macros, Products or Services. Help the community with the work you put in creating this content! 😊. Use the Import or Export buttons in the Settings apps for these items, respectively.

All

-  Macros
-  Products
-  Services
-  Kiosk Intake Questions
(coming soon)

Macros [Share a Macro](#)

Oriental Medicine

This macro is used in Chinese Medicine for Acupuncturists.

SOAPD Shared by: Ed Gibbs, DC
Gibbs Natural Healing Centre, PC

My Radiology Reports

Use this Macro to create Cervical and Lumbar radiology reports. When completed you will have a format that can be sent with your note or send as a standalone radiology report.

O Shared by: Zane Dillree
Evanston Chiropractic

CLA Insight Scans

This Macro is used for inputting findings from CLA Insight scans for providers using the three tech from CLA.

O Shared by: Anonymous

Products [Share a Product](#)


Many Manufacturers

This is a large list of products from various manufacturers including Systemic Formulas, Standard Process, Medi Herb, HealthWise and Trumedical Solutions. Includes cost and SKU on most of them as well.

Shared by: Anonymous

Huge List - Many Manufacturers

This is a huge list of products from various manufacturers including Rocky Mountain, Systemic, Bio Pure, Standard Process, Apex, Biotics, Medi Herb, Energetic, Marco, Nordic, Emerson, Designs for Health and more. Includes cost and SKU on most of them as well.

 [Click here to chat](#)

#Wait List





Wait List – How to Use

Add patients to your Wait List and write notes as needed. Phone number is visible should you need to contact them. Once you get the patient scheduled on the calendar delete them from the Wait List.

Wait List CPT copyright 2020 American Medical Association. All rights reserved.

Waiting List Patients ?

Brady E Albery ALBBR000 12/16/1979

Details



Brady E Albery
Mobile: 563-335-9372

Notes
Needs therapy and exam.

↑ ↓
Load More

Close Dock Add New Remove Remove All Cancel Save

#Kiosk





Patient Kiosk – How to Use

In the Settings section of this user manual, we explain how to customize the patient kiosk. This section will explain how to use the patient kiosk.

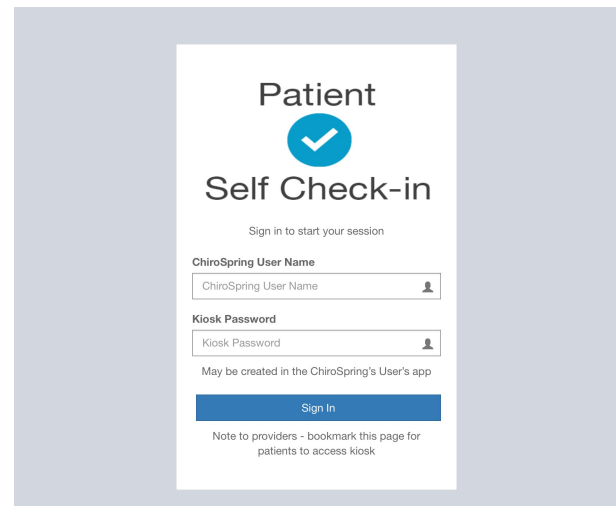
The patient kiosk itself is accessed in a web-browser. Go to Settings/Users and click on the Kiosk URL. See below.

Kiosk/Online Scheduler Password ?

.....

Kiosk URL : https://mypatientkiosk.com/?checkin_step2&ClinicCode=0123456702

This will open your web-browser. Make sure you have created a Kiosk Password (shown above). This can be the same as your normal ChiroSpring password if you want.





Patient Kiosk – How to Use

For convenience we recommend bookmarking this page. Also make sure you set your browser to not remember addresses or usernames as it would remember patient “history”.

Now just log in with your ChiroSpring password and kiosk password once per day.

The screenshot shows a white login form centered on a light blue background. At the top, the text 'Patient' is followed by a blue circle containing a white checkmark, and then 'Self Check-in'. Below this is the instruction 'Sign in to start your session'. There are two input fields: 'ChiroSpring User Name' and 'Kiosk Password', each with a small person icon on the right. A note below the fields says 'May be created in the ChiroSpring's User's app'. A blue 'Sign In' button is at the bottom of the form. A footer note reads 'Note to providers - bookmark this page for patients to access kiosk'.

Patient
Self Check-in

Sign in to start your session

ChiroSpring User Name

ChiroSpring User Name

Kiosk Password

Kiosk Password

May be created in the ChiroSpring's User's app

Sign In

Note to providers - bookmark this page for patients to access kiosk



Patient Kiosk – How to Use

Once you have logged in you will see this screen. This is the screen your patients will check into. Patients will need to have a PIN number in order to check in. We suggest having a number pad keyboard on your Front Desk so the patient can type in their pin when you have their Profile opened. See below where this gets entered into the Patient Profile.



Your patient will then be able to check into the kiosk with:

- Phone Number
- PIN

If there are multiple matches, then DOB and Letter of First Name would be required.

Patient
Self Check-in

Type your information below

Phone Number
XXX-XXX-XXXX

Kiosk Pin
XXXXXXXXXX

See Front Desk to create Pin

Check In



Patient Kiosk – Logged In

The patient is now signed in and they can go through each section entering in their information.

Patient Kiosk

- Welcome
- Personal Information
- Employment Information
- Enrollment
- Emergency Contact
- Demographics
- Smoking Status
- Social History
- Medications
- Allergies
- Problems
- Review of Systems
- Additional Intake Questions
- Acknowledgements
- Logout

Welcome to Spinal Care Chiropractic. We are here to help you get back to optimal health!

[Click Here To Continue](#)



Patient Kiosk – Intake Questions

Here you can see what the Additional Intake Questions look like. These can be created in Settings/Kiosk. The intake questions will be populated in Edit SOAP in the “Pt. Intake” tab.

Patient Kiosk

- Welcome
- Personal Information
- Employment Information
- Enrollment
- Emergency Contact
- Demographics
- Smoking Status
- Social History
- Medications
- Allergies
- Problems
- Review of Systems
- Additional Intake Questions**
- Acknowledgements
- Logout

Additional Intake Questions

Were you involved in a personal injury accident? Yes No

Personal Injury - Did you go to the hospital for your personal injury? Yes No

Personal Injury - Have you received any treatments since the injury? Yes No

What treatments have you received since the accident?

ice heat oral pain medication topical analgesics muscle relaxers wrist brace knee brace

neck brace ankle brace crutches back brace

If you received any other treatments list them.

How often have you been receiving treatment?

daily twice per week three times per week four times per week five times per week weekly

bi-weekly monthly

Details of treatment received:

Location and provider where previous treatment was received:

Are you responding to treatment?

the same improving worse

How did you feel immediately following the accident?

head pain neck pain neck stiffness jaw/facial pain (TMJ) shoulder pain shoulder stiffness arm pain

chest pain back pain low back pain lower limb pain back stiffness ear buzzing/ringing in ears

feet/toe numbness or tingling hands/fingers numbness or tingling cold feet cold hands cold sweats

constipation anxiety depression diarrhea difficulty swallowing dizzy/dazed disoriented fainting

fatigue forgetfulness impaired concentration irritability sensitivity to light sensitivity to noise

loss of balance loss of smell loss of taste loss of memory muscle spasms nauseous nervousness

pins and needles restlessness shortness of breath sleeping problems stomach upset tension

vision blurred weakness



Patient Kiosk – Intake Questions

After the patient has completed their Kiosk visit when the provider selects Edit SOAP the software will detect if there were any changes to Medications, Allergies or Problems. The dialog below will allow the provider the option to keep or reject these changes.

Import Kiosk Changes

Medications	Allergies	Problems
Free Text <input type="radio"/> Add <input checked="" type="radio"/> Remove	Dust allergy <input type="radio"/> Add <input checked="" type="radio"/> Remove 390952000 (SNOMED)	Kidney disease (disorder) <input checked="" type="radio"/> Add <input type="radio"/> Remove
butalbital 50 MG / aspirin 650 MG Oral Tablet <input checked="" type="radio"/> Add <input type="radio"/> Remove 197429 (RxNorm)	No known drug allergies <input checked="" type="radio"/> Add <input type="radio"/> Remove 409137002 (SNOMED)	

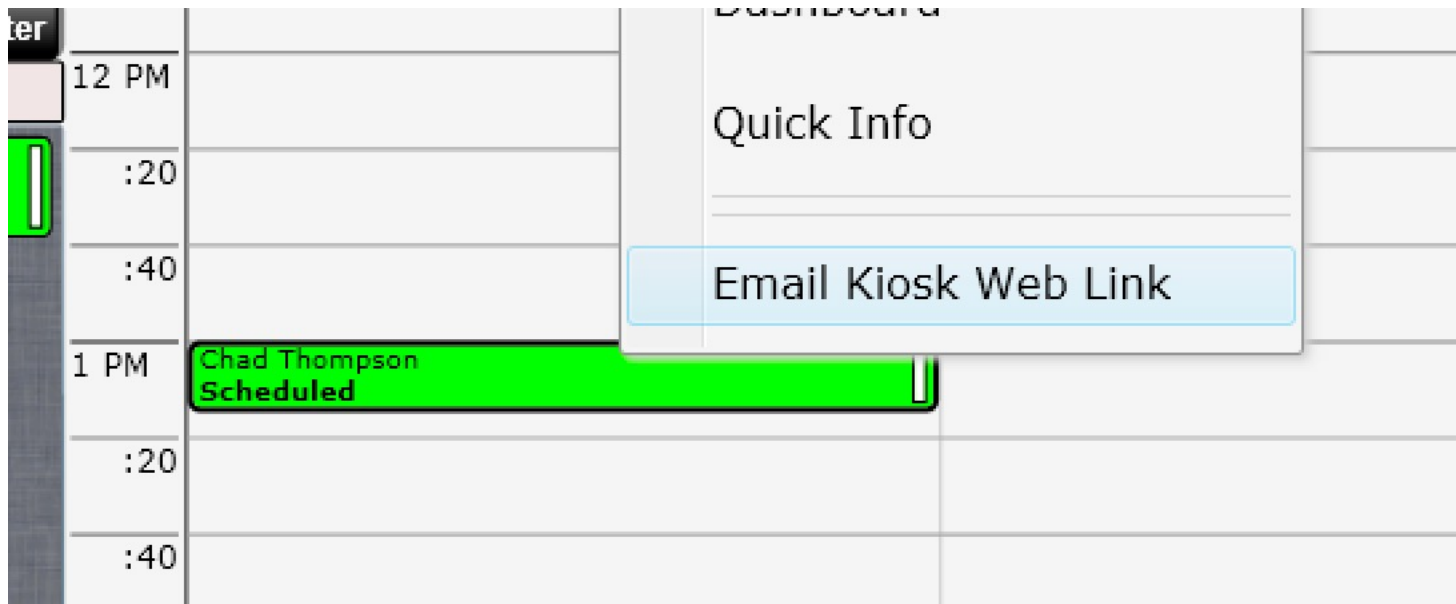
= Entered At Kiosk
 = Removed At Kiosk



Patient Kiosk – How to Use

If you have an account with Remindercall.com (for appointment reminders) you can also email your patient a Kiosk Web Link so that they can populate the kiosk from home prior to their visit.

To do this simply right click on the patient (on the calendar) and select 'Email Kiosk Web Link'.



#Settings





Settings

To access settings, click on the “Settings” app located on the front desk. There are several Settings apps.

- **Practice Info** – Customize practice information
- **Users** – User information including name, password, admin rights, pin, etc
- **Products** – Add or modify products
- **Services** – Add or modify services
- **Diagnoses** – Contains ICD9 and ICD10 Associated Text
- **Pin Charge Codes** – Customize your charges grid (in SOAP and at Cash Register)
- **Pin Diagnosis Codes** – Customize your diagnosis grid (in SOAP)
- **Visit Types**– Add or modify visit types including name, default length and color
- **Block-out Calendar Types** – Add or modify block-out types for the calendar
- **Rooms** – Add rooms for Paint Flow
- **Insurance Carriers** – Add or modify insurance carriers and enter Allowed Amounts
- **Outside Providers** – Add or modify referring providers
- **Attorneys** – Add or modify attorneys
- **Form Settings** – Align your CMS-1500 HCFA print settings
- **Export Data**– Export patient data into a .CSV format (can be opened in Microsoft Excel)
- **SOAP Macros** – Create your own simple SOAP Macros
- **Labs** – Add or modify labs including min and max values
- **Vaccines** – Add or modify vaccines



Settings

To access settings, click on the “Settings” app located on the front desk. There are several Settings apps.

- **Images** – Customize image settings such as region, type and view
- **Complaints**– Customize complaints and perform complaint mapping
- **ROS** – Customize your review of systems for Edit SOAP and the Patient Kiosk
- **Acupuncture** – Customize meridians and points
- **Arrange Dashboard** – Arrange your patient dashboard in the order you prefer
- **Extremities**– Add, Modify or Delete Extremities for the SOAP’s Adjustment Tab
- **Spine**– Add, Modify or Delete Extremities for the SOAP’s Adjustment Tab
- **Mist**– Add your own medications, allergies, problems, surgeries and traumas
- **How Heard About** – Add “how heard about” items that will be used to record how customers heard about your services
- **Patient Messaging**– Information on setting up appointment reminders and Patient List contact
- **Server Time** – Shows you the “cloud” server time. This time is used to ensure timestamps are correct.
- **Clinical Decision Support** – Allows you to create “rules” that trigger at specified locations.
- **Evaluation** – Allows you to customize evaluations located in the Edit SOAP/Evaluation tab
- **Treatment** – Allows you to customize muscles and regions associated with the Edit SOAP treatment tab
- **Patient Education** – Allows you to upload PDF documents and associate them with one or multiple medications, allergies, problems or labs. This is used in conjunction with the Patient Education dashboard tile and Edit SOAP patient education tab with the INFO button.
- **Pt. Self Check In** – Customize the message your patients will see with this app and determine if you want auto check-in enabled or not.



Settings

To access settings, click on the “Settings” app located on the front desk. There are several settings apps.

- **Goals** – Create Goals and Instructions to use in the Edit SOAP Care Plan Tab.
- **Meaningful Use** – Use this app to mark which measures you have met and which measures you will exclude. Measures that require a percentage calculation will be auto-calculated for you to determine met status.
- **Kiosk** – Allows you to customize your kiosk's preferences such as blocking sections, adding your own intake questions or uploading text for patient acknowledgement.
- **Stop Manager Templates** – Create templates that will make creating common Stop Managers much faster.
- **Calendar** – Customize your calendar columns and resources.
- **CompliantDC** – Schedule a free consultation with a chiropractor/lawyer combo who specializes in compliance. We are pleased to partner with such a valuable member of the profession.
- **Spell Check** – Create a custom dictionary or import a list of words as a .txt file.
- **Product Orders** – Used in Edit SOAP/Product orders. Customize the color and arrangement of your grid.
- **Care Plan Templates** – Create common care plans for quick use when creating individual care plans for your patients.
- **Colors** – Customize the front desk and list box colors.

Settings



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Search:

Practice Info	Users	Products	Services	Diagnoses	Pin Charge Codes	Pin Diagnosis	Visit Types
Block-out Calendar Types	Rooms	Insurance	Outside Providers	Attorneys	Form Settings	Export Data	SOAP Macros
Labs	Vaccines	Images	Complaints	ROS	Acupuncture	Arrange Dashboard	Extremities
Spine	MIST	How Heard About	Patient Messaging	Server Time	Clinical Decision Support	Evaluation	Treatment
Patient Education	Pt. Self Check-in	Goals	Kiosk	Stop Manager Templates	Care Plan	Calendar	SPELL CHECK

Close Dock

Front Desk **Provider View** Patient Flow **Wednesday, Sep 8, 2021 11:19 PM** **Dr. Brian Albery** Log Out KB


Activate Windows
Go to Settings to activate Windows.


Settings




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Search ✕


CompliantDC


Product Orders


Colors

◀ ▶

Close Dock

Front Desk Provider View Patient Flow **Wednesday, Sep 8, 2021 11:19 PM** **Dr. Brian Albery** Log Out KB

Activate Windows
Go to Settings to activate



Settings – Practice Info

Practice Info is where you go to set up all the information about your practice.

- General
- General 2
- Facility Locations
- Billing Address
- Logo
- Charge Options
- Payment Colors
- Integrated Payments
- Body Orientation
- Online Scheduling
- Statements

General
General 2
Facility Locations
Billing Address
Logo
Charge Options
Payment Colors
Integrated Payments
Body Orientation
Online Scheduling
Statements



Settings – Practice Info

General

- Default Place of Service Code (24b)
- Taxonomy Code (32b)(33b)
- Missed appointment Time Limit
- Clock Settings (this controls how your Front Desk clock is displayed)
- Custom Receipt Footer
- Custom Patient Statement Footer
- Custom SOAP Footer
- Show Front Desk Visit Types
- Allow Patient Flow on Calendar
- Sorting on Front Desk columns
- HCFA Provider Signature option (31)
- Turn on Meaningful Use
- User options for checking a patient out directly from the 'Checked In' column
- Alert option at Check-In when a patient exceeds monetary and visit limits



Settings – Practice Info



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General	Default Place Of Service Code 24b <input type="text" value="11"/>	Taxonomy Code 32b <input type="text" value="33b"/>	Automatic Log-off After <input type="text" value="Do Not Log Off"/>
General 2	Missed Appt. Time Limit ? <input type="text" value="1 day"/> X	Clock Settings ? <input type="text" value="HH:MM"/>	
Facility Locations	Custom Receipt Footer ? <input type="text" value="Thanks for choosing Spinal Care Chiropractic!"/>		
Billing Address	Custom Patient Statement Footer ? <input type="text" value="Thank you for choosing Spinal Care Chiropractic! 30 days past due balances are subject to an 8% service charge. After 90 days all past due invoices are sent to"/>		
Logo	Custom SOAP Footer ? <input type="text" value=""/>		
Charge Options	Show Front Desk Visit Types (when yes visit type colors will be shown on Front Desk) <input type="text" value="Yes"/>		
Payment Colors	Allow Patient Flow on Calendar (when yes you will have the same Front Desk patient flow options on the calendar) <input type="text" value="Yes"/>		
Integrated Payments	Checked In Sorting ? <input type="text" value="Newer Visits On Top"/>	Awaiting Checkout Sorting ? <input type="text" value="Newer Visits On Top"/>	HCFA Provider Signature 31 <input type="text" value="Use Signing Provider"/>
Body Orientation	Checked Out Sorting ? <input type="text" value="Checked Out Time"/>	Turn Meaningful Use On? (When on a Meaningful Use Tab will appear in Settings/Users) <input type="text" value="No"/>	
Online Scheduling	Claims app Sorting ? <input type="text" value="Newest to Oldest"/>	Any User (not just rendering provider) can move patient to Awaiting Checkout/Checkout <input type="text" value="Any User"/>	
Statements	Alert at Check-In/New Apt. When Visits or Monetary Limits Exceeded? ? <input type="text" value="Yes"/>		

Close
Save



Settings – Practice Info



Practice Info

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- General
- General 2
- Facility Locations
- Billing Address
- Logo
- Charge Options
- Payment Colors
- Integrated Payments
- Body Orientation
- Online Scheduling
- Statements

Fee Schedules (This text will appear in the Fee Schedule Dropdown in the Patient Profile) Edit

Fee Schedule A: Cash	Fee Schedule B: Military	Fee Schedule C: Hardship	Fee Schedule D: Student	Fee Schedule E: BC
Fee Schedule F: Medicare	Fee Schedule G: Massage Package	Fee Schedule H: Acupuncture Package	Fee Schedule I: 30 Day Chiropractic	Fee Schedule J: 60 Day Chiropractic

Copy Price Adjustments from previous visit ? Yes	Print Documents Per Batch ? 0	Auto Save SOAP Note ? Yes
---	----------------------------------	------------------------------

SOAP Note Headers ? Sub-heading only	Currency Symbol ? \$	SOAP Free Text Formatting ? Allow indents and spacing
---	-------------------------	--

Calendar - New Appointment Behavior ? Do not force column start on Right Click/New Appointment	Header Grey Level ? White
---	------------------------------

Auto SALT Rendering Provider ? No	Custom Payment Method Name ? Billing Dept.	Max Cloud CHIROSPPRING Sessions ? 1
--------------------------------------	---	--

ERA Allowed Amount Use Amount Allowed	Outcome Assessment Paper SOAP View ? Graph Only
--	--

Auto Check-In When Kiosk Visit Complete ? No

Close

Save



Settings – Practice Info

General 2

- **Fee Schedule Naming** – customize the name of your fee schedules
- **Copy Price Adjustments from previous visit** - This allows you to carry over discounts from Edit SOAP to the next visit so that you do not have to apply the discount every visit.
- **Print Documents Per Batch** – For large practices printing a LARGE number of statements at a single time use this option to break up the batch into CHUNKS. This will prevent slow printing or freezing if you try and print too many. We suggest setting to 50 or less.
- **Auto Save SOAP Note** – We recommend turning this on. Each time you change tabs in Edit SOAP your work will be automatically saved.
- **SOAP Note Headers** – Change the look of your paper SOAP Note headers.
- **Currency Symbol** – If you are in the U.S.A. you will use \$. This is beneficial for users in other countries who want to utilize ChiroSpring without the dollar sign.
- **SOAP Free Text Formatting** – This provides flexibility on how your Free Text works in Edit SOAP.
- **Calendar New Appointment Behavior** – Allows flexibility for forcing column starts or not on Right Click/New Apt.
- **Header Grey Level** – Change the header density for SOAP Notes.
- **Auto SALT Rendering Provider** – When SOAP Notes are copied with Edit SOAP the previous rendering provider is also copied. If set to 'No' the software will use the scheduled to provider as the rendering provider.
- **Custom Payment Method Name** – There is one option for Payment Methods you can name. Default is 'Other'.
- **Max Cloud ChiroSpring Sessions** – See how many Cloud ChiroSpring accounts you have. More can be purchased at www.CloudChiroSpring.com.



Settings – Practice Info

Facility Locations

Here you can set your facility location information such as name, address, phone, facility NPI, Facility Other ID, Default Tax Rate, Scheduler Day Start and End, Scheduler Time Slots per Hour and Scheduler Max Columns in View.

[Contact ChiroSpring support if you need to add an additional location](#)

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ChiroSpring supports multiple facility locations. Each location can specify its own address, scheduler options, tax rate, and exam rooms.

Default Facility Location for this Computer
 Spinal Care Chiropractic (Active) ▼

Facility Locations ?
 Spinal Care Chiropractic (Active) ▼ Add Edit Name Remove Set Active Set Inactive

Facility Address 32

Name Dr's Chiropractic **Email Address** info@gmail.com

Address 234 Western **City** Davenport **State Abbr.** IA **Zip** 52722-1234

Phone 1 563-545-4565 **Type** Home ▼ **Phone 2** **Type** Home ▼ **Fax**

Facility NPI # 32a 677282822 **Facility Other ID #** 32b **Default Tax Rate %** ? 8.000

Scheduler Day Start Time ? 6:00 AM X **Scheduler Day End Time** ? 9:30 PM X **Default Appointment Type** ? Scheduled ▼

Scheduler Time-Slots per Hour ? 4 - (15 minutes per time slot) ▼ **Scheduler Max Columns in View** ? 3 ▼ **Facility Time Zone** ? Central Standard Time or Mountain Da ▼

Default Visit Types ? Edit
 1. Trigger Point Therapy

Close Save



Settings – Practice Info

Billing Address

Here you can populate billing address information such as practice name, address, phone, fax, notes, billing NPI, billing other ID and federal tax ID.

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General	Billing Address Information 33
General 2	Name: Spinal Care Chiropractic Email Address: <input type="text"/>
Facility Locations	Address: 1234 Brady St. | City: Davenport | State Abbr.: IA | Zip: 52806-1234
Billing Address	Phone 1: 555-723-4563 | Type: Home ▼ | Phone 2: <input type="text"/> Type: Home ▼ | Fax: 555-337-8722
Logo	Notes: <input type="text"/>
Charge Options	Entity Type: Individual ▼ | Federal Tax ID # (EIN): TAXID - 27-34 25
Payment Colors	Billing NPI #: 5635059372 33a | Billing Other ID #: Billing OTHER ID 33b
Integrated Payments	
Body Orientation	
Online Scheduling	
Statements	



Settings – Practice Info


Logo

Use the Logo Tab to import your logo.

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- General
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Logo Image



Logo on Reports

Add logo to reports

Logo Position : Top Right ▼



Settings – Practice Info

Charge Options

Here you can set several default settings for your practice relating to applying payments and estimating patient member responsibility (PMR). Each of these options will be detailed on the next pages.

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General

General 2

Facility Locations

Billing Address

Logo

Charge Options

Payment Colors

Integrated Payments

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Online Scheduling

Statements

Options for Auto Apply Payments

ChiroSpring provides the ability to apply patient payments to their charges. This allows tracking which charges were paid by each payment. When auto apply payments is enabled, ChiroSpring will automatically apply any unapplied payment amounts to any outstanding patient charges. If auto apply payments is disabled, the user(s) must manually apply the payments. Proper applying of payments is required to accurately report unpaid patient charges (e.g. patient statements, HICF patient paid), therefore we recommend enabling this option to reduce user workload.

Auto Apply Payments? ?

No ▼

Options for Estimating Patient Member Responsibility (PMR)

ChiroSpring provides the ability to estimate a charge's PMR (copay, co-insurance, deductible, and amount allowed (amount allowed is the basis used to calculate these values)). When a user adds a new charge to a visit, the charge always defaults to estimating PMR. The options below allow the practice to specify which PMR values will be estimated. Once a charge is billed or reconciled, estimating of the charge's PMR is turned off. When estimating is off, the user may freely enter the actual PMR values, from a claim remittance for example, without the software re-estimating these values.

Estimate Copay?

Yes ▼

If 'Yes' then the copay selected in the patient's insurance case is used to estimate member responsibility. If 'No' then copay will not be estimated regardless of selection in patient's insurance case.

Estimate Co-insurance?

Yes ▼

If 'Yes' then the co-insurance selected in the patient's insurance case is used to estimate member responsibility. If 'No' then co-insurance will not be estimated regardless of selection in patient's insurance case. Co-insurance is calculated using the charge's allowed amount.

Estimate Deductibles?

Yes ▼

If 'Yes' then the deductible selected in the patient's insurance case is used to estimate member responsibility. If 'No' then deductible will not be estimated regardless of selection in patient's insurance case.

Billing Colors ?

Bill Primary	Preview Text	Primary Billed	Preview Text
Bill Secondary	Preview Text	Secondary Billed	Preview Text
Bill Tertiary	Preview Text	Tertiary Billed	Preview Text
Cash	Preview Text	Reconciled	Preview Text
All	Preview Text	Not Signed	Preview Text

[Billing State Colors](#)

Close
Save



Settings – Practice Info

Options for Estimating Patient Member Responsibility

Before you create even a single insurance case and assign copays, co-insurances or deductibles it is **VERY IMPORTANT** that you understand the “Options for Estimating Patient Member Responsibility” found in Settings/Practice Info. Essentially there are three dropdown boxes that allow you to turn “ON” or “OFF” if your practice will be using Copays, Co-Insurances, or Deductibles to calculate patient member responsibility. By default, these are all “Yes”.

Options for Estimating Patient Member Responsibility

Estimate Copay?
Yes ▼

Estimate Co-insurance?
Yes ▼

Estimate Deductibles?
Yes ▼

Found in Settings/Practice Info





Settings – Practice Info

Options for Estimating Patient Member Responsibility

Estimate Copay

Estimate Copay?
Yes ▼

YES

- The patient's selected Copay will be used to calculate member responsibility.
- The patient's selected Copay will be displayed when you check in a patient in the "Member Responsibility" box.

NO

- Copay will not be used to calculate member responsibility no matter what. Even if you enter a copay in for a patient and check the box next to copay in the patient's insurance plan screen.
- The patient's selected Copay will be displayed when you check in a patient in the "Member Responsibility" box but will not be used to calculate patient member responsibility.
- If no copay box is checked in the patient's insurance plan no copay information will be displayed.

NOTES: Only one Copay can be selected (checked) for an insurance case.

Use this copay?
Copay
20.0000



Settings – Practice Info

Options for Estimating Patient Member Responsibility

Estimate Co-insurance

Estimate Co-insurance?
Yes ▼

YES

- The patient's selected Co-insurance will be used to calculate member responsibility.
- The patient's selected Co-insurance will be displayed when you check in a patient in the "Member Responsibility" box.

NO

- Co-insurance will not be used to calculate member responsibility no matter what. Even if you enter a co-insurance in for a patient and check the box next to "Use this co-insurance" in the patient's insurance plan screen.
- The patient's selected Co-insurance will be displayed when you check in a patient in the "Member Responsibility" box but will not be used to calculate patient member responsibility.
- If no co-insurance box is checked in the patient's insurance plan no co-insurance information will be displayed.

NOTES: Only one Co-insurance can be selected (checked) for an insurance case.

Use this co-insurance?
Co-ins. %
20.00



Settings – Practice Info

Options for Estimating Patient Member Responsibility

Estimate Deductible

Estimate Deductibles?
Yes ▼

YES

- The patient's selected Deductible will be used to calculate member responsibility.
- The patient's selected Deductible will be displayed when you check in a patient in the "Member Responsibility" box. It will display either "Deductible Met" or "Deductible Not-Met".

NO

- Deductible will not be used to calculate member responsibility no matter what. Even if you enter a deductible reset date and check the "Use this deductible" for a patient.
- The patient's selected Deductible will be displayed when you check in a patient in the "Member Responsibility" box but will not be used to calculate patient member responsibility.
- If no Deductible box is checked in the patient's insurance plan no Deductible information will be displayed.

NOTES: Only one Deductible can be selected (checked) for an insurance case.

Use this deductible?
Deductible Reset Date
Jan 1 ▼ X



Settings – Practice Info

Payment Colors

Make your payment colors color coordinated. These will reflect in the Ledger.

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Ledger Payment Colors ?

Payment Colors

All Payments	<input type="checkbox"/>
Under And Over Applied Payments	<input type="checkbox"/>
Under Applied Payments	<input type="checkbox"/>
Over Applied Payments	<input type="checkbox"/>
Fully Applied Payments	<input type="checkbox"/>
Care Plan Payments	<input type="checkbox"/>

Close **Save**



Settings – Practice Info

Integrated Payments

Sign up for ChiroSpring Pay directly within the ChiroSpring platform. Settings/Practice Info/Integrated Payments.

The screenshot shows the ChiroSpring Pay settings page. At the top, there are three buttons: "Order ChiroSpring Pay Terminal" (blue), "Copy PMID" (black), and "Help" (black). Below these are two dropdown menus: "Select Facility Location" (set to "Spinal Care Chiropractic") and "ChiroSpring Pay Enabled" (set to "Yes"). Underneath is the "Account Status" section, which shows "Account Status - ACTIVE" and a "Click for details" button. The main content area features the "Pay" logo and a list of benefits: Streamlined workflow, Store cards or bank ACH on file, Scheduled & recurring payments, Reverse/void directly in ChiroSpring, One click portal access, Manual entry (terminal not required), Take taps/dips/swipes with terminal, and Amazing support. Below this is a pricing section titled "WITH BEST IN INDUSTRY PRICING" showing three payment options: CARD NOT PRESENT (2.9% + 30 cents), CARD PRESENT (2.6% + 10 cents), and ACH (1% + 30 cents). Each option includes a note that "AMEX rates may be higher". At the bottom, there is a large blue button that says "View Details for ChiroSpring Pay".

Order ChiroSpring Pay Terminal Copy PMID Help

Select Facility Location Spinal Care Chiropractic

ChiroSpring Pay Enabled ? Yes

Account Status Account Status - ACTIVE Click for details

Pay

- Streamlined workflow
- Store cards or bank ACH on file
- Scheduled & recurring payments
- Reverse/void directly in ChiroSpring
- One click portal access
- Manual entry (terminal not required)
- Take taps/dips/swipes with terminal
- Amazing support

WITH BEST IN INDUSTRY PRICING

Payment Method	Rate	Additional Fee	Monthly Fee
CARD NOT PRESENT	2.9%	+ 30 cents	(NO MONTHLY FEE)
CARD PRESENT	2.6%	+ 10 cents	(NO MONTHLY FEE)
ACH	1%	+ 30 cents	(NO MONTHLY FEE)

*AMEX rates may be higher

Click below to get started today!

View Details for ChiroSpring Pay



Settings – Practice Info

Body Orientation

Choose if you want Right/Left or Left/Right for your body orientation. This is reflected in the Complaints tab in Edit SOAP or for the body at the Patient Kiosk on the Complaints tab.

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Select how you want the body to appear in Edit SOAP as well as the Patient Kiosk.

Right Left

Left Right

Close Save



Settings – Practice Info

Online Scheduling

Enter the email to have online scheduling requests sent to. Also generate specific URLs based on Location, Service and Provider. This allows you to add specific buttons on your website for that specific calendar.

The Online Scheduling URL can be found in Settings/Users.



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- General
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- Online Scheduling
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Receive Online Appointments Notifications

When populated this e-mail address will override any individual provider email addresses for online appointment notifications.

Email Address

support@chirospring.com

Generate Specific URLs for Online Scheduling Based On Location, Service and Provider

Hide Drop Downs

Location

Spinal Care Chiropractic ▼

Service

▼

Provider

▼



Settings – Practice Info

Statements

Enable a Papaya logo in your patient statements allowing your patients the ability to pay statements online. Click the 'Get Started Today' button to get more information on this free service for both you and your patient.

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- General
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- Body Orientation
- Online Scheduling
- Statements**

Display logo on statement

Pay with your phone in seconds!

1 Snap a photo of your bill

2 Choose your payment method

Get the Papaya App

Download on the App Store

GET IT ON Google Play

www.papaya.com/pay

Papaya is a free, award winning app that allows patients the ability to pay their statement by simply taking a photo of their statement and entering their payment information.

To use Papaya with your statements click below to fill out the enrollment form. Once submitted a member of Papaya will contact you for on-boarding and this feature will then become enabled.

[Get Started Today](#)

Close Save



Settings – Users

Users is the section where you enter all the users of ChiroSpring. The list box on the left will contain all the current users. Highlighting their name and click the Edit/View button to Edit or View the user's information.

To enter a New User, click on the "New" button.

Note: You can enter as many non-providers as you'd like for free. However, if you wish to add another chiropractor or practitioner, an additional fee of \$49/month is required. Contact ChiroSpring support if you need to add an add provider.

The screenshot shows a web interface for managing users. At the top, there is a header labeled "Users". Below the header, there are two tabs: "Active Users" (which is selected) and "Inactive Users". The main content area displays a list of users, each with a name and a status. The users listed are:

Name	Status
drbrian Dr. Brian DC	Active
drchrissy Chrissy DC	Active
frontdesk Front Desk	Active
imatherapist Ima Therapist	Active
Miranda Miranda Hansen	Active



Settings - Users

When you create a new user, you will be prompted to select the User Type. You can only make this selection ONCE for the life of the user.

User Types include:

- Non-Provider – This would be your office assistant or front desk staff member. You can create an unlimited number of non-provider accounts.
- Acupuncturist - Contact ChiroSpring support to create this account
- Chiropractor – Contact ChiroSpring support to create this account
- Massage Therapist - Contact ChiroSpring support to create this account
- Physical Therapist - Contact ChiroSpring support to create this account
- Naturopath – Contact ChiroSpring support to create this account

Select User Type for New User

Is Provider?

Provider Type

- Acupuncturist
- Chiropractor
- Massage Therapist
- Physical Therapist

Active



Settings - Users

Each provider type is treated separately in ChiroSpring. Therefore, each provider can create their own condition case, treatment plan, diagnosis and charges without interfering with another provider type. This is a huge advantage ChiroSpring offers over competing software. With this system you can easily write your SOAP notes and treat your patients while having another provider type also write a SOAP note and treat the patient **WITHOUT INTERFERING WITH YOURS! :)**

Select User Type for New User

Is Provider?

Provider Type

- Acupuncturist
- Chiropractor
- Massage Therapist
- Physical Therapist

Active



Settings – Users/General

The General Tab consists of the following information:

- Prefix
- First, Last, MI
- Suffix
- DOB
- Gender
- SSN
- Email Address
- Phone 1 & Type
- Phone 2 & Type
- Notes
- Username
- Password
- Kiosk/Online Password
- Kiosk URL
- Is Admin?
- Is Active?

User Dr. Brian Albery

General	Prefix Dr.	First Brian	Last Albery	Middle	Suffix	Nickname
User Rights	DOB 12/16/1979	Age 41	Birth Sex	SSN	Email Address support@chirospring.com	
Provider Info	Address 1234 Brady St.		City Bettendorf	State Abbr. IA	Zip 52722	
Provider Info 2	Phone 1 555-987-6543	Type Mobile	Phone 2	Type Home	Fax	
Work Schedule	Notes					
Service & Billing Location	Username drbrian	Password*	Retype Password*	AppUser ID 3		
Online Scheduling	Is Admin ? Yes	Is Active Yes	*This password protects patient records from internet hackers. Therefore choose a strong password (i.e. containing a mix of lower and upper case letters, numbers, and symbols).			
Employee Wage	Kiosk/Online Scheduler Password ?					
	Kiosk URL : https://mypatientkiosk.com/?checkin_step2&ClinicCode=0123456702					
	Online Scheduling - Patient: https://chirospringonline.com/?home=0&ClinicCode=0123456702					
	Online Scheduling - Admin: https://chirospringonline.com/?admin=1&ClinicCode=0123456702					
	Save & Close		Cancel			



Settings – Users/General

The username is a required field. Therefore, it is highlighted in red.

Admins have full rights to all of the apps in ChiroSpring. If you are not an admin you may still have access to all apps. Admins need to go into non-admin’s accounts and select which apps and Dashboard Tiles they want you having access to (this is done in the User’s app).

Say “Yes” in the Is Admin box if you wish to make the user an admin.

If a user is no longer active change “Is Active” to no. You may have to contact ChiroSpring customer support to make providers non-active.

The Kiosk/Online Scheduler Password is a separate password (you can make this the same as your ChiroSpring password).

Kiosk/Online Scheduler Password ?

.....

- Kiosk URL :** https://mypatientkiosk.com/?checkin_step2&ClinicCode=0123456702
- Online Scheduling - Patient:** <https://chirospringonline.com/?home=0&ClinicCode=0123456702>
- Online Scheduling - Admin:** <https://chirospringonline.com/?admin=1&ClinicCode=0123456702>



Settings – Non Admins

By default, Non-Admins have access to ALL apps and ALL DASHBOARD TILES. Therefore, if is important that admins customize specifically which apps and Dashboard Tiles, they should have access to.

Use the User Rights section of the User’s app to customize which apps and Dashboard Tiles non-admins have access to.

In the image to the right, you can see this user can only access 8 apps in Settings.

apps in the “apps I Can Access” list box can be accessed by this user. apps in the “apps I Cannot Access” list box cannot be accessed.

User Dr. Brian Albery

General | Reports | SOAP Note | Dashboard | Front Desk | Settings | Launcher

Apps I Cannot Access

Apps I Can Access

- Practice Info
- Users
- Products
- Services
- Diagnoses
- Pin Charge Codes
- Pin Diagnosis
- Visit Types
- Block-out Calendar Types

Buttons: Add All, Add, Remove, Remove All

Buttons: Save & Close, Cancel



Settings – Users/User Rights

The User Rights tab allows you to fine tune what privileges a user has. There are four main sections to User Rights.

- Reports – customize which reports you want shown in the Reports app.
- SOAP Note – customize which sections of the SOAP Note a user can access.
- Dashboard – customize which Dashboard Tiles a user can access
- Front Desk – customize which front desk apps a user can access
- Settings – customize which settings apps a user can access
- Launcher – customize which launcher apps a user can access

User Dr. Brian Albery

General | Reports | **SOAP Note** | Dashboard | Front Desk | Settings | Launcher

SOAP Tabs I Cannot Access

- Immunizations
- Labs
- Vitals (Used in MIPS)**
- Pt. Education
- Risks, Assessments & Interventions

SOAP Tabs I Can Access

- Condition**
- MIST
- Complaint
- Subjective Free Text
- Adjustments
- Acupuncture
- Evaluation
- Product Orders
- Treatment
- Vitals
- Objective Free Text
- Diagnosis
- Assessment Free Text
- Charges
- Plan Free Text
- Wrap Up



Settings – Users/Provider Info

The Provider Info tab contains all the information pertinent to a provider. The provider type (that you selected initially) will appear here. In this case we have selected a chiropractor.

Here you can enter your PIN which is necessary for signing a SOAP. Other information found here includes:

- NPI # (24j)
- Taxonomy Code (24i)(32b)(24j)(33b)
- License # (24i)(32b)(24j)(33b)
- Medicare ID # (24i)(32b)(24j)(33b)
- Physician ID # (24i)(32b)(24j)(33b)
- Physician Group # (24i)(32b)(24j)(33b)
- Can sign other provider’s SOAPS?
- Copy Last SOAP Free Text to new SOAP?
- Can Schedule Patient’s to Me?
- My Treatments Default as a Chiro Visit
- My Treatments Default as a Therapy Visit
- Default appointment Length
- Max appointments Per Timeslot
- Calendar Color
- Direct Address (this is used to send CCDAs to other providers. Contact support@ChiroSpring if you need a direct address. There is a yearly charge for this.

User Dr. Brian Albery

General	Provider Type <input type="button" value="Change"/> : Chiropractor	Signature PIN ? <input type="text" value="••••"/>	Retype PIN <input type="text" value="••••"/>	Default Visit Type ? <input type="checkbox"/> Adjustment
User Rights	Entity Type ? Individual	NPI # 5635059372 24j	Taxonomy Code TAXONOMY 24i 32b 19 24j 33b	
Provider Info	Qual License # 24i 32b 24j 33b	Qual Medicare ID # 74747474 24i 32b 24j 33b	Qual Physician ID # 24i 32b 24j 33b	Qual Physician Group # 24i 32b 24j 33b
Provider Info 2	Can I Sign other Provider’s SOAP Notes Yes	Copy Last SOAP Free Text to new SOAP ? Yes	My Treatments Default as a ‘Chiro Visit’ ? Yes	My Treatments Default as a ‘Therapy Visit’ ? No
Work Schedule	Show Me On Calendar ? Yes	SOAP Note Text Size ? Normal	<input type="button" value="Upload SOAP Note Signature"/>	
Service & Billing Location	Max Appointments Per Timeslot ? 4	Alert on Sign SOAP if No Charges ? No	Upload a JPEG or PNG Image of your Signature with a white background. The FULL IMAGE must be no larger than 480 pixels wide and 60 pixels tall.	
Online Scheduling	SOAP Note Provider Signature ?	Direct Address <input type="text"/>	<input type="button" value="Register this User with ConnectEHR"/>	
Employee Wage	<input type="button" value="Change My Color"/>	<input type="button" value="Save & Close"/> <input type="button" value="Cancel"/>		



Settings – Users/Provider Info



User Dr. Brian Albery

General

User Rights

Provider Info

Provider Info 2

Work Schedule

Service & Billing Location

Online Scheduling

Employee Wage

Provider Type Change

Chiropractor

Signature PIN ?

••••

Retype PIN

••••

Default Visit Type ?

Adjustment

Entity Type ?

Individual

NPI #

5635059372

Taxonomy Code 24i 32b 19

TAXONOMY 24j 33b

Qual **License #** 24i 32b

24j 33b

Qual **Medicare ID #** 24i 32b

24j 33b 747474747

Qual **Physician ID #** 24i 32b

24j 33b

Qual **Physician Group #** 24i 32b

24j 33b

Can I Sign other Provider's SOAP Notes

Yes

Copy Last SOAP Free Text to new SOAP ?

Yes

Show Me On Calendar ?

Yes

My Treatments Default as a 'Chiro Visit' ?

Yes

Max Appointments Per Timeslot ?

4

My Treatments Default as a 'Therapy Visit' ?

No

Alert on Sign SOAP if No Charges ?

No

SOAP Note Text Size ?

Normal

SOAP Note Provider Signature ?

X

Upload SOAP Note Signature

Upload a JPEG or PNG Image of your Signature with a white background. The FULL IMAGE must be no larger than 480 pixels wide and 60 pixels tall.

Change My Color

Used in sending and receiving clinical documents between providers. Contact ChiroSpring Support if you would like to purchase a direct address.

Register this User with ConnectEHR

Save & Close

Cancel



Settings – Users/Provider Info

And finally, you can upload your signature. This will be displayed at the bottom of a Signed SOAP Note.

When you upload your signature, it must be in PNG or JPEG format and have a white background. On PC we suggest using MS Paint to create. On Mac we suggest using a free program called Paint 2 to create.

The white background of your signature must be 480 pixels wide and 60 pixels tall.

Signature Picture

Upload SOAP Note Signature

Upload a JPEG or PNG Image of your Signature with a white background. The FULL IMAGE must be no larger than 480 pixels wide and 60 pixels tall.

To the right you can see how the signature will appear on a signed SOAP Note. If the SOAP is not yet signed the signature nor the “Signed by” text will appear.

Signed by: Dr. Brian Albery D.C.

Spinal Care Chiropractic

If you have issues uploading your signature sent it to support@ChiroSpring.com and we can do this for you.



Settings – Users/Provider Info 2

- **Adjustments** – Auto SALT – This will allow you to have either the extremities, spinal adjustments or both automatically copy from the previous SOAP into today’s SOAP.
- **Auto SALT Charges in Edit SOAP** – This will allow you to have charges automatically copy from the previous SOAP into today’s SOAP.
- **My Default Calendar View** – This option will allow you to select which view (day or week) you want shown when you access the Calendar app.
- **Show Me in Online Scheduler** – When marked ‘Yes’ you will be available for Online Scheduling. However, make sure you also setup your Work Schedule and pin the Visit Types you will accept for appointments (e.g. New Patient, Adjustment, Massage, etc.).
- **Show Me in Online Scheduler** – Determine if other users can edit your SOAP note for all sections, charges only, charges & diagnosis or no sections.

User Dr. Brian Albery

<ul style="list-style-type: none"> General User Rights Provider Info Provider Info 2 	Adjustments - Auto SALT ? Yes - Both Spine and Extremities ▼	Auto SALT Charges in Edit SOAP ? Yes ▼	Computer Input Type ? Mouse and Keyboard ▼
	My Default Calendar View ? Day - My Column ▼	Show Me In Online Scheduler ? Yes ▼	Primary Access ? Cloud CHIROSPPRING ▼
	Users Can Edit My SOAP notes ? All sections ▼		



Settings – Users/Work Schedule



User Dr. Brian Albery

The first Monday of my work schedule begins on ?
 Always regardless of Work Schedule

My work schedule repeats every 1 week(s).

Edit work schedule for week 1 Current week for your work schedule is 1

	Location	Day	Start / End	Break 1	Break 2
			Start / End	Start / End	Start / End
Monday	<input type="button" value="Edit Location 1"/> Spinal Care Chiropractic		7:00 AM / 9:00:PM		
	<input type="button" value="Edit Location 2"/> Not at location today				
Tuesday	<input type="button" value="Edit Location 1"/> Spinal Care Chiropractic		8:00 AM / 5:00:PM	12:00 PM / 12:30:PM	3:00 PM / 3:30:PM
	<input type="button" value="Edit Location 2"/> Durant		8:00 AM / 8:00:PM		
Wednesday	<input type="button" value="Edit Location 1"/> Spinal Care Chiropractic		11:00 AM / 8:00:PM	11:00 AM / 12:00:PM	
	<input type="button" value="Edit Location 2"/> Durant		8:00 AM / 8:00:PM	11:00 AM / 11:30:AM	
Thursday	<input type="button" value="Edit Location 1"/> Spinal Care Chiropractic		8:00 AM / 8:00:PM	11:00 AM / 12:00:PM	
	<input type="button" value="Edit Location 2"/> Durant		8:00 AM / 8:00:PM		
Friday	<input type="button" value="Edit Location 1"/> Spinal Care Chiropractic		8:00 AM / 5:00:PM	11:00 AM / 12:00:PM	
	<input type="button" value="Edit Location 2"/> Durant		8:00 AM / 9:00:PM		
Saturday	<input type="button" value="Edit Location 1"/> Spinal Care Chiropractic		10:00 AM / 2:00:PM		
	<input type="button" value="Edit Location 2"/> Not at location today				
Sunday	<input type="button" value="Edit Location 1"/> Spinal Care Chiropractic		1:00 PM / 4:00:PM		
	<input type="button" value="Edit Location 2"/> Not at location today				



Settings – Users/Work Schedule

Here you can set the individual hours for the user. This is important because it gives you the flexibility to “grey out” timeslots on the calendar. This is useful to let the front desk staff member know areas where you will not take patients.

NOTE: Even though non-scheduled hours will appear in GREY you can still schedule appointments during these times if you want. The grey color is just a visual indication of when you prefer not having appointments.

User Dr. Brian Albery

The first Monday of my work schedule begins on 08-04-2014 [Show On Calendar](#) ?
Always regardless of Work Schedule

My work schedule repeats every 1 week(s). [Add Week](#) [Remove Week](#)

< > Edit work schedule for week 1 Current week for your work schedule is 1

	Location	Day	Start / End	Break 1 Start / End	Break 2 Start / End
Monday	Edit Location 1 Spinal Care Chiropractic		7:00 AM / 9:00:PM		
	Edit Location 2		Not at location today		
Tuesday	Edit Location 1 Spinal Care Chiropractic		8:00 AM / 5:00:PM	12:00 PM / 12:30:PM	3:00 PM / 3:30:PM
	Edit Location 2 Durant		8:00 AM / 8:00:PM		
Wednesday	Edit Location 1 Spinal Care Chiropractic		11:00 AM / 8:00:PM	11:00 AM / 12:00:PM	
	Edit Location 2 Durant		8:00 AM / 8:00:PM	11:00 AM / 11:30:AM	
Thursday	Edit Location 1 Spinal Care Chiropractic		8:00 AM / 8:00:PM	11:00 AM / 12:00:PM	
	Edit Location 2 Durant		8:00 AM / 8:00:PM		
Friday	Edit Location 1 Spinal Care Chiropractic		8:00 AM / 5:00:PM	11:00 AM / 12:00:PM	
	Edit Location 2 Durant		8:00 AM / 9:00:PM		
Saturday	Edit Location 1 Spinal Care Chiropractic		10:00 AM / 2:00:PM		
	Edit Location 2		Not at location today		
Sunday	Edit Location 1 Spinal Care Chiropractic		1:00 PM / 4:00:PM		
	Edit Location 2		Not at location today		

[Save & Close](#) [Cancel](#)



Settings – Users/Work Schedule

The calendar supports blocking off (marking areas in a dark grey color) times per provider. This makes it easier for your scheduler so they know what times you can see patients.

You can block off times on the same day for up to two locations. This is beneficial if you work at location A in the morning and location B in the evening (or something similar to this).

	Location	Day Start / End	Break 1 Start / End	Break 2 Start / End
Monday	Edit Location 1 Main Edit Location 2 Not at location today	8:00 AM / 5:00:PM		

To block off time click “Edit Location 1”. This will open up the dialog shown to the right. Here you can enter the Day Start and Day End times as well as up to two breaks.

If you wish to block off time for a second location, click “Edit Location 2”.

In Facility Today?

Facility Location

Day Start Time <input type="text" value="10:00 AM"/>	Day End Time <input type="text" value="10:00 PM"/>
Break 1 Start Time <input type="text" value="12:00 PM"/>	Break 1 End Time <input type="text" value="1:00 PM"/>
Break 2 Start Time <input type="text"/>	Break 2 End Time <input type="text"/>



Settings – Users/Work Schedule

At the top you will notice an “Add Week” button as well as left and right arrows to navigate in between weeks. The calendar supports up to 4 weeks of block off times and will then repeat.

My work schedule repeats every 1 week(s). **Add Week** **Remove Week**

< > Edit work schedule for week 1

Clicking “Add Week” will create a new week (shown to the right). If you have a schedule that repeats every two weeks, you will then of course only create two weeks.

User Dr. Brian Albery

The first Monday of my work schedule begins on 08-04-2014 **Show On Calendar** ?
 My work schedule repeats every 1 week(s). **Add Week** **Remove Week**
 Always regardless of Work Schedule

< > Edit work schedule for week 1 Current week for your work schedule is 1

	Location	Day Start / End	Break 1 Start / End	Break 2 Start / End
Monday	Edit Location 1 Spinal Care Chiropractic 7:00 AM / 9:00:PM			
	Edit Location 2 Not at location today			
Tuesday	Edit Location 1 Spinal Care Chiropractic 8:00 AM / 5:00:PM		12:00 PM / 12:30:PM	3:00 PM / 3:30:PM
	Edit Location 2 Durant 8:00 AM / 8:00:PM			
Wednesday	Edit Location 1 Spinal Care Chiropractic 11:00 AM / 8:00:PM		11:00 AM / 12:00:PM	
	Edit Location 2 Durant 8:00 AM / 8:00:PM		11:00 AM / 11:30:AM	
Thursday	Edit Location 1 Spinal Care Chiropractic 8:00 AM / 8:00:PM		11:00 AM / 12:00:PM	
	Edit Location 2 Durant 8:00 AM / 8:00:PM			
Friday	Edit Location 1 Spinal Care Chiropractic 8:00 AM / 5:00:PM		11:00 AM / 12:00:PM	
	Edit Location 2 Durant 8:00 AM / 9:00:PM			
Saturday	Edit Location 1 Spinal Care Chiropractic 10:00 AM / 2:00:PM			
	Edit Location 2 Not at location today			
Sunday	Edit Location 1 Spinal Care Chiropractic 1:00 PM / 4:00:PM			
	Edit Location 2 Not at location today			

Save & Close **Cancel**



Settings – Users/Work Schedule

This is what the calendar looks like when you block off hours. The grey areas indicate hours the provider does not want to see patients.

NOTE: Even though non-scheduled hours will appear in GREY you can still schedule appointments during these times if you want. The grey color is just a visual indication of when you prefer not having appointments.

Power Tip: You can also consider not utilizing the work schedule and instead using the Calendar Block Out Time option (with repeat option).

The screenshot shows a software interface for a medical calendar. At the top, it says 'Calendar' and 'Wednesday, October 19, 2016'. Below this is a list of 'Recent Patients' with names and IDs. To the right of the list is a vertical time axis with 15-minute increments from 5 AM to 10 AM. The main area is a grid where the top two hours (5 AM to 7 AM) are shaded grey, representing blocked-off time. The bottom three hours (7 AM to 10 AM) are white. At the bottom of the interface are several buttons: 'Close', 'Dock', 'New', 'Edit', 'Reschedule', 'Cancel', 'Delete', 'Today', and 'Jump To'.



Settings – Users/Service & Billing Location

The Service and Billing Location information allows you to select the following information:

- Federal Tax ID Content (25)
 - Select from Provider EIN, Facility EIN or Provider SSN
- Provider’s EIN (25)
- Social Security # (25)
- Override Facility NPI (32a)
- Override Billing NPI (33a)
- Service Facility Location (32)
 - Note the check box must be selected to use this information
- Billing Provider Location (33)
 - Note the checkbox must be selected to use this information

The screenshot shows a user settings form for "User Dr. Brian Albery". On the left is a navigation menu with tabs: General, User Rights, Provider Info, Provider Info 2, Work Schedule, Service & Billing Location (highlighted), Online Scheduling, and Employee Wage. The main form area contains several sections:

- Federal Tax ID Content (25):** A dropdown menu currently set to "Practice EIN".
- Provider's EIN (25):** An empty text input field.
- Social Security # (25):** An empty text input field.
- Override Facility NPI (32a):** An empty text input field.
- Override Billing NPI (33a):** An empty text input field.
- My Preferred Location ?**: A dropdown menu set to "Spinal Care Chiropractic".
- Service Facility Location ? (32):** A section with a checked checkbox "Override Service Facility Location:". Below it are fields for Name (Pugs Chiropractic), Address (5012 Pug Drive), City (Bettendorf), State Abbr. (IA), Zip (52722), Phone 1 (555-555-5555), Type (Home), Phone 2, Type (Home), and Fax.
- Billing Provider Location ? (33):** A section with a checked checkbox "Override Billing Provider Location:". Below it are fields for Name (Pugs Chiropractic), Address (5012 Pug Drive), City (Bettendorf), State Abbr. (IA), Zip (52722), Phone 1 (555-555-5555), Type (Home), Phone 2, Type (Home), and Fax.

At the bottom of the form are "Save & Close" and "Cancel" buttons.

You will notice a checkbox that says, "Override Service Facility Location." This will allow a provider to practice and NOT be forced to have the facilities information appear on their HCFA forms. This is ideal for provider’s that are practicing at a location different than the main practice’s facility location.



Settings – Users/Service & Billing Location

The Online Scheduling section allows you to Pin the Visit Types you are willing to allow patients to select when scheduling an appointment. You will see I have “Adjustment” and “New Patient Visit” as pinned.

Prior to pinning you MUST mark the Visit Type as HIDDEN or NOT HIDDEN in Settings/Visit Types.



Settings



Visit Types

User Dr. Brian Albery

- General
- User Rights
- Provider Info
- Provider Info 2
- Work Schedule
- Service & Billing Location
- Online Scheduling
- Employee Wage

Receive Online Appointments Notifications

In order to receive email notifications for appointments ensure you have provided an email address in either location.

- Practice Info app/Online Scheduling
- User's app in your profile

Unpinned Visit Types	Pinned Visit Types
Acupuncture Session Hidden	Adjustment
Adjustment and xray Hidden	Cervical Decompression
Auto Accident Hidden	
Cervical Traction Hidden	
Consult - 45 Min Hidden	
Intersegmental Traction Hidden	
Lumbar Decompression Hidden	
Lumbar Traction Hidden	
Massage Not Hidden	
Massage Therapy/Dr. Hatrak Hidden	
New Patient - 30 mins 6 columns Not Hidden	
New Patient Visit Not Hidden	
Nutritional Consultation Hidden	
Physical Hidden	
Physiotherapy Hidden	



Settings – Users/Service & Billing Location



Employee Wage is used with the Time Clock app. When wage is known you can calculate payroll for your staff using the Time Clock report.

Only Admin users can access the Employee Wage tab. The same is true should you generate the Time Clock report. Only Admin users will be able to see the calculated pay based on that wage.

User Dr. Brian Albery

General	Hours Per Week Allowed 40	Hourly Wage Date Started: Dec 28, 2020 Hourly Wage: 16.00
User Rights	Overtime Hourly Rate 0.00	
Provider Info		
Provider Info 2		
Work Schedule		
Service & Billing Location		
Online Scheduling		
Employee Wage		

Buttons: Add, Edit, Remove, Save & Close, Cancel



Settings – Products

The products section is where you go to add products such as Biofreeze for example. The following fields are available:

- Product Name
- Description
- Manufacturer
- UPC #
- NDC #
- SKU #
- Price
- Is Taxed (Yes/No)
- Tax Rate (leave blank to use the default tax rate entered in facility info)
- Bill to Insurance (Yes/No)
- Code/Modifier (24d)
- POS (place of service) (24b)
- Emergency (24c)
- EPSDT (24h)
- Product Order Instructions

Products Name - ASC

2 N 1 Back Support	\$34.00
UPC:	0.000%
SKU: 1333	Qty: 30
2-Builder 30C	\$23.00
UPC:	0.000%
SKU: SF2	Qty: 0
30 Days Past Due	\$10.00
UPC:	0.000%
SKU:	Qty: 24
3-Bactrex - 30C	\$28.00
UPC:	0.000%
SKU: SF3	Qty: 0
3PK Garcinia, Ketones, Forskolin	\$69.99
UPC:	0.000%
SKU: 3PK	Qty: -1
4-FungDX	\$28.00
UPC:	0.000%
SKU: SF4	Qty: 0
5-Stablizer - 30C	\$25.00
UPC:	0.000%
SKU: SF5	Qty: 0
6-Restore - 30C	\$23.00
UPC:	0.000%
SKU: SF6	Qty: 0
A-C Carbamide - 270C	\$53.00
UPC:	0.000%
SKU: 1098	Qty: -21
A-C Carbamide - 90C	\$25.00

Details SOAP Free Text

Product Name: 2 N 1 Back Support

Description: [Empty]

Manufacturer: [Empty]

UPC #: [Empty]

NDC #: [Empty]

SKU #: 1333

Price: 34.00

Cost: 21.00

Is Taxed: Yes

Tax Rate: 0.000

Bill To Insurance: No

Code (CPT®): [Empty]

Modifier: 24d

POS: ? 24b

EMG: ? 24c

EPSDT: ? 24h

Copy Next Visit: Yes

Inventory

Qty On Hand: 30

Reorder at Qty: 0

Reorder to Qty: 0

Reorder by Qty: 0

Qty On Order: 0

Product Order Instructions: [Empty]

Buttons: Close, Dock, Import/Export Products, Add New, Delete, Cancel, Save

NOTE: Specifying POS, Emergency or EPSDT will override Visit Values. Set tax rate to zero to use Practice Tax Rate.

NOTE: For changes to take effect you must completely exit ChiroSpring and reopen.

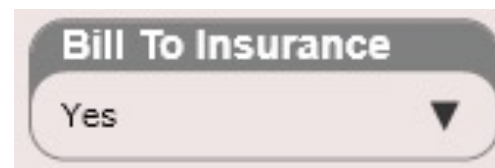


Settings - Products

Bill to Insurance

There is a dropdown box that says, "Bill to Insurance". Here you can determine if the product is billable or not billable to insurance by default. This may be useful when creating a charge such as an Orthotic that you want to default as Yes to bill insurance.

Note: This box defaults to "No" when creating a new product as most products do not get billed to insurance.





Settings – Products

You also can set text on a per product basis. For example, I have entered “Plan” and “Discharge” text in the image below for the product Catalyn. This is because I want the Plan section of my SOAP Note to read “Take 1 Catalyn tablet three times daily with food”

AUTOMATICALLY every time I add the product to the patient’s charges list. The discharge instructions will also populate with this same text which is great because the patient will now know how to take their Catalyn as the discharge instructions are printed on the receipt.

Note... you will not see any of this text while you are Editing a SOAP note. It only appears in the “paper” SOAP note or on the receipt.

The screenshot shows a software interface with a 'Products' list on the left and a 'Details' editor on the right. The 'Products' list includes:

Product Name	Price	UPC	SKU	Qty
Catalyn - 360T	\$40.00	0.000%	1135	-3
Catalyn - 90T	\$12.00	0.000%	1134	7
Catalyn Chewable - 90T	\$15.00	0.000%	1136	0
Catalyn GF - 360T	\$42.00	0.000%		0

The 'Details' editor for 'Catalyn' shows the following sections:

- Subjective:** (Empty text area)
- Objective:** (Empty text area)
- Assessment:** (Empty text area)
- Plan:** (Empty text area)
- Discharge:** (Text: "Take 3 capsules daily with food.")

At the bottom of the editor are buttons for: Patient Name, Him/Her, him/her, Mr./Mrs. Lastname, He/She, he/she, His/Her, his/her, Himself/Herself, himself/herself, Visit Date, Import/Export Products, Add New, Delete, Cancel, and Save.



Track Inventory

Qty On Hand	Reorder at Qty	Reorder to Qty	Reorder by Qty	Qty. On Order	Add to Inventory
0	5	20	15	4	

You can edit inventory values in the Products app. Then use the “Product Inventory” and “Product Shortage” reports to keep up to date on which products need re-ordering.

Product Inventory Report

Created 12/28/2020 10:59 PM

Name	SKU/UPC	NDC/HICF Code	Manufacturer	Qty on Hand	Reorder at Qty	Reorder by Qty	Reorder to Qty	Qty. on Order	Cost per Item	Cost on Hand + on Order	Need to Order
2 N 1 Back Support	1333			30	0	0	0	0	21.0000	630.0000	-30
30 Days Past Due				24	0	0	0	0			-24
3PK Garcinia, Ketones, Forskolin	3PK		MaritzMayer Labs - Private Label Neutraceuticals	-1	0	0	0	0	20.6300	-20.6300	1
A-C Carbamide - 270C	1098		Standard Process	-21	0	0	0	0	33.0000	-693.0000	21
A-C Carbamide - 90C	1097		Standard Process	-53	0	0	0	0			53
Adrenal (Dessicated) - 90T	1099		Standard Process	-8	10	2	20	0			28
A-F Betafood - 360T	1101		Standard Process	-99	5	5	20	0	29.0000	-2871.0000	119
Air Lite Ankle Brace	1353			-1	0	0	0	0			1
Albaplex - 150C	1103		Standard Process	-35	0	0	0	0			35
Albaplex - 40C	1102		Standard Process	-127	0	0	0	0			127
Albizia Complex - 40T	M1100		Mediherb	-4	0	0	0	0	14.7500	-59.0000	4



Track Profit on Products

You can keep track of profits on products by using the “Cost” field in the Products app. Then use the Sold Products Detail or Sold Products Summary Report to see profits for your products.

Spinal Care Chiropractic
234 Western
Davenport, IA 123456789
563-545-4565

Sold Products Detail Report

3/18/2016 through 3/18/2016

All Locations

DATE	DESCRIPTION	UNITS	COST	TAX	AMOUNT	PROFIT
03/18/16 12:08 PM	1338 10 Inch Universal Criss-Cross Support	1	18.50	1.89	28.89	8.50
03/18/16 12:08 PM	1333 2 N 1 Back Support	1	21.00	2.38	36.38	13.00
03/18/16 12:08 PM	1098 A-C Carbamide - 270C	1	33.00	3.36	51.36	15.00
03/18/16 12:08 PM	1101 A-F Betafood - 360T	1	29.00	3.08	47.08	15.00

Totals

TRANSACTIONS	CHARGES	UNITS	COST	TAX	AMOUNT	PROFIT
1	4	4	4	101.50	163.71	51.50

Profit is an estimation and is based on the cost entered for the product at the time this report was generated



Settings – Services

Use the Services app to add CPT coded items such as adjustments or x-rays.

ChiroSpring comes loaded with common chiropractic CPT codes.

Click the “Add New” button to create a new service.

The following information is available to enter for a service:

- Code/Modifier (24d)
- Is Lab Service (Yes/No)
- There are also multiple PRICE options. These are Fee Schedules that can be set to patients in Dashboard/Profile.

Perhaps you have patients that you want to give a discount for every service. Fee schedules can be used for this. You can change the name of fee schedules in Settings/Practice Info/General 2.

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Codes	Details									
Code - DESC ▼	Details SOAP Free Text									
98941	Code (CPT@)	Modifier 1	Modifier 2	Modifier 3	Modifier 4	24d	Is Lab Service			
98941-AT Manipulation 3-4 Regions (MCARE) Amt: \$40.00 Tax: 0.00%	98941						No			
98941 Cash Manipulation 3-4 Regions Amt: \$45.00 Tax: 0.00%	Description	POS ?	24b	EMG ?	24c	EPSDT ?	24h			
98941 Manipulation 3-4 Regions Amt: \$40.00 Tax: 0.00%	Manipulation 3-4 Regions									
	Price (Cash)	Price (Military)	Price (Hardship)	Price (Student)	Price (BC)					
	40.00	30.00	20.00	25.00	60.00					
	Price (Medicare)	Price (Massage Pa)	Price (Acupuncture)	Price (30 Day Chiro)	Price (60 Day Chiro)					
	0.00	0.00	0.00	0.00	0.00					
	Is Taxed	Tax Rate	?	Bill To Insurance	Copy Next Visit	?				
	No	0.000		Yes	Yes					
	CPT Shaded Region Description									
	Shaded Region CPT									

Close Import/Export Services Add New Delete Cancel Save

NOTE: For changes to take effect you must completely exit ChiroSpring and reopen.



Settings – Services

You also can set text on a per service basis. For example, I have entered “Objective” text for a 3-4 region adjustment. The text says “Palpated patient and found subluxations on the noted regions. All subluxations were adjusted.”

This is an extremely powerful feature because it will help aid you in the process of writing compliant SOAP notes quickly.

Note... you will not see any of this text while you are Editing a SOAP note. It only appears in the “paper” SOAP note or on the receipt (in the case of discharge).

Services

CPT copyright 2020 American Medical Association. All rights reserved.

Codes	Code - DESC
98941	
98941-AT	Manipulation 3-4 Regions (MCARE) Amt: \$40.00 Tax: 0.00%
98941 Cash	Manipulation 3-4 Regions Amt: \$45.00 Tax: 0.00%
98941	Manipulation 3-4 Regions Amt: \$40.00 Tax: 0.00%

Close

Details

SOAP Free Text

SOAP Free Text ?

Subjective:
Patient presents with multiple subluxations of the spine located in multiple regions (3+).

Objective:

Assessment:

Plan:
Adjustments were made on patient's spine in 3+ regions.

Discharge:

Patient Name Him/Her him/her Mr./Mrs. Lastname He/She he/she

His/Her his/her Himself/Herself himself/herself Visit Date

Import/Export Services Add New Delete Cancel Save



Settings – Services

- Price Estimated (Yes/No)
- Is Taxed (Yes/No)
- Tax Rate
 - Leave blank to use the default facility tax rate
- POS (Place of Service) (24b)
- Emergency (24c)
- EPSDT (24h)

NOTE: Specifying POS, Emergency or EPSDT will override Visit Values. Set tax rate to zero to use Practice Tax Rate.

Services CPT copyright 2020 American Medical Association. All rights reserved.

Codes	Code - DESC
98941	
98941-AT	Manipulation 3-4 Regions (MCARE) Amt: \$40.00 Tax: 0.00%
98941 Cash	Manipulation 3-4 Regions Amt: \$45.00 Tax: 0.00%
98941	Manipulation 3-4 Regions Amt: \$40.00 Tax: 0.00%

Details

SOAP Free Text

SOAP Free Text ?

Subjective:
Patient presents with multiple subluxations of the spine located in multiple regions (3+).

Objective:

Assessment:

Plan:
Adjustments were made on patient's spine in 3+ regions.

Discharge:

Patient Name Him/Her him/her Mr./Mrs. Lastname He/She he/she

His/Her his/her Himself/Herself himself/herself Visit Date

Import/Export Services Add New Delete Cancel Save

NOTE: For changes to take effect you must completely exit ChiroSpring and reopen.

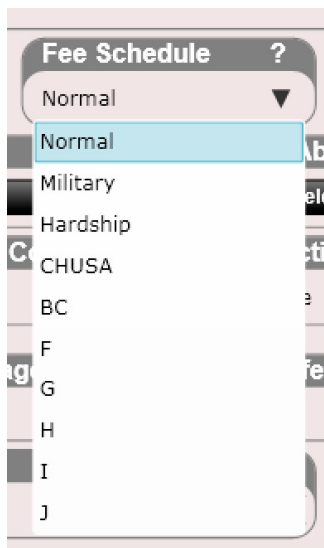


Settings - Services

Fee Schedules

Fee schedules are very useful for setting multiple prices for a service. You can set up to 10 prices for a single service. Then, to determine what fee schedule pricing you apply for a patient set the patient's default fee schedule in their patient profile.

Price (Normal) 400.00	Price (Military) 350.00	Price (Hardship) 0.00	Price (CHUSA) 0.00	Price (BC) 0.00
Price (F) 0.00	Price (G) 0.00	Price (H) 0.00	Price (I) 0.00	Price (J) 0.00



To the left is the Fee Schedule menu found in the patient profile. You can also change the patient's fee schedule at check-in on the front desk.

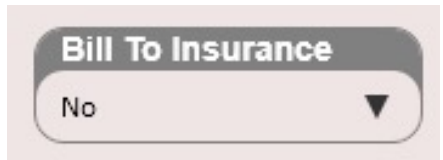
NOTE: For changes to take effect you must completely exit ChiroSpring and reopen.



Settings - Services

Bill to Insurance

There is a dropdown box that says, "Bill to Insurance". Here you can determine if the charge is billable or not billable to insurance. This can be handy when you are creating services such as Medicare X-Rays that you know are both services but are the responsibility of the patient and not the insurance.



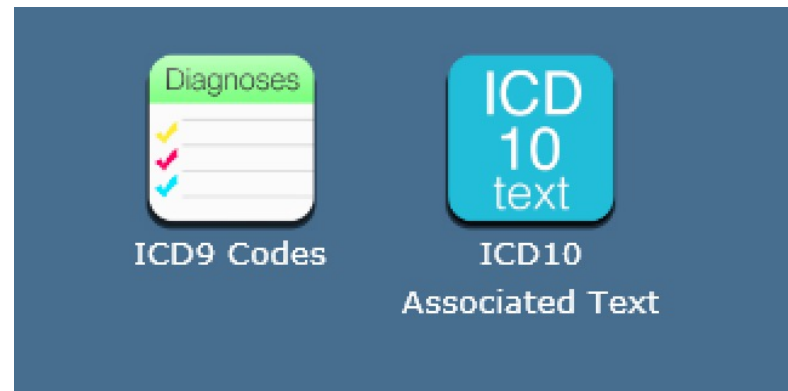
Note: This box defaults to "Yes" when creating a new service as most services get billed to insurance.



Settings – Diagnosis

The Diagnosis app will open a dialog with two apps inside:

- ICD9 Codes – Create or edit ICD9 codes.
- ICD10 Associated Text – Use this app to add text that is associated with a diagnosis code. This associated text will append to the paper SOAP in the S, O, A, P or Discharge section.



Power Tip: Use the ICD10 Associated Text app to customize your favorite groups and pinned codes for the logged in user.

NOTE: For changes to take effect you must completely exit ChiroSpring and reopen.



Settings – ICD9 Codes

Use the ICD9 Codes app to view, edit or create new diagnoses in ChiroSpring. To create a new diagnosis, click the “Add New” button and enter the following information:

- Code (IDC9 code)
- Description

ChiroSpring comes preloaded with hundreds of diagnosis codes.

This app only allows you to edit ICD-9 diagnoses (not ICD10 codes). This is because with ICD-10 we have loaded EVERY SINGLE CODE IN EXISTANCE. 😊

ICD9 Codes CPT copyright: 2013 American Medical Association. All rights reserved.

Code Sets

ICD9 (Enabled) ▼

Options

Codes

- 723.3 Cervicobrachial Syndrome (diff)
- 723.8 Other Syndromes Affecting Ce
- 723.9 Unspecified Musculoskeletal Di
- 307.81 Headache tension
- 333.83 Spasmodic torticollis
- 346.0 Classical migraine without intr
- 346.01 Classical migraine with intract
- 346.1 Common migraine without intr
- 346.11 Common migraine with intract
- 346.2 Variants of migraine without ir
- 346.21 Variants of migraine with intra
- 346.8 Other forms of migraine witho
- 346.81 Other forms of migraine with i

Details

Code (ICD)

723.3

Description

Cervicobrachial Syndrome (diffuse)

Close Add New Delete Cancel Save

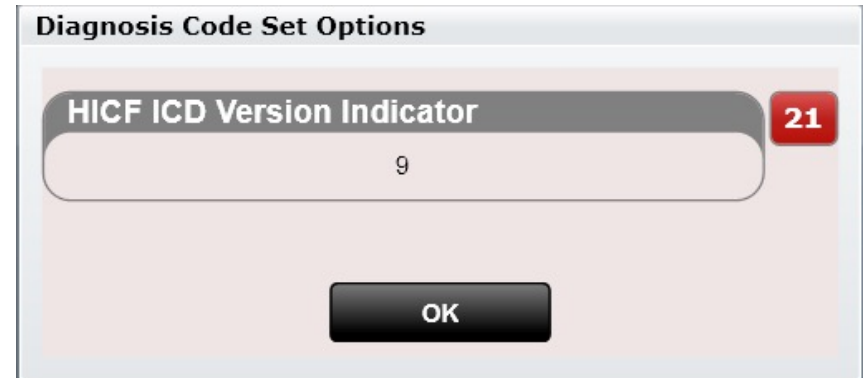
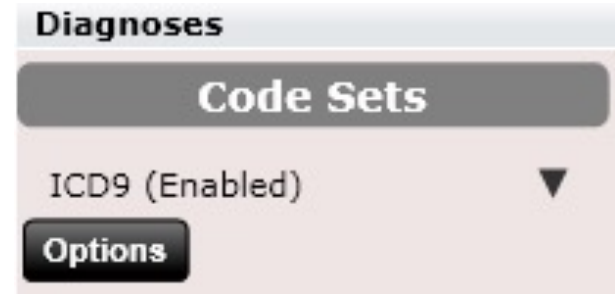
NOTE: For changes to take effect you must completely exit ChiroSpring and reopen.



Settings – ICD9 Codes

The diagnosis section also has a menu at the top called “Code Sets.” As you may be aware, every so often new ICD code sets are released. We have both ICD-9 and ICD-10 loaded into ChiroSpring. However, as mentioned previously, you are only able to add or edit ICD-9 codes. This is because we do not have every single ICD-9 code loaded into the system. With ICD-10 we have loaded every single code into ChiroSpring.

Clicking the “Options” button allows you to enter the ICD Version Indicator. This will be 9 for ICD-9 and 0 for ICD-10.



NOTE: For changes to take effect you must completely exit ChiroSpring and reopen.



Settings – ICD10 Associated Text



The Select ICD10 Codes tab will allow you to search and select one ore more codes. These codes are then added to the Diagnosis list box. Next you will click the “Add Text to Codes” tab to add text to these codes that will be appended to the printed SOAP note. Also, on the Select ICD10 Codes tab you can customize your ICD10 favorites by creating groups and pinning codes.

ICD10 associated text CPT copyright 2013 American Medical Association. All rights reserved.

Diagnosis | **Select ICD10 Codes** | **Add text to codes**

A02
Other salmonella infections

A42
Actinomycosis

Z16
Resistance to antimicrobial drugs

A00
Cholera

M54.2
Cervicalgia

Home ▶

All Chapters

Common Chapters

Edit Groups

Chapter 1
Certain infectious and parasitic diseases (A00-B99)

Chapter 2
Neoplasms (C00-D49)

Chapter 3
Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism (D50-D89)

Chapter 4
Endocrine, nutritional and metabolic diseases (E00-E89)

Chapter 5
Mental, Behavioral and Neurodevelopmental disorders (F01-F99)

Chapter 6
Diseases of the nervous system (G00-G99)

Chapter 7
Diseases of the eye and adnexa (H00-H59)

Chapter 8
Diseases of the ear and mastoid process (H60-H95)

Chapter 9
Diseases of the circulatory system (I00-I99)

Chapter 10
Diseases of the respiratory system (J00-J99)

Chapter 11
Diseases of the digestive system (K00-K95)

Chapter 12

Close | Dock | Cancel | Save



Settings – ICD10 Associated Text



The “Add Text to Codes” section will allow you to add text for the selected code. This associated text will append to the paper SOAP in the S, O, A, P or Discharge section.

ICD10 associated text CPT copyright 2013 American Medical Association. All rights reserved.

Diagnosis

- A02
Other salmonella infections
- A42
Actinomycosis
- Z16
Resistance to antimicrobial drugs
- A00
Cholera
- M54.2
Cervicalgia**

Select ICD10 Codes | **Add text to codes**

SOAP Free Text (this text will be appended to the printed SOAP note)

Subjective:
Subjective text associated with cervicalgia.

Objective:
Objective text associated with cervicalgia.

Assessment:
Assessment text associated with cervicalgia.

Plan:
Plan text associated with cervicalgia.

Discharge:
Discharge text associated with cervicalgia.

Close | Dock | Cancel | Save



Settings – Pin Charge Codes

Pin Charge Codes

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- Groups**
- Exam/Consult
 - Adjustment
 - Therapy
 - Radiography
 - Analgesics
 - Electrotherapy
 - Exercise/Rehab
 - Heat/Cold Therapy
 - Supplements
 - Orthopedics
 - Pillows

Unpinned Products/Services

- Services** | **Products**
- 98940**
Manipulation 1-2 Regions
 - 98941**
Manipulation 3-4 Regions
 - 98942**
Manipulation 5 Regions
 - 98943-51**
Manipulation Extra-Spinal
 - 97010**
Therapy-Hot/Cold Therapy
 - 97012**
Therapy-Traction/Mechanical
 - 97014**
Therapy-Muscle Stimulation
 - 97032**
Therapy-Electrical Stimulation
 - 97035**
Therapy-Ultrasound
 - 97110**
Therapy-Therapeutic Exercise
 - 97112**

Pinned Products/Services

- 20000-M11-M21-M31-M41**
New Patient Cash Visit
- 99201-25**
New Patient Problem Focused Examination
- 99202-25**
New Patient Expanded Problem Focused Exa
- 99203-25**
New Patient Detailed Examination
- 99204-25-BC-EF-GH**
New Patient Comprehensive Examination
- 99205-25**
New Patient Comprehensive (High Complexit
- 99211-25**
Established Patient Minimal Examination
- 99212-25**
Established Patient Problem Focused Exam
- 99213-25**
Established Patient Expanded Exam
- 99214-25**
Established Patient Detailed Exa

- Pin All →
- Pin →
- ← Unpin
- ← Unpin All

↑ ↓

Add Rename Delete

Close Dock Save

↑ ↓ ✕ ✕ ALL

Set Ascending Order Copy From User...



Settings – Pin Charge Codes

The Pin Charge Codes app will allow you to customize GROUPS (the folders on the left pictured to the right such as 'Adjustment') as well as which products or services are in these groups. For example, I have selected the Exam/Consult group and now see several charges on the grid to the right.

You can customize WHICH charges and their ORDER all inside the Pin Charge Codes app in Settings.

It is also great that this customization can be SPECIFIC to each USER. We know different providers may use different charges, so this is entirely possible. If you want to copy a user's grid, simply use the "Copy From User" button to make your charges grid the same as theirs.

SOAP Note Charges Grid

Exam/Consult	20000 New Patient Cash Visit	99201-25 New Patient Problem Focused Examination	99202-25 New Patient Expanded Problem Focused Examination	99203-25 New Patient Detailed Examination
Adjustment	99204-25 New Patient Comprehensive Examination	99205-25 New Patient Comprehensive (High Complexity) Exam	99211-25 Established Patient Minimal Examination	99212-25 Established Patient Problem Focused Exam
Therapy	99213-25 Established Patient Expanded Exam	99214-25 Established Patient Detailed Exam	99215-25 Established Patient Comprehensive Exam	99371 Phone Call-Brief
Radiography	99372 Phone Call-Intermediate	99373 Phone Call-Lengthy	97750 Physical Performance test with Report	1 No Charge Office Visit
Medicare Codes				
Analgesics				
Electrotherapy				
Exercise/Rehab				
Heat/Cold Therapy				
Supplements				
Orthopedics				
Pillows				



Settings – Pin Charge Codes

It is important to note that there are TWO charge grids in ChiroSpring.

1. In Edit SOAP you will see a charges tab. This tab contains products and services.
2. At the Cash Register you will see a charges grid. Here only PRODUCTS are accessible.

Customizing your grid has no BEARING on this at all. The software simply filters to show PRODUCTS at the Cash Register and a mix of PRODUCTS and SERVICES in Edit SOAP.

Cash Register Charges Grid

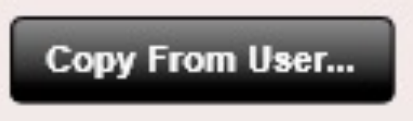
Analgesics	1000 Biofreeze Cryospray - 4 Oz	1001 Sombra Pain Relieving Warming Gel - 4 Oz Jar	1002 Sombra Pain Relieving Warming Gel - 3 Oz Roll-On	1003 Sombra Pain Relieving Warming Gel - 8 Oz Jar	1004 Sombra Pain Relieving Warming Gel - 4 Oz Tube
Electrotherapy	1005 Biofreeze Gel Tube with Touch Free Applicator - 4 Oz	1006 Biofreeze Tube - 4 Oz	1007 Biofreeze Roll-On - 3 Oz	1008 Cryoderm Roll-On - 3 Oz	1009 Cryoderm Spray - 4 Oz
Exercise/Rehab	1010 Cryoderm Gel - 4 Oz	1011 Sombra Cool Therapy Gel - 2 Oz Jar	1012 Sombra Cool Therapy Gel - 8 Oz Jar	1013 Sombra Cool Therapy Roll-On - 3 Oz	1014 Sombra Cool Therapy - 4 Oz Jar
Heat/Cold Therapy	1015 Sombra Cool Therapy - 4 Oz Tube	1016 Prossage Heat - 3 Oz	1017 Prossage Heat - 8 Oz	1018 Speed Gel - 50 mL	1019 Cryoderm Heat Pain Relieving Roll-On - 3 Oz
Supplements					
Orthopedics					
Pillows					



Settings – Pin Charge Codes

You may notice a button in the lower portion of the screen called “Copy From user...”. Use this button to make your GRID the same as another user’s.

Selecting “ChiroSpring BuiltIn” will reset the grid to the default settings.



Note: If you make a change to a user’s grid users that COPIED YOUR GRID will need to re-copy your grid in order to experience your changes. The copy is a one and done type of thing.



NOTE: For changes to take effect you must completely exit ChiroSpring and reopen.



Settings – Pin ICD9 Diagnosis Codes

ICD9 is no longer used however we have kept it in the software for legacy purposes. Pinning and Unpinning ICD-9 diagnosis codes works the same as pinning and un-pinning charges. This section was already covered so read that section for more details. The only difference is you are modifying the Diagnosis Grid when you create groups and pin or un-pin diagnoses to these groups.

NOTE: To pin ICD10 codes you must be inside the Edit SOAP. On the Diagnosis tab you will see an “Edit Groups” button which will allow you to create ICD10 groups. Use the PIN button on each ICD10 code to PIN the code to any of your groups.

Services

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Codes	Details					
	Code (CPT®)	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Is Lab Service
500 New Patient Cash Visit Amt: \$50.00 Tax: 0.00%	500				24d	No
99201-25 New Patient Problem Focused I Amt: \$45.00 Tax: 0.00%						
99202-25 New Patient Expanded Problem Amt: \$55.00 Tax: 0.00%						
99203-25 New Patient Detailed Examinat Amt: \$75.00 Tax: 0.00%						
99204-25 New Patient Comprehensive Ex Amt: \$110.00 Tax: 0.00%						
99205-25 New Patient Comprehensive (t Amt: \$150.00 Tax: 0.00%						
99211-25 Established Patient Minimal Ex Amt: \$25.00 Tax: 0.00%						
99212-25 Established Patient Problem Fc Amt: \$40.00 Tax: 0.00%						
99213-25 Established Patient Expanded I Amt: \$60.00 Tax: 0.00%						
99214-25 Established Patient Detailed Ex Amt: \$75.00 Tax: 0.00%						
99215-25 Established Patient Comprehe Amt: \$90.00 Tax: 0.00%						

Details					
Code (CPT®)	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Is Lab Service
500				24d	No
Description New Patient Cash Visit					
Price (Sched A)	Price (Sched B)	Price (Sched C)	Price (Sched D)	Price (Sched E)	
50.00	0.00	0.00	0.00	0.00	
Price Estimated	Is Taxed	Tax Rate*	Bill To Insurance		
No	No	0.000	No		
POS** 24b	EMG** 24c	EPSDT** 24h			
* Set Tax Rate to zero to use Practice Tax Rate. ** Specifying POS(24b), Emergency(24c) or EPSDT (24h) will override Visit values, otherwise leave blank.					
SOAP Free Text (this text will be appended to the printed SOAP note)					
Subjective:					
Objective:					
Assessment:					
Plan:					
Discharge:					
<div style="display: flex; justify-content: space-between;"> Add New Delete Cancel Save </div>					

NOTE: For changes to take effect you must completely exit ChiroSpring and reopen.



Settings – Pin ICD9 Diagnosis Codes



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Pin ICD9

Groups

Unpinned Products/Services

Pinned Products/Services

Diagnosis

- Favorites**
- Cervical/Cranial
- Extremities
- General
- Lumbar
- Pelvic/Sacral
- Thoracic/Ribs

- 723.3**
Cervicobrachial Syndrome (diffuse)
- 723.8**
Other Syndromes Affecting Cervical Region
- 723.9**
Unspecified Musculoskeletal Disorder/Symptoms f
- 307.81**
Headache tension
- 333.83**
Spasmodic torticollis
- 346.0**
Classical migraine without intractable migraine
- 346.01**
Classical migraine with intractable migraine
- 346.1**
Common migraine without intractable migraine
- 346.11**
Common migraine with intractable migraine
- 346.2**
Variants of migraine without intractable migraine
- 346.21**

- 723.1**
Cervicalgia

- Pin All →
- Pin →
- ← Unpin
- ← Unpin All




Add Rename Delete

Close Dock

Save






Set Ascending Order Copy From User...



Settings – Pin ICD9 Diagnosis Codes

Pinning ICD-9 diagnoses will affect the ICD-9 Diagnosis grid located in the SOAP note.

We understand that no one is using ICD9 anymore, but this information is kept here for legacy purposes.

SOAP Note ICD9 Diagnosis Grid

ICD10	ICD9	SNOMED	ICD9 to ICD10 Mapping Tool		
Cervical/Cranial	723.3 Cervicobrachia I Syndrome (diffuse)	723.8 Other Syndromes Affecting Cervical Region	723.9 Unspecified Musculoskeletal Disorder/Symptoms Referable to	307.81 Headache tension	333.83 Spasmodic torticollis
Favorites	346.0 Classical migraine without intractable migraine	346.01 Classical migraine with intractable migraine	346.1 Common migraine without intractable migraine	346.11 Common migraine with intractable migraine	346.2 Variants of migraine without intractable migraine
Extremities	346.21 Variants of migraine with intractable migraine	346.8 Other forms of migraine without intractable migraine	346.81 Other forms of migraine with intractable migraine	346.9 Migraine, unspecified, without intractable migraine	346.91 Migraine, unspecified, with intractable migraine
General	350.2 Atypical face pain	351.0 Bells' Palsy	353.0 Brachial plexus lesions	353.2 Cervical root lesions	388.3 Tinnitus
Lumbar					
Pelvic/Sacral					
Thoracic/Ribs					



Settings – Pin ICD9 Diagnosis Codes

You may notice a button in the lower portion of the screen called “Copy From user...”. Use this button to make your GRID the same as another user’s.

Selecting “ChiroSpring BuiltIn” will reset the grid to the default settings.



Note: If you make a change to a user’s grid users that COPIED YOUR GRID will need to re-copy your grid in order to experience your changes. The copy is a one and done type of thing.



NOTE: For changes to take effect you must completely exit ChiroSpring and reopen.



Settings – Visit Types

Visit types can be added, edited or deleted in this section. Here you have the ability to provide the following information:

- Name
- Description
- Default appointment Length
 - This value will be used when scheduling a patient
- Default Occupy Columns
 - This specifies how many columns on the calendar across the appointment will take.
- Online Scheduler Status
 - When 'Not Hidden' this Visit Type will be pinnable in Settings/Users/Online Scheduling.
- Calendar Colors
 - You can modify the Background, Border and Font colors

Visit Types CPT copyright 2019 American Medical Association. All rights reserved.

Types	Details		
Acupuncture Session Preview	Name: Adjustment		
Adjustment Preview	Description:		
Adjustment and xray Preview	Default Appointment Length: 15 minutes ▼ X	Default Occupy Columns: 1	Online Scheduler Status: Not Hidden ▼ ?
Auto Accident Preview	Calendar Colors		
Cervical Decompress Preview	Background: Change		
Cervical Traction Preview	Border: Change		
Consult Preview	Font: Change		
Intersegmental Trac Preview	Encounter Code: 99201	Encounter Code System: CPT ▼	Value Set OID: 2.16.840.1.113883.3.464.1003.101.12.1001
Lumbar Decompress Preview	Encounter Code Description: Office Visit	Encounter Code System Name:	Value Set OID Description: Office Visit
Lumbar Traction Preview	Close Add New Delete Cancel Save		
Massage Preview			
Massage Therapy/Dr Preview			
New Patient Visit Preview			
Nutritional Consultat Preview			



Settings – Visit Types



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Types

- Acupuncture Session Preview
- Adjustment** Preview
- Adjustment and xray Preview
- Auto Accident Preview
- Cervical Decompress Preview
- Cervical Traction Preview
- Consult Preview
- Intersegmental Trac Preview
- Lumbar Decompress Preview
- Lumbar Traction Preview
- Massage Preview
- Massage Therapy/Dr Preview
- New Patient Visit Preview
- Nutritional Consultat Preview

Details

Name
Adjustment

Description

Default Appointment Length 15 minutes ▼ X **Default Occupy Columns** 1 **Online Scheduler Status** Not Hidden ? ▼

Calendar Colors

Background Change **Border** Change **Font** Change Preview

Encounter Code 99201 **Encounter Code System** CPT ▼ **Value Set OID** 2.16.840.1.113883.3.464.1003.101.12.1001

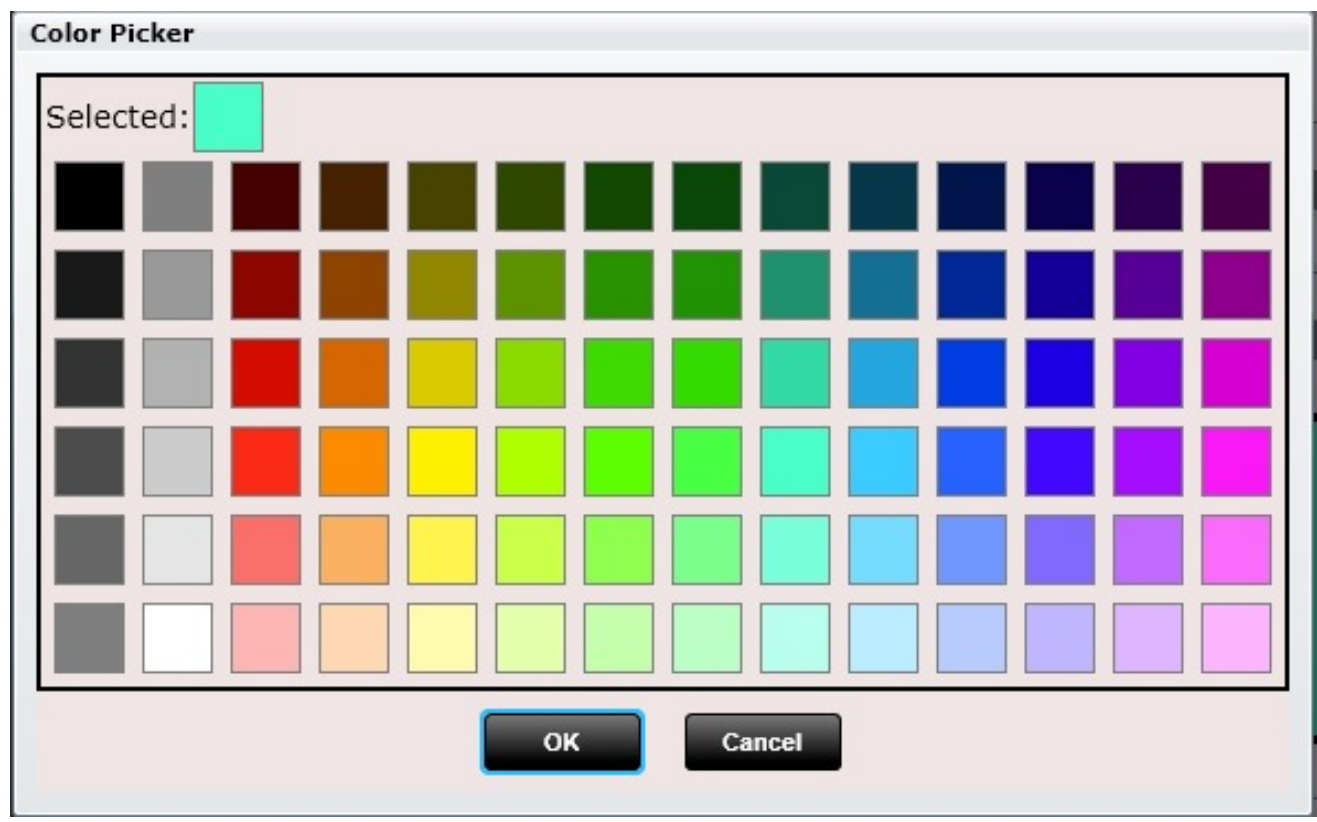
Encounter Code Description Office Visit **Encounter Code System Name** **Value Set OID Description** Office Visit

Close Add New Delete Cancel Save



Settings – Visit Types

This is the color swatch allowing you to select the color you wish to set for the Visit Type.



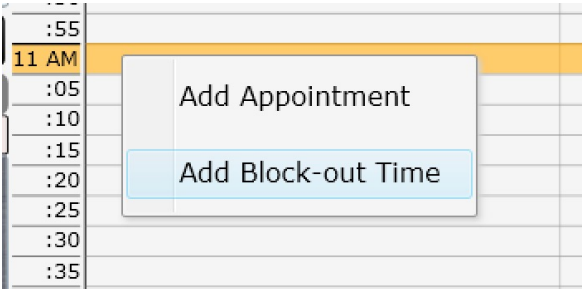


Settings – Block Out Calendar Types

Block Out Calendar Types can be added, edited or deleted in this section. Here you can provide the following information:

- Name
- Description
- Default appointment Length
- Calendar Colors
 - You can modify the Background, Border and Font colors

When on the calendar you can then right click and select “Add Block Out Time” and chose one of these options.



Block-out Calendar Types CPT copyright 2013 American Medical Association. All rights reserved.

Types	Details
<div style="border: 1px solid #ccc; padding: 5px;"> <div style="background-color: #f0f0f0; padding: 2px;">Personal Time Preview</div> <div style="background-color: #e0e0e0; padding: 2px;">Vacation Preview</div> </div>	<div style="border: 1px solid #ccc; padding: 10px;"> <p>Name</p> <p>Personal Time</p> <hr/> <p>Description</p> <p></p> <hr/> <p>Default Appointment Length</p> <p>30 minutes</p> <hr/> <p>Calendar Colors</p> <div style="display: flex; justify-content: space-between;"> <div> <p>Background Change</p> <p>Border Change</p> <p>Font Change</p> </div> <div style="border: 1px solid #00ffcc; padding: 10px; text-align: center;"> <p>Preview</p> </div> </div> </div>

Close
Add New
Delete
Cancel
Save



Settings – Block Out Calendar Types

Block-out Calendar Types CPT copyright 2013 American Medical Association. All rights reserved.

Types

Personal Time Preview

Vacation Preview

Details

Name

Personal Time

Description

Default Appointment Length

30 minutes ▼

Calendar Colors

Background

Change

Border

Change

Font

Change

Preview

Close

Add New

Delete

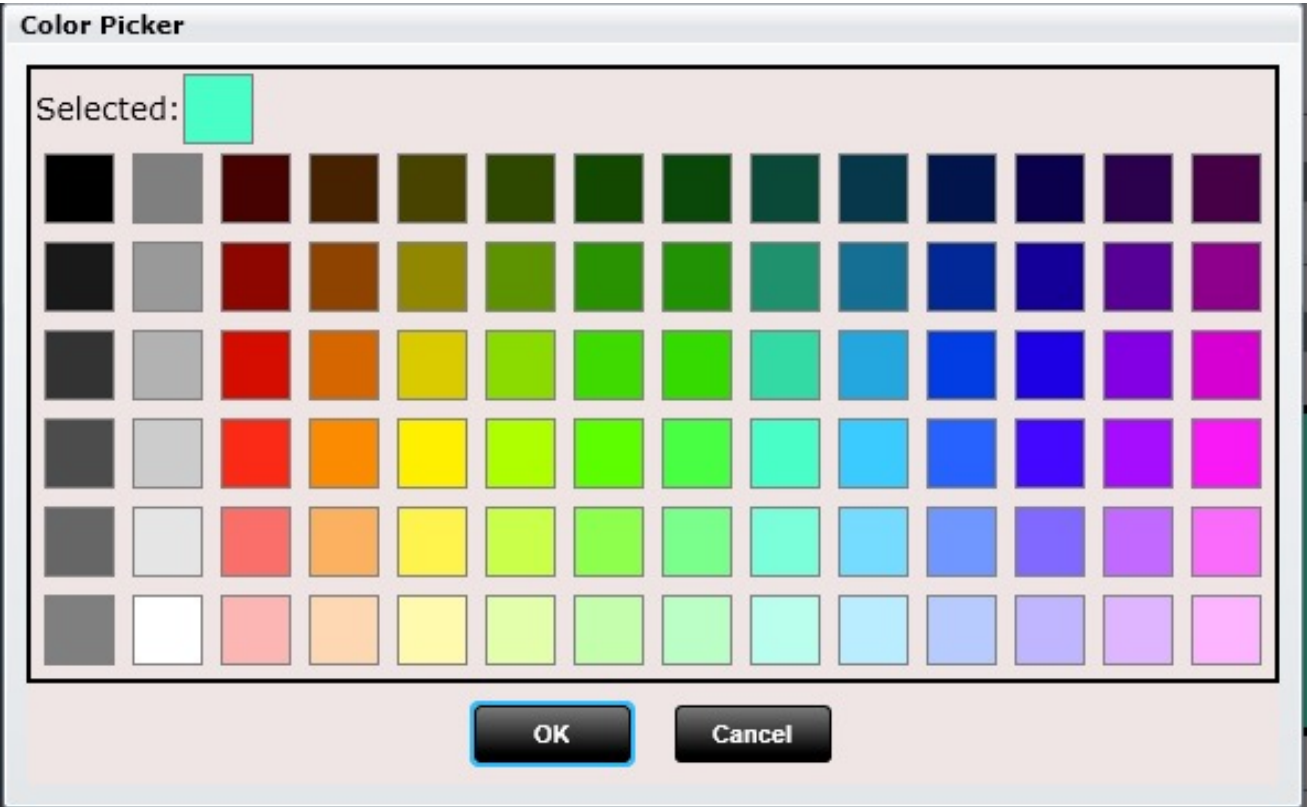
Cancel

Save



Settings – Block Out Calendar Types

This is the color swatch allowing you to select the color you wish to set for the Block Out Calendar Type.





Settings - Rooms

In Settings/Rooms you can create as many rooms as you like. Each room will appear in Patient Flow and allows for an alternative way to manage the flow of your practice.

Use the up/down arrows to arrange the order of your rooms.

Rooms can also be customized with color. Change the background or font color.

Finally, you can customize how many rooms you want shown per view. On the next page you will see two examples on how the “Rooms Per View” works.

The screenshot shows the 'Settings - Rooms' interface. At the top, there are several configuration options: 'Select Facility Location' (Spinal Care Chiropractic), 'Rooms - Pt. Flow' (6), 'Rooms - Pt. Self Check-in' (All Rooms One View), 'Patient Display Name' (HIPAA Compliant Name), 'Sort Rooms by' (Check-In Time (older times on top)), and 'Waiting For Room Sorting' (Check-In Time (Waited Longest)). A red arrow points to the 'Rooms - Pt. Flow' dropdown. Below these are two main sections: 'Rooms' and 'Details'. The 'Rooms' section shows a list of rooms: Exam Room 1, Exam Room 2, Treatment Room 1, Treatment Room 2, and Therapy Room. The 'Details' section shows the 'Room Name' (Exam Room 1) and 'Description' (let's try oother view). Below the details is the 'Room Colors' section, which allows customizing the 'Background' and 'Font' colors. The 'Background' is currently set to a bright green color, and the 'Font' is set to black. A 'Preview' box shows the result of these settings. At the bottom, there are buttons for 'Close', 'Dock', 'Add New', 'Delete', 'Cancel', and 'Save'.



Settings - Rooms

This is Patient Flow with 4 Rooms Per View.

Rooms Per View

4 ▼

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Patient Flow - Main location

Today's Patients	Exam Room 1	Exam Room 2	Awaiting Checkout
<p>Chad Thompson 9:20 AM Dr. Brian</p>		<p>Tom Andresen Appt Time: Jun 27, 10:40 AM Checked In: 10:14 AM Miranda</p>	
Waiting for Room	Treatment Room 1	Treatment Room 2	
	<p>Henry Gase Appt Time: Jul 7, 10:40 AM Checked In: 10:19 AM Miranda</p>	<p>Tom Andresen Appt Time: Jul 6, 11:00 AM Checked In: 10:56 AM Miranda</p>	



Settings - Rooms

This is Patient Flow with All Rooms One View.

Rooms Per View

All Rooms One View ▼

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Patient Flow - Main location

Today's Patients	Checked In		Awaiting Checkout
Chad Thompson 9:20 AM Dr. Brian	Treatment Room 2	Tom Andresen 2-Adjustment Appt Time: Jul 6, 11:00 AM Checked In: 10:56 AM Miranda	
	Exam Room 2	Tom Andresen 2-Adjustment Appt Time: Jun 27, 10:40 AM Checked In: 10:14 AM Miranda	
	Treatment Room 1	Henry Gase 2-Adjustment Appt Time: Jul 7, 10:40 AM Checked In: 10:19 AM Miranda	
Waiting for Room			



Settings - Rooms

You can also customize how you want your rooms to appear if you are using the Self Check-in app for your patients. Here you will see a drop down for "Rooms Per View for Patient Self Check-in".



Pt. Self Check-in

Rooms CPT copyright 2013 American Medical Association. All rights reserved.

Select Facility Location: Main | Rooms Per View: 4 | Rooms Per View for Patient Self Check-in: 4

Rooms	Details
Exam Room 1	Room Name: Exam Room 1
Exam Room 2	Description:
Treatment Room 1	Room Colors
Treatment Room 2	Background: Change
Therapy Room	Font: Change
	Preview

Add New | Delete | Cancel | Save





Settings – Insurance Carriers

Insurance Carriers are important to set up in ChiroSpring. Set them up once and you can use them over and over for multiple patients. The following information can be entered:

- Nickname (internal use only)
- Name (appears on HCFA)
- Email Address
- Address
- City
- Sate
- Zip
- Phone 1 & Type
- Phone 2 & Type
- Notes
- Insurance Payer ID

Address Tab

Insurance Carriers

Insurance Carriers	Details			
blue cross	Address			
Blue Cross & Blue Shield 5 Blue Cross & Blue Shield 1234 Main St Davenport, IA 87878	EDI Options HCFA (1) HCFA (2)			
Blue Cross & Blue Shield Blue Cross & Blue Shield	Insurance Provider's Nickname (Used Internally Only) Blue Cross & Blue Shield 5			
Blue Cross & Blue Shield 1014 Main St. Muscatine, IA 52761	Mailing Address			
Blue Cross & Blue Shield 1319 W 4th St. Muscatine, IA 52761	Name Blue Cross & Blue Shield		Email Address	
Blue Cross & Blue Shield Blue Cross & Blue Shield 1234567 Main St Davenport, IA 87878	Address 1234 Main St		City Davenport	State Abbr. IA
Blue Cross - Iowa Blue Cross Blue Shield 314 Main St.	Phone 1 800-884-7788		Type Work	Phone 2
	Type Home		Fax	
	Notes			
	Insurance Payor ID 001109		Claim Office Number	
	Buttons: Close Add New Delete Cancel Save Duplicate Insurance Carrier Edit Allowed Amounts			

The Nickname field allows you to create your own internal use only NAMES for insurance carriers without disrupting the HCFA.



Settings – Insurance Carriers

Specify for your clearinghouse or insurance carrier options that pertain to EDI file format only.

- Claim Filing Indicator
- Zip Code Format
- Receiver Name
- Receiver ID
- Max Diagnosis Pointers

EDI Options Tab

Insurance Carriers

blue cross

Blue Cross & Blue Shield 5
Blue Cross & Blue Shield
1234 Main St
Davenport, IA 87878

Blue Cross & Blue Shield
Blue Cross & Blue Shield

Blue Cross & Blue Shield
1014 Main St.
Muscatine, IA 52761

Blue Cross & Blue Shield
1319 W 4th St.
Muscatine, IA 52761

Blue Cross & Blue Shield
Blue Cross & Blue Shield
1234567 Main St
Davenport, IA 87878

Blue Cross - Iowa
Blue Cross Blue Shield
314 Main St.

Details

Address
EDI Options
HCFA (1)
HCFA (2)

These selections apply to EDI claims only. Other tabs apply to both EDI and CMS-1500 file types.

Claim Filing Indicator ?

Blue Cross/Blue Shield - (BL) ▼

Zip Code Format

5 digits ▼

Receiver Name

Receiver ID

Max Diagnosis Pointers

4 ▼

Close
Add New
Delete
Cancel
Save
Duplicate Insurance Carrier
Edit Allowed Amounts



Settings – Insurance Carriers

HCFA fields are located on the HCFA Tab. Every insurance carrier has different rules on what they want populated on the following HCFA fields.

- 1
- 4
- 9
- 9b
- 11
- 11c
- 7
- 9a
- 9d
- 11a

HCFA Tab 1

The screenshot shows the 'Insurance Carriers' settings window. On the left is a list of carriers, with 'Blue Cross & Blue Shield' selected. The right pane shows the 'Details' for this carrier, with the 'HCFA (1)' tab active. The form contains several fields with red icons and numbers: 'Coverage Type' (1), 'Insured's Name' (4), 'Other Insured's Name' (9), 'Other Insured's DOB and Sex (08/05 only)' (9b), 'Insured's Policy/Group #' (11), and 'Insured's Plan/Program Name' (11c). The 'HCFA (2)' tab is also visible but inactive. At the bottom are buttons for 'Close', 'Add New', 'Delete', 'Cancel', 'Save', 'Duplicate Insurance Carrier', and 'Edit Allowed Amounts'.

Use the drop-down selections to customize each individual insurance carrier.



Settings – Insurance Carriers

HCFA fields are located on the HCFA Tab. Every insurance carrier has different rules on what they want populated on the following HCFA fields.

- 13
- 24e
- 27
- 32
- 21
- 24i
- 24j
- 29
- 32a
- 33a
- 24a
- 26
- 31
- 32b
- 33b

HCFA Tab 2

Insurance Carriers

Insurance Carriers	Details			
	Address	EDI Options	HCFA (1)	HCFA (2)
blue cross	Patient's Signature 12 Signature On File ▼	Diagnosis Print Format 21 Normal ▼	Printed Date Format 24a MM/DD/YY ▼	
Blue Cross & Blue Shield 5 Blue Cross & Blue Shield 1234 Main St Davenport, IA 87878	Insured's Signature 13 Signature On File ▼	Rendering Provider Shaded Area 24i Provider's taxonomy code ▼	Provider NPI 24j Show ▼	
Blue Cross & Blue Shield Blue Cross & Blue Shield	Max Diagnosis Pointers 24e 4 ▼	Populate Amount Paid with 29 Insurance paid ▼	Provider Signature 31 Provider Name & Date ▼	
Blue Cross & Blue Shield 1014 Main St. Muscatine, IA 52761	Accept Assignment 27 No ▼	Populate Facility NPI with 32a Practice's Facility NPI ▼	31 Other Content ? 31 [Empty Field]	
Blue Cross & Blue Shield 1319 W 4th St. Muscatine, IA 52761	Populate Facility Address 32 Yes ▼	32a Other Content 32a [Empty Field]	Populate Facility Other ID w/ 32b Blank ▼	
Blue Cross & Blue Shield Blue Cross & Blue Shield 1234567 Main St Davenport, IA 87878	Override Box 25 content 25 Use Rendering Provider's S ▼	Populate Billing NPI with 33a Practice's Billing NPI ▼	32b Other Content 32b [Empty Field]	
Blue Cross - Iowa Blue Cross Blue Shield 314 Main St.	List Patient Account # 26 No ▼	33a Other Content 33a [Empty Field]	Populate Billing Other ID w/ 33b Blank ▼	
	Diagnosis Pointers ? 24e Letters (ABCD) ▼	Additional Claim Information 19 Provider's Taxonomy Code ▼ <small>If not 'Blank' will copy into any NEW 'Edit SOAPs'</small>	33b Other Content 33b [Empty Field]	

Buttons: Close, Add New, Delete, Cancel, Save, Duplicate Insurance Carrier, Edit Allowed Amounts

Use the drop down selections to customize each individual insurance carrier.



Settings – Insurance Carriers

When adding an insurance carrier, you will notice several text boxes and drop-down boxes. These are important because not every insurance carrier treats these HCFA fields the same. You will need to be familiar with the specific rules of that insurance carrier to determine what you select for these boxes.

Insured's Signature 13	Diagnosis Print Format 21	Printed Date Format 24a
Blank	Normal	MM/DD/YY
Max Diagnosis Pointers 24e	Rendering Provider Shaded Area 24i	List Patient Account # 26
4	Leave blank	No
Accept Assignment 27	Populate Amount Paid with 29	Provider Signature 31
Yes	Insurance paid	Provider Name & Date
Populate Facility Address 32	Populate Facility NPI with 32a	Populate Facility Other ID w/ 32b
Yes	Practice's Facility NPI	Blank
	32a Other Content 32a	32b Other Content 32b
	<input type="text"/>	<input type="text"/>
	Populate Billing NPI with 33a	Populate Billing Other ID w/ 33b
	Practice's Billing NPI	Blank
	33a Other Content 33a	33b Other Content 33b
	<input type="text"/>	<input type="text"/>
	Additional Claim Information 19	
	Leave Blank	

If not 'Blank' will copy into any NEW 'Edit SOAPs'



Settings – Insurance Carriers

HCFA box 32 by default is populated with any data you put into the 32 located in Settings/Facility Info/Facility Address. This is denoted by the box shown below being marked as “Yes”. However, some insurance companies want you to leave one or more of these fields blank. This can be accomplished by selecting a Yes or No in the boxes below.

- If YES will populate the selected box.
- If NO will leave the selected box blank.

A screenshot of a software interface. At the top, a dark grey rounded rectangle contains the text "Populate Facility Address" in white. To its right is a red rounded square containing the white number "32". Below this is a light grey rounded rectangle with a downward-pointing triangle on its right side. A dropdown menu is open, showing two options: "Yes" on a light blue background and "No" on a white background.



Settings – Insurance Carriers

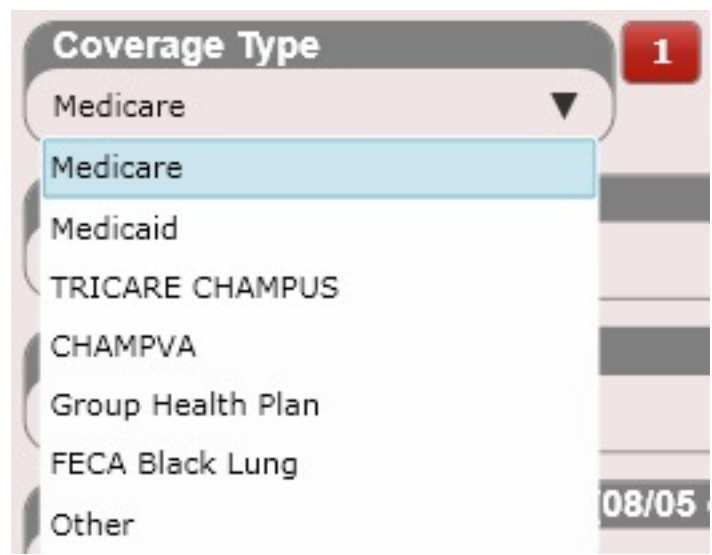
NOTE: If the drop-down selection you are looking for is NOT present for boxes 32a or 32b, 33a or 33b then select “Other Content” from the drop down and populate the appropriate “Other Content” box (see below).

Populate Facility NPI with 32a Other Content ▼	32a	Populate Facility Other ID w/ 32b Other Content ▼	32b
32a Other Content <input type="text"/>	32a	32b Other Content <input type="text"/>	32b
Populate Billing NPI with 33a Other Content ▼	33a	Populate Billing Other ID with 33b Other Content ▼	33b
33a Other Content <input type="text"/>	33a	33b Other Content <input type="text"/>	33b



Settings – Insurance Carriers

Coverage Type (HCFA box 1) allows you to select from the following: Medicare, Medicaid, TRICARE CHAMPUS, CHAMPVA, Group Health Plan, FECA Black Lung or Other.



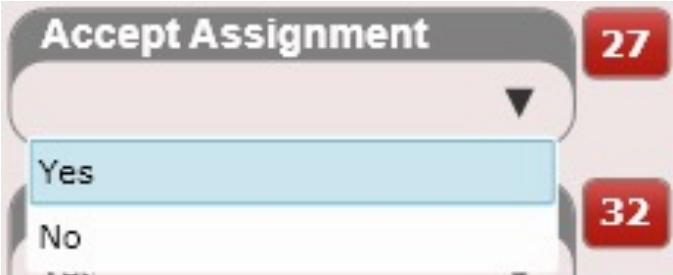
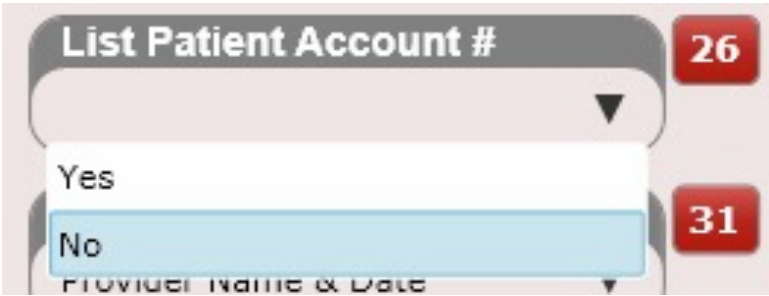


Settings – Insurance Carriers

HCFA box 26 is the patient’s account number. If you want it shown on the HCFA select Yes. If you do not want it shown on the HCFA select “No”. This defaults to no.

HCFA box 27 is “Accept Assignment”. This is either a “Yes” or a “No” and defaults to “No”.

HCFA box 31 is the “Provider’s Signature.” If you want to have the provider’s name displayed select “Provider Name and Date”. Otherwise select “Signature on File” to have “Signature on File” populated in this box. This defaults to “Provider’s Name & Date”.





Settings – Insurance Carriers

HCFA box 32a can be populated with the following fields: Blank, Practice’s Facility NPI, Treating Provider’s NPI, 32a Other Content. You are only making the selections from this drop down here. You will need to add the actual numbers in either the Practice Info app or the User’s app (both found in settings).

To populate “32a Other Content” type the content into the text box labeled “32a Other Content”.

Populate Facility NPI with 32a

Practice’s Facility NPI ▼

- Blank
- Practice’s Facility NPI 32a
- Treating Provider’s NPI
- 32a Other Content 33a

32a Other Content 32a



Settings – Insurance Carriers

HCFA box 32b can be populated with the following fields: Blank, Practice's Facility Other ID, Practice Taxonomy Code, Provider's Taxonomy Code, Provider's License #, Provider's Medicare ID #, Provider's Physician ID #, Provider's Physician Group #. You are only making the selections from this drop down here. You will need to add the actual numbers in either the Practice Info app or the User's app (both found in settings).

To populate "32b Other Content" type the content into the text box labeled "32b Other Content".

Populate Facility Other ID w/ **32b**

32b Other Content ▼

- Blank **32b**
- Practice's Facility Other ID **32b**
- Practice Taxonomy Code
- Provider's Taxonomy Code **33b**
- Provider's License #
- Provider's Medicare ID #
- Provider's Physician ID # **33b**
- Provider's Physician Group #
- 32b Other Content

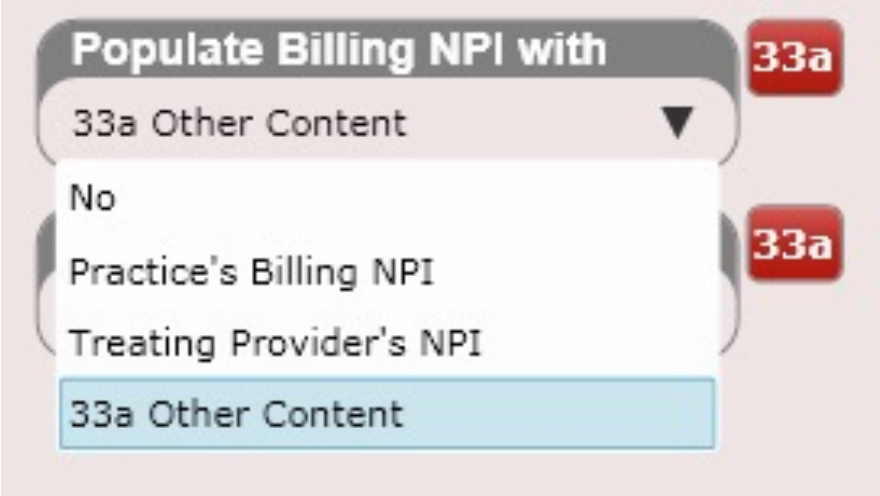
32b Other Content **32b**



Settings – Insurance Carriers

HCFA box 33a can be populated with the following fields: No, Practice’s Billing NPI, Treating Provider’s NPI, 33a Other Content. You are only making the selections from this drop down here. You will need to add the actual numbers in either the Practice Info app or the User’s app (both found in settings).

To populate “33a Other Content” type the content into the text box labeled “33a Other Content”.

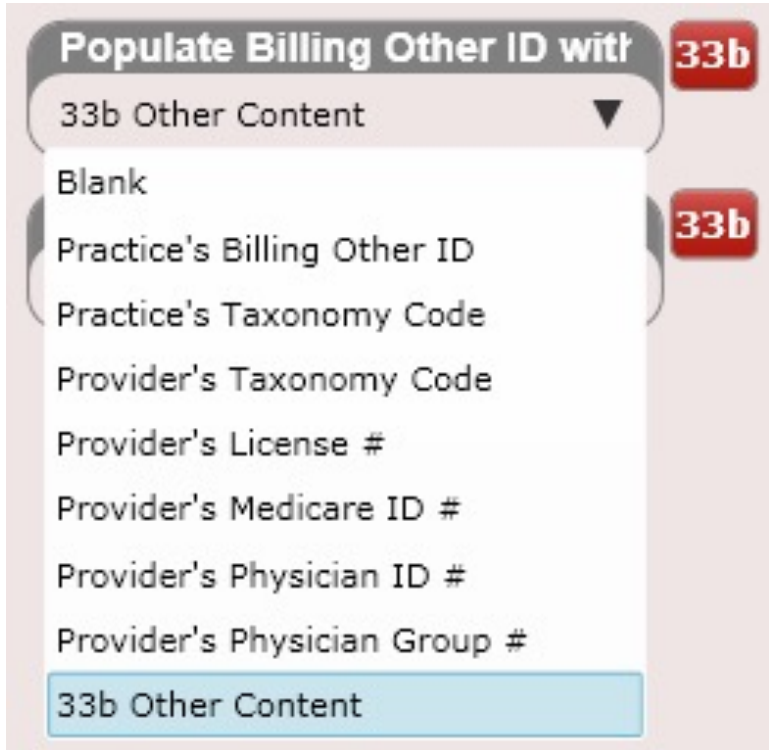




Settings – Insurance Carriers

HCFA box 33b can be populated with the following fields: Blank, Practice’s Billing Other ID, Practice’s Taxonomy Code, Provider’s Taxonomy Code, Provider’s License #, Provider’s Medicare ID #, Provider’s Physician ID #, Provider’s Physician Group #, 33b Other Content. You are only making the selections from this drop down here. You will need to add the actual numbers in either the Practice Info app or the User’s app (both found in settings).

To populate “33b Other Content” type the content into the text box labeled “Box 33b Other Content”.

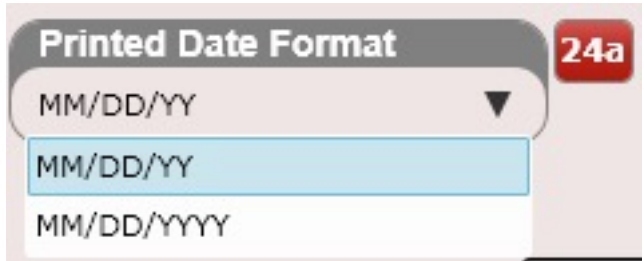




Settings – Insurance Carriers

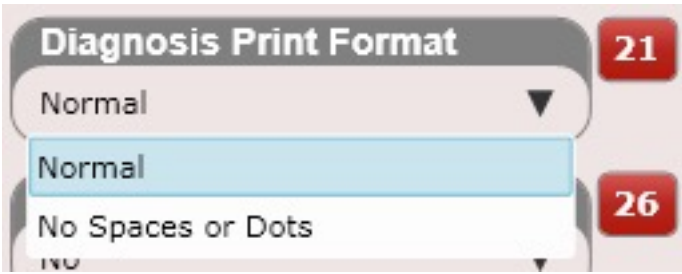
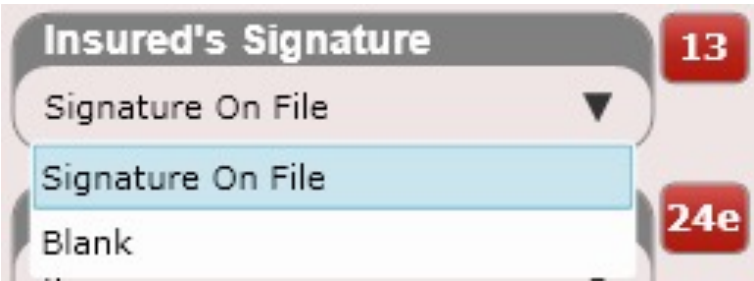
HCFA box 24a defaults to a printed MM/DD/YY format as this is what is required by CMS-1500. However, some insurance companies require all dates on the HCFA to have the same MM/DD/YYYY format when printed. Thus, you can override box 24a here and set it to MM/DD/YYYY.

This change will ONLY affect the Printed HCFA forms.



HCFA box 13 defaults to “Signature on File”. However, there are some insurance carriers that want this field left blank. In that case select “Blank”.

HCFA box 21 defaults to Normal (e.g. xxx.xx). However, some insurance carriers do not allow a decimal or spaces (e.g. Medicare). Therefore, the option “No Spaces or Dots” will display diagnoses as xxxxx for example.



Tip: Medicare wants “No Spaces or Dots” as the selection for box 21



Settings – Insurance Carriers

HCFA box 24e defaults to 4. However, there are some insurance carriers that only want 1 diagnosis pointer (e.g. Medicare wants 1).

Max Diagnosis Pointers

4

1

2

3

4

24e

29

32a

Tip: Medicare wants 1 as the selection for box 24e



Settings – Insurance Carriers

The Insurance Payer ID is an optional field. Most insurance carriers have a Pay3r ID. Populating this number can result in fewer rejected claims as your clearinghouse will have better accuracy in submitting your claims to the correct location.

Insurance Payer ID



Setting up Medicare

Medicare has many complex rules on what the HCFA should populate with depending on which billing state or which combination of Medicare the patient has. We have taken this complex problem and made a simple and elegant solution so billing Medicare has never been easier.

The next few pages will detail how to set up Medicare in ChiroSpring. Medicare has different requirements on what HCFA fields are populated depending on the following:

- If Medicare is Primary for the patient
- If Medicare is Secondary for the patient
- If Medicare is Primary for the patient and the patient also has Medigap

In order to make billing Medicare SIMPLE you will need to create THREE Medicare Insurance Carriers in ChiroSpring.

- **** Medicare is Primary ****
- **** Medicare is Secondary ****
- **** Medicare with Medigap ****

After creating these three Medicare Insurance Carriers simply select the appropriate one when setting up Medicare for your patient. This of course depends on if Medicare is the patient's primary, secondary, or if the patient has both Medicare and Medigap.

Setting up Medicare in ChiroSpring

Create three Medicare Insurance Carriers with these settings:

HCFA Item	Medicare is Primary	Medicare is Secondary	Medicare w/ Medigap
Box 1: Coverage Type	Medicare	Medicare	Medicare
Box 4: Insured's Name	Leave blank	'SAME' if same as patient, otherwise insured's name	Leave blank
Box 7: Insured's Address	Leave blank	'SAME' if same as patient's address, otherwise insured's address	Leave blank
Box 9: Other Insured's Name	Leave blank	Leave blank	'SAME' if same as patient, otherwise insured's name
Box 9a: Other Insured's Policy or Group Number	Leave blank	Leave blank	Other Insured's Policy/Group Number
Box 9d: Other Insurance Plan / Program Name	Leave blank	Leave blank	Other Insured's Plan/Program Name
Box 11: Insured's Policy or Group Number	Print 'NONE'	Other Insured's Policy/Group Number	Print 'NONE'
Box 11a: Insured's DOB and Sex	Leave blank	Other Insured's DOB and Sex if Different than patient.	Leave blank
Box 11c: Insurance Plan / Program Name	Leave blank	Other Insurance Plan/Program Name	Leave blank
Box 21: Diagnosis Print Format	No spaces or dots	No spaces or dots	No spaces or dots
Box 24e: Max Diagnosis Pointers	1	1	1

Content of HCFA fields when Medicare is primary (with or without secondary):

HCFA Item	Medicare Required Content	ChiroSpring Required Content
Box 4	Leave blank	No content required
Box 7	Leave blank	No content required
Box 9	If has Medigap policy then enter name of enrollee in Medigap or word "SAME" if same as patient. Otherwise if no Medigap policy then leave blank.	If has secondary policy then enter insured's name in Edit Secondary Insurance dialog.
Box 9a	Enter policy/group number of Medigap insured preceded by MEDIGAP, MG, or MGAP.	If has secondary policy then enter insured's policy/group number in Edit Secondary Insurance dialog. If Medigap proceed by MEDIGAP, MG, or MGAP.
Box 9b	Form version 08/05: Enter Medigap insured's DOB and sex.	If has secondary policy then enter insured's DOB and sex in Edit Secondary Insurance dialog.
Box 9c	Leave blank	No content required
Box 9d	Enter the Coordination of Benefits Agreement (COBA) Medigap-based Identifier (ID)	If has secondary policy then enter required information in Insurance Plan or Program Name in Edit Secondary Insurance dialog.
Box 11	Enter word "NONE"	No content required
Box 11a	Leave blank	No content required
Box 11b	Leave blank	No content required
Box 11c	Leave blank	No content required

Content of HCFA fields when Medicare is secondary:

HCFA Item	Medicare Required Content	ChiroSpring Required Content
Box 4	If insured's name is same as patient then enter word "SAME", otherwise enter insured's name.	Enter insured's name into Edit Secondary Insurance dialog.
Box 7	If insured's address is same as patient then enter word "SAME", otherwise insured's address.	Enter insured's address and phone into Edit Secondary Insurance dialog.
Box 9	Leave blank	No content required
Box 9a	Leave blank	No content required
Box 9b	Leave blank	No content required
Box 9c	Leave blank	No content required
Box 9d	Leave blank	No content required
Box 11	Enter the primary's policy/group number	Enter primary insured's name in Edit Primary Insurance dialog.
Box 11a	Enter the primary insured's DOB and sex if different from Box 3	Enter primary insured's DOB and sex in Edit Primary Insurance dialog.
Box 11b	Form version 08/05: Enter employer's name and if change in insured's status, e.g., retired, enter either a 6-digit (MM | DD | YY) or 8-digit (MM | DD | CCYY) retirement date preceded by the word, "RETIRED." Form version 02/12: provide this information to the right of the vertical dotted line.	Enter primary insured's employer's name in Other Claim ID box in Edit Insurance Case dialog.
Box 11c	Enter the 9-digit PAYERID number of the primary insurer. If no PAYERID number exists, then enter the complete primary payer's program or plan name.	Enter primary insured's PAYERID or plan/program name in Edit Primary Insurance dialog.
Box 11d	Leave blank	No content required



HCFA Field: **** Medicare is Primary****

Create this Insurance Carrier with the selections shown below

Insurance Carriers

Insurance Carriers | **Details**

Address | **HCFA (1)** | **HCFA (2)**

Insurance Provider's Nickname (Used Internally Only)
** Medicare is Primary**

Name Medicare | **Email Address**

Address | **City** | **State Abbr.** | **Zip**

Phone 1 | **Type** Work | **Phone 2** | **Type** Work | **Fax**

** Medicare is Primary** Medicare
 ** Medicare is Secondary ** Medicare
 ** Medicare with Medigap ** Medicare
 Medicare - as Primary with Seco
 Medicare - as Primary with Seco

Create an Insurance Carrier with the following information

Insurance Provider's Nickname: **** Medicare is Primary ****

Name: Medicare



HCFA Field: **Medicare is Primary**

Create this Insurance Carrier with the selections shown below

Address	HCFA (1)	HCFA (2)
	Coverage Type 1 Medicare ▼	
	Insured's Name 4 Leave blank ▼	Insured's Address 7 Leave blank ▼
	Other Insured's Name 9 Leave blank ▼	Other Insured's Policy/Group Number 9a Leave blank ▼
	Other Insured's DOB and Sex (08/05 only) 9b Other Insured's DOB and Sex ▼	Other Plan/Program Name 9d Leave blank ▼
	Insured's Policy/Group # 11 Print 'NONE' ▼	Insured's DOB and Sex 11a Leave blank ▼
	Insured's Plan/Program Name 11c Leave blank ▼	



HCFA Field: **Medicare is Primary**

Create this Insurance Carrier with the selections shown below

Address	HCFA (1)	HCFA (2)
Insured's Signature 13 Signature On File ▼	Diagnosis Print Format 21 No Spaces or Dots ▼	Printed Date Format 24a MM/DD/YY ▼
Max Diagnosis Pointers 24e 1 ▼	Rendering Provider Shaded Area 24i Provider's taxonomy code ▼	List Patient Account # 26 No ▼
Accept Assignment 27 Yes ▼	Populate Amount Paid with 29 Insurance paid ▼	Provider Signature 31 Provider Name & Date ▼
Populate Facility Address 32 Yes ▼	Populate Facility NPI with 32a Practice's Facility NPI ▼	Populate Facility Other ID w/ 32b Blank ▼
	32a Other Content 32a <input type="text"/>	32b Other Content 32b <input type="text"/>
	Populate Billing NPI with 33a Practice's Billing NPI ▼	Populate Billing Other ID w/ 33b Blank ▼
	33a Other Content 33a <input type="text"/>	33b Other Content 33b <input type="text"/>



HCFA Field: ** Medicare is Secondary **

Create this Insurance Carrier with the selections shown below

Insurance Carriers

Insurance Carriers | **Details**

Address | **HCFA (1)** | **HCFA (2)**

Insurance Provider's Nickname (Used Internally Only)
** Medicare is Secondary **

Name
Medicare

Email Address

Address | **City** | **State Abbr.** | **Zip**

Phone 1 | **Type** (Work) | **Phone 2** | **Type** (Work) | **Fax**

Left sidebar options:
** Medicare is Primary **
Medicare
** Medicare is Secondary ** (highlighted)
Medicare
** Medicare with Medigap **
Medicare
Medicare - as Primary with Seco
Medicare - as Primary with Seco

Create an Insurance Carrier with the following information

Insurance Provider's Nickname: ** Medicare is Secondary **

Name: Medicare



HCFA Field: **Medicare is Secondary**

Create this Insurance Carrier with the selections shown below

Address	HCFA (1)	HCFA (2)
Coverage Type Medicare	1	
Insured's Name 'SAME' if same as patient, otherwise insured's name	4	Insured's Address 'SAME' if same as patient's address, otherwise insur
Other Insured's Name Leave blank	9	Other Insured's Policy/Group Number Leave blank
Other Insured's DOB and Sex (08/05 only) Leave blank	9b	Other Plan/Program Name Leave blank
Insured's Policy/Group # Other Insured's Policy/Group Number	11	Insured's DOB and Sex Other Insured's DOB and Sex only if different from
Insured's Plan/Program Name Other Insured's Plan/Program Name	11c	11a



HCFA Field: **Medicare is Secondary**

Create this Insurance Carrier with the selections shown below

Address	HCFA (1)	HCFA (2)
Insured's Signature 13	Diagnosis Print Format 21	Printed Date Format 24a
Signature On File ▼	No Spaces or Dots ▼	MM/DD/YY ▼
Max Diagnosis Pointers 24e	Rendering Provider Shaded Area 24i	List Patient Account # 26
1 ▼	Leave blank ▼	No ▼
Accept Assignment 27	Populate Amount Paid with 29	Provider Signature 31
Yes ▼	Insurance paid ▼	Provider Name & Date ▼
Populate Facility Address 32	Populate Facility NPI with 32a	Populate Facility Other ID w/ 32b
Yes ▼	Practice's Facility NPI ▼	Blank ▼
	32a Other Content 32a	32b Other Content 32b
	<input type="text"/>	<input type="text"/>
	Populate Billing NPI with 33a	Populate Billing Other ID w/ 33b
	Practice's Billing NPI ▼	Blank ▼
	33a Other Content 33a	33b Other Content 33b
	<input type="text"/>	<input type="text"/>



HCFA Field: **Medicare w/ Medigap**

Create this Insurance Carrier with the selections shown below

Insurance Carriers

- Insurance Carriers
- ** Medicare is Primary**
Medicare
- ** Medicare is Secondary **
Medicare
- ** Medicare with Medigap ****
Medicare
- Medicare - as Primary with Seco
- Medicare - as Primary with Seco

Insurance Carriers		Details			
Address		HCFA (1)		HCFA (2)	
Insurance Provider's Nickname (Used Internally Only)					
** Medicare with Medigap **					
Name			Email Address		
Medicare					
Address		City	State Abbr.	Zip	
Phone 1	Type	Phone 2	Type	Fax	
	Work ▼		Work ▼		

Create an Insurance Carrier with the following information

Insurance Provider's Nickname: ** Medicare with Medigap **
 Name: Medicare



HCFA Field: **Medicare w/ Medigap**

Create this Insurance Carrier with the selections shown below

Address

HCFA (1)

HCFA (2)

Coverage Type

Medicare

1

Insured's Name

Leave blank

4

Insured's Address

Leave blank

7

Other Insured's Name

'SAME' if same as patient, otherwise other insured's na

9

Other Insured's Policy/Group Number

Other Insured's Policy/Group Number

9a

Other Insured's DOB and Sex (08/05 only)

Other Insured's DOB and Sex

9b

Other Plan/Program Name

Other Insured's Plan/Program Name

9d

Insured's Policy/Group #

Print 'NONE'

11

Insured's DOB and Sex

Leave blank

11a

Insured's Plan/Program Name

Leave blank

11c



HCFA Field: **Medicare w/ Medigap**

Create this Insurance Carrier with the selections shown below

Address	HCFA (1)	HCFA (2)
Insured's Signature 13 Signature On File ▼	Diagnosis Print Format 21 No Spaces or Dots ▼	Printed Date Format 24a MM/DD/YY ▼
Max Diagnosis Pointers 24e 1 ▼	Rendering Provider Shaded Area 24i Leave blank ▼	List Patient Account # 26 No ▼
Accept Assignment 27 Yes ▼	Populate Amount Paid with 29 Insurance paid ▼	Provider Signature 31 Provider Name & Date ▼
Populate Facility Address 32 Yes ▼	Populate Facility NPI with 32a Practice's Facility NPI ▼	Populate Facility Other ID w/ 32b Blank ▼
	32a Other Content 32a	32b Other Content 32b
	Populate Billing NPI with 33a Practice's Billing NPI ▼	Populate Billing Other ID w/ 33b Blank ▼
	33a Other Content 33a	33b Other Content 33b



Setting up Medicare – Do Not Accept Assignment



1. Create a Medicare Insurance Carrier that has “Accept Assignment” set to “No”.
2. Now add Medicare to the patient’s Insurance Case. Set the patient’s co-insurance to 100% (so the patient pays you 100% at the time of checkout). Remember, Medicare will be reimbursing the patient (not you) so the patient needs to pay you 100% before they leave.
3. The patient should pay you 100% at the time of checkout.
4. When submitting charges, the software will prompt you to mark “Accept Assignment = No” charges to “RECONCILED” after you have submitted them to insurance. This is a HUGE TIME SAVER as you will not need to manually do this. :)
5. You will still bill Medicare with the HCFA. There should be a zero balance on the HCFA since you are not accepting assignment. Since you set the co-insurance to 100% and the patient paid this will be the case.
6. Medicare will receive your HCFA and see that you are not accepting assignment. They will then send the check to the patient. There is nothing for you to do at this point as the charges are already paid by the patient and if you selected “Mark as Reconciled” in step 4 then the charges will be reconciled.

IMPORTANT: You must have co-insurance enabled at the practice level. This is done in Settings/Practice Info/Charge Options. See below.



HCFA Field: Medicare – Do Not Accept Assignment



Create this Insurance Carrier with the selections shown below

Address	HCFA (1)	HCFA (2)
Insured's Signature 13 Signature On File ▼	Diagnosis Print Format 21 No Spaces or Dots ▼	Printed Date Format 24a MM/DD/YY ▼
Max Diagnosis Pointers 24e 1 ▼	Rendering Provider Shaded Area 24i Leave blank ▼	List Patient Account # 26 No ▼
Accept Assignment 27 No ▼	Populate Amount Paid with 29 Insurance paid ▼	Provider Signature 31 Provider Name & Date ▼
Populate Facility Address 32 Yes ▼	Populate Facility NPI with 32a Practice's Facility NPI ▼	Populate Facility Other ID w/ 32b Blank ▼
	32a Other Content 32a <input type="text"/>	32b Other Content 32b <input type="text"/>
	Populate Billing NPI with 33a Practice's Billing NPI ▼	Populate Billing Other ID w/ 33b Blank ▼
	33a Other Content 33a <input type="text"/>	33b Other Content 33b <input type="text"/>



Setting up Medicaid

Medicaid has specific requirements depending on the state you practice in. The following slides may provide assistance, but ensure you check with your state requirements.



HCFA Fields – Medicaid

Address	HCFA (1)	HCFA (2)
Insured's Signature 13 Signature On File ▼	Diagnosis Print Format 21 No Spaces or Dots ▼	Printed Date Format 24a MM/DD/YY ▼
Max Diagnosis Pointers 24e 4 ▼	Rendering Provider Shaded Area 24i Provider's taxonomy code ▼ 24j	List Patient Account # 26 No ▼
Accept Assignment 27 No ▼	Populate Amount Paid with 29 Insurance paid ▼	Provider Signature 31 Provider Name & Date ▼
Populate Facility Address 32 Yes ▼	Populate Facility NPI with 32a Practice's Facility NPI ▼	Populate Facility Other ID w/ 32b Blank ▼
	32a Other Content 32a <input type="text"/>	32b Other Content 32b <input type="text"/>
	Populate Billing NPI with 33a Practice's Billing NPI ▼	Populate Billing Other ID w/ 33b Blank ▼
	33a Other Content 33a <input type="text"/>	33b Other Content 33b <input type="text"/>



HCFA Fields – Medicaid: 11d

Box 11d (Medicaid)

- If the patient ONLY has Medicaid (e.g. has no Secondary)

Another Health Plan Selection 11d

Only check No ▼

- If the patient has Medicaid for Primary (and has another insurance for Secondary)

Another Health Plan Selection 11d

Always check Yes & if primary paid zero also check No ▼

- If the patient has Medicaid for Secondary (and has another insurance for Primary)

Another Health Plan Selection 11d

Always check Yes & if primary paid zero also check No ▼

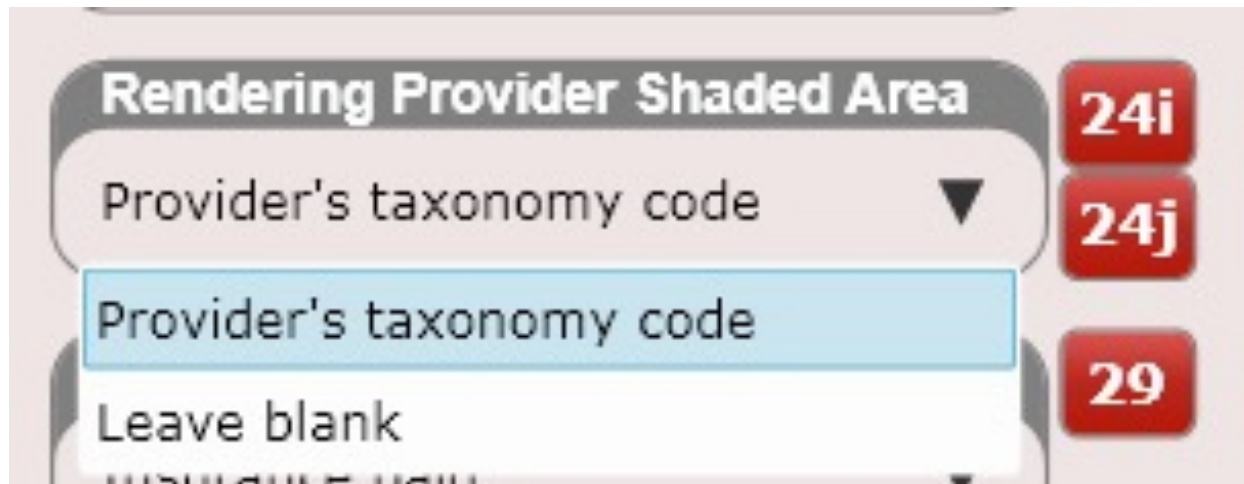


HCFA Fields – Medicaid: Box 24i & 24j

Medicaid has a specific requirement in some states that Box 24i must populate “ZZ” and box 24j must populate the provider’s taxonomy code. Then select “Provider’s taxonomy code” from the dropdown box shown here.

This dropdown is located in Settings/Insurance Carriers/HCFA (2)

As a reminder, you can populate the provider’s qualifier and taxonomy code in Settings/Users/Provider Info.





Insurance – Edit Allowed Amounts

Inside the Insurance Carrier's app is a button that says, "Edit Allowed Amounts". Clicking this button will open the dialog shown to the right. Here you can enter the allowed amounts for every charge in your practice FOR THAT INSURANCE CARRIER. This is an extremely powerful feature. This is because ChiroSpring will use the allowed amounts you enter to estimate the patient's co-insurance (if applicable) at the time of checkout.

For example, a patient with a 10% co-insurance is being checked out for a 98941-3-4 region manipulation. The charge amount is \$40 and the allowed amount is \$30. This means the patient will be charged \$3 at the cash register vs. \$4 had you not entered the \$30 allowed amount.



Edit Allowed Amounts

Use this dialog to specify what the insurance allows for each service or product. If the allowed amount is not known or you do not wish to provide it, just leave the box blank and the software will default a new charge's amount allowed to the charge's price.

Services	Products
3-4	
98941 Manipulation 3-4 Regions Price: \$40.00	30.00
98941-AT Manipulation 3-4 Regions (Mcare) Price: \$40.00	30.00

Save & Close

Cancel



Insurance – Clearinghouse

ChiroSpring supports multiple clearinghouses. These include:

- Office Ally
- Etactics
- Trizetto
- Waystar
- Infinedi
- Smartdata Solutions
- BCBS-MI

Additional clearinghouses may also work (we have not tested them). If you are billing EDI claims and want to submit them via direct secure FTP (much easier and faster) you will need to setup your clearinghouse in Settings/Insurance/Clearinghouses. Search our Help Center for your clearinghouse to find the recommended settings.

Clearinghouses CPT copyright 2020 American Medical Association. All rights reserved.

Clearinghouses	Details
office	Name *Office Ally
*Office Ally	Receiver ID Qualifier ? ZZ - Mutually Defined
	Receiver ID 330897513
	Sender ID Qualifier ? ZZ - Mutually Defined
	Sender ID ? Office Ally Will Provide You - User Specific
	FTP Host Name ftp10.officeally.com
	FTP Host Port 22
	FTP Username Office Ally Will Provide You - User Specific
	FTP Password Office Ally Will Provide You - User Specific
	FTP Upload Folder Name Inbound
	FTP File Extension .txt
	Include Secondary Info When Sending Primary Claim Yes
	Acknowledgement Requested ? No

Close Add New Delete Cancel Save

Front Desk Provider View Patient Flow Thursday, Dec 17, 2020 1:12 PM Dr. Brian Albery Log Out KB

Activate V Go to Setting



Settings – Referring Providers

The Referring Provider’s app allows you to store as many providers into the system as you want. Then when you are writing a SOAP note you can select a referring provider from the list if necessary.

In the Edit SOAP “Condition” Tab you can select a provider that referred YOU the patient.

Referring Provider Select Remove 17

Name: Jon Maxwell MD
Phone: 555-434-6655
Fax:
Email:
NPI: 76767676676

In the Edit SOAP “Wrap Up” Tab you can select a provider you are referring your patient TO.

Refer Patient To

<p>Provider Select Remove</p> <p>Name :</p>	<p>Reason for Referral</p>
---	-----------------------------------



Settings – Attorneys

The Attorneys app allows you to store as many attorneys into the system as you want. This makes it faster to add attorney information to an insurance case.

Attorney
Select
Remove

Name: Tom Smith

Phone: 555-555-3333

Fax: 555-444-3333

Email: tomsmith@gmail.com

Address: 123 Madison Ave

Attorneys

- John Smith
- Tom Smith

Prefix	First John	Last Smith	MI	Suffix	Nickname
DOB	Age	Sex	SSN	Email Address johnsmith@gmail.com	
Address 123 Madison Ave	City Davenport	State Abbr. IA	Zip 87667		
Phone 1 555-555-3333	Type Work	Phone 2 555-333-2211	Type Work	Fax 555-444-3333	
Notes					

Close
Add New
Delete
Cancel
Save



Settings – Form Settings

The Form Settings app is necessary to set up the alignment of your HCFA forms that you will print onto.

To align your form, follow the instructions within the app and print several test pages by clicking the “Print Test Page” button until everything is aligned. Then save changes.

Note there are two HCFA forms to select. You will need to align both form types if you wish to print using both form types.

You must follow the instructions on this screen EXACTLY or you will have difficulty aligning your HCFA form.

Form Settings

CMS-1500 (02-12)

CMS-1500 (08-05)

Left Margin: -3

Right Margin: -20

Top Margin: -35

Bottom Margin: 52

Print Test Page

Use this screen to align the printed text on the pre-printed blank Health Insurance Claim Forms (HICF). Follow this procedure to align the text (ensure there are blank forms in the printer before starting):

1. Print a test page by clicking button "Print Test Page".
2. First adjust the top and left margins until the printed question mark for 'Medicare' in box 1 is centered in check box. After each adjustment, print a new test page to verify alignment. Repeat until centered. Note, increasing the top or left margin value will shift the printed text down or right, respectively.
3. Next adjust the right margin until the printed question mark for 'sex female' in box 11a is horizontally centered in the check box. After each adjustment, print a new test page to verify alignment. Note, increasing the right margin value will shift the printed text to the left.
4. Next adjust the bottom margin until the printed question mark for box 33b is vertically centered. After each adjustment, print a new test page to verify alignment. Note, increasing the bottom margin value will shift the printed text to the top.
5. Finally, once satisfied with the final text alignment, click 'Save'.

Close **Save**



Settings – Form Settings

Use this screen to align the printed text on the pre-printed blank Health Insurance Claim Forms (HICF). Follow this procedure to align the text (ensure there are blank forms in the printer before starting):

1. Print a test page by clicking button "Print Test Page".
2. First adjust the top and left margins until the printed question mark for 'Medicare' in box 1 is centered in check box. After each adjustment, print a new test page to verify alignment. Repeat until centered. Note, increasing the top or left margin value will shift the printed text down or right, respectively.
3. Next adjust the right margin until the printed question mark for 'sex female' in box 11a is horizontally centered in the check box. After each adjustment, print a new test page to verify alignment. Note, increasing the right margin value will shift the printed text to the left.
4. Next adjust the bottom margin until the printed question mark for box 33b is vertically centered. After each adjustment, print a new test page to verify alignment. Note, increasing the bottom margin value will shift the printed text to the top.
5. Finally, once satisfied with the final text alignment, click 'Save'.



Settings – Export Data

The Export Data app allows you to export data for all your patients. Click the app, then select “Patient Profiles” from the list box, then “Export”.

A dialog box will open telling you that your exported data is in your “My Documents” folder in a folder named “ChiroSpring Exported Data”.

Choose the Appointment Schedule/Report option to export appointments.

Export Data

Exports data to a Comma-Separated-Value (CSV) file. Data can be easily imported into a variety of applications, including spreadsheets like Microsoft Excel, or simply viewed using any text editor.

Patient Profiles

Appointment Schedule Report

Patient Birth-month Report

Close

Export

Export Data Item

Data item successfully created. Output file located in 'ChiroSpring Exported Data' folder under the current user's My Documents folder.

OK



Settings – Custom Basic SOAP Macros

This app allows you to create Basic SOAP Macros for the “Free Text” and “Discharge” portions of the SOAP Note. Create the following:

- Macro Button Name
- Text

Macros will appear at the END of the associated macro grid inside the SOAP Note. Use the “Pin Macros” app to arrange the macros in the order you want them.

Remember, you must completely close out of ChiroSpring and re-open to refresh the database with your newly created macros.

The screenshot shows the 'Basic SOAP Macros' settings interface. At the top, there are five buttons: 'Subjective' (highlighted in blue), 'Objective', 'Assessment', 'Plan', and 'Discharge'. Below these is a 'Macros' grid with a single entry 'Subjective Text' highlighted in cyan. To the right is a 'Details' panel for the selected macro, showing 'Macro Name' as 'Subjective Text' and 'Macro Text when Clicked' as 'This text will be pasted in the Subjective Portion of the SOAP Note when you select this macro.' At the bottom, there are four buttons: 'Close', 'Add New', 'Delete', and 'Save'.



Settings – Custom Advanced SOAP Macros



The Advanced SOAP Macros app will allow you to create Macros with multiple dialogs and questions.

The next few pages will break down the components of this app.

- Macro Name
- Dialog(s)
- Question Text
- Response Text
- Selections

The “Add New Dialog” button will allow you to create more dialogs. Use the arrows to arrange the order of your dialogs.

Subjective

Macro Name: Test Macro

Dialogs	Dialog Details	
How are you feeling today?	<p>Question Text</p> <p>How are you feeling today?</p> <p>Response Text</p> <p>{Name} is feeling *.</p> <p>Use an asterisk (*) to indicate where the selected items will be placed in the response text. When using the macro, the asterisk will be replaced with the selected items.</p> <p> <input type="text" value="Patient Name"/> <input type="text" value="Him/Her"/> <input type="text" value="him/her"/> <input type="radio"/> Multiple Selections </p> <p> <input type="text" value="He/She"/> <input type="text" value="he/she"/> <input type="text" value="His/Her"/> <input type="text" value="his/her"/> <input checked="" type="radio"/> One Selection </p> <p>Example 1: On a scale of 0 to 10, with 0 being no pain at all and 10 being the worst pain imaginable, {He/She} rates {his/her} pain as a *.</p> <p>Example 2: {Name} entered our office with a chief complaint of *.</p>	<p>Selections</p> <p><input type="text"/> <input type="button" value="Add New"/></p> <p>To add a selection type above and select 'Add New'</p> <p> <input type="text" value="Good"/> <input checked="" type="text" value="Bad"/> </p>
<p> <input type="button" value="↑"/> <input type="button" value="↓"/> <input type="button" value="X"/> <input type="button" value="ALL"/> </p> <p>Use the arrows to arrange the order of your dialogs</p> <p><input type="button" value="Add New Dialog"/></p> <p><input type="button" value="Close"/></p>	<p> <input type="button" value="↑"/> <input type="button" value="↓"/> <input type="button" value="X"/> <input type="button" value="ALL"/> </p> <p>Use the arrows to arrange the order of your selections</p> <p> <input type="button" value="Save"/> <input type="button" value="Cancel"/> </p>	



Settings – Custom Advanced SOAP Macros



First you need to add a Macro Name. This is at the very top.

Dialogs

How are you feeling today?

↑ ↓ × × ALL

Use the arrows to arrange the order of your dialogs

Add New Dialog

Close

The “Add New Dialog” button will allow you to create more dialogs. Use the arrows to arrange the order of your dialogs.

The “Question Text” will also be shown in the Dialogs list box, so you know which dialog is being referenced.



Settings – Custom Advanced SOAP Macros



Here is a screenshot showing the Dialog(s), Question Text and Response Text.

Dialogs

How are you feeling today?

Add New Dialog

Dialog Deta

Question Text

How are you feeling today?

Response Text

{Name} is feeling *.

Use an asterisk (*) to indicate where the selected items will be placed in the response text. When using the macro, the asterisk will be replaced with the selected items.

Patient Name

Him/Her

him/her

Multiple Selections

He/She

he/she

His/Her

his/her

One Selection

Example 1:
On a scale of 0 to 10, with 0 being no pain at all and 10 being the worst pain imaginable, {He/She} rates {his/her} pain as a *.

Example 2:
{Name} entered our office with a chief complaint of *.



Settings – Custom Advanced SOAP Macros

For each Question you can add selections (e.g. choices to that question).

To add a selection type text in the white box. Then click “Add New”. When you click “Add New” it will add your item to the list box below.

Use the up/down arrows to arrange the order you want your selections to appear.

Use the X buttons to delete one or all selections.

On the next page I will show you that selections are denoted as “*”.

* is the symbol on your keyboard when you press Shift + 8.

Selections

Add New

To add a selection type above and select 'Add New'

Good

Bad

↑ ↓ X ALL X

Use the arrows to arrange the order of your selections



Settings – Custom Advanced SOAP Macros

Now that you have entered your Question Text as well as your selections, it's time to enter your Response Text.

The response text is what will be populated into your SOAP note after using the Macro and making your selection(s). In my example below I typed:
{Name} is feeling *.

{Name} is put there by clicking on the "Patient Name" button. The "He/She" button will allow you to stamp {He/She} which will be replaced with the appropriate response based on the patient's gender.

* refers to your selections. Therefore, if the user selects "Good" and their name is "Chad" then in this example the SOAP Note would say:

Chad is feeling Good.

You will also need to select "Multiple Selections" or "One Selection" depending on how many selections are possible for the given dialog.

Response Text

{Name} is feeling *.

Use an asterisk (*) to indicate where the selected items will be placed in the response text. When using the macro, the asterisk will be replaced with the selected items.

Multiple Selections

One Selection

Example 1:
On a scale of 0 to 10, with 0 being no pain at all and 10 being the worst pain imaginable, {He/She} rates {his/her} pain as a *.

Example 2:
{Name} entered our office with a chief complaint of *.



Settings – Pin SOAP Macros

This app allows you to arrange your SOAP Note Macro grids for Subjective, Objective, Assessment, Plan and Discharge.

Items in the right box “Pinned Macros” will appear on your SOAP Macros grid. Use the up and down arrows to arrange the Macros.

Pin SOAP Macros CPT copyright 2013 American Medical Association. All rights reserved.

Subjective Objective Assessment Plan Discharge

Unpinned Macros

Medical Exam

Pinned Macros

- Dermatomes
- Activities of Daily Living Affected
- Outcome Assessment
- Leveled Exams (E/M)- History Section
- Personal Health History
- Review of Systems
- New Patient Family Health History
- Daily Habits
- Auto Accident (Form)
- Personal Injury (Form)
- Asymptomatic Wellness Visit
- Improved Since Last Visit
- Same Since Last Visit
- Worse Since Last Visit
- Date Stamp
- Test
- test
- TestMacro2

Pin All →
Pin →
← Unpin
← Unpin All

Close
Dock
Copy From User...
Save

↑
↓



Settings – Pin SOAP Macros - Export

Yes, you can share your SOAP Macros with your colleagues or import their Macros (if they share then with you) into your ChiroSpring. Pretty awesome!

Use the Export Macros and Import Macros buttons at the bottom of the Pin Macros app to do this.

Pin SOAP Macros CPT copyright 2013 American Medical Association. All rights reserved.

Subjective Objective Assessment Plan Discharge

Unpinned Macros

- Activities of Daily Living Affected
- Additional ADL's Affected
- Asymptomatic Wellness Visit
- Auto Accident (Form)
- Complaints
- Daily Habits
- Dermatomes
- Follow Up Visit Response to Care
- History of Present Illness/New Injury (Mcare)
- Improved Since Last Visit
- Leveled Exams (E/M)- History Section
- Muscular Subjective - Lower Extremity/Lumbar/Sacrum/Pelvis
- Muscular Subjective - Upper Extremity/Cervical/Thoracic Spine
- MyFolder
- MyTestFolder
- New Cash Patient
- New Patient Family Health History
- New Patient Intake (Form)

Pin All →

Pin →

← Unpin

← Unpin All

Copy From User... **Export Macros File** Import Macro File

Close Dock Save

↑ ↓

To import a Macro, click the “Import Macro File” button. You can only import macros that have been generate from ChiroSpring (e.g. this is not cross compatible with other EHR systems).

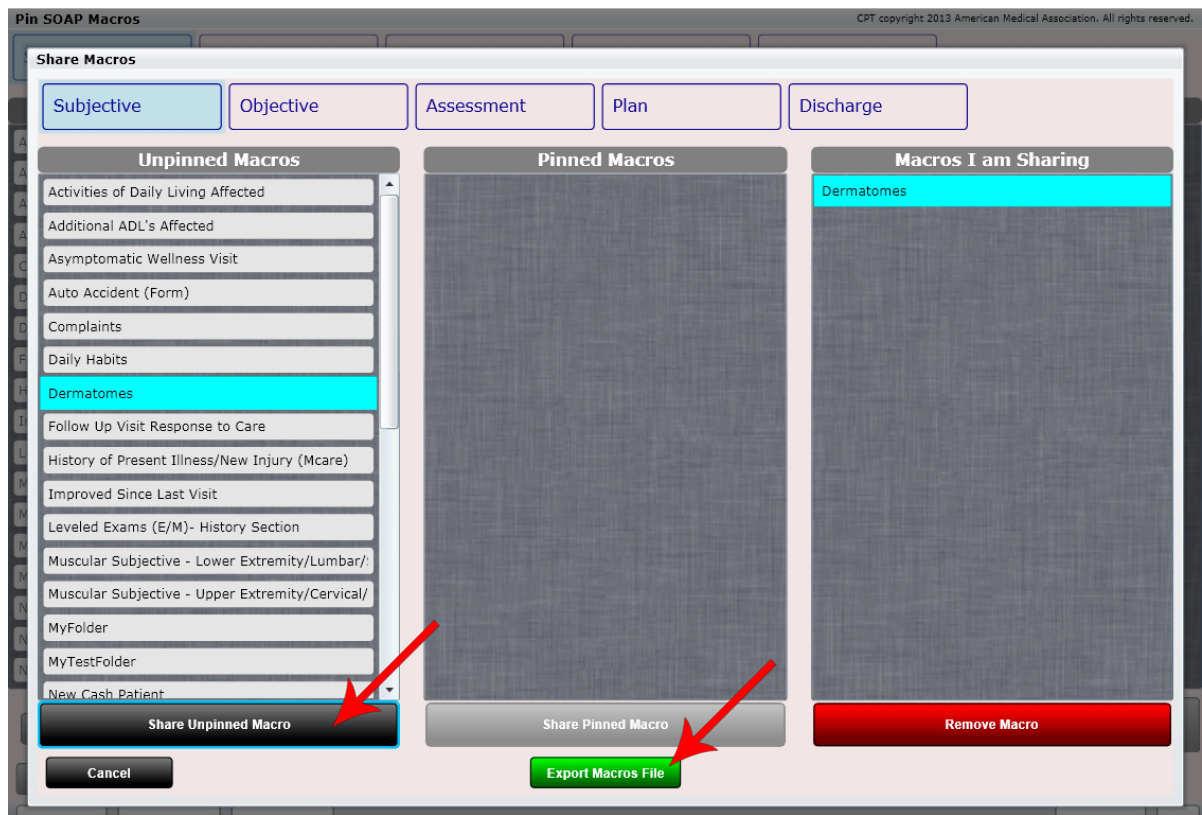


Settings – Share SOAP Macros

The Share Macros dialog (accessed in the Pin SOAP Macros app by clicking “Export Macros”) is pretty simple. There are list boxes for your pinned and unpinned Macros for S, O, A, P and Discharge. Select the macro you want to share, then click the “Share Macro” button at the bottom of the list box.

This will move the macro to the far-right list box: “Macros I am Sharing”.

Once you have all of your macros selected that you want to share (yes you can select as many as you want) then click the “Export Macros File” button at the bottom. This will generate the file to which you can share with a colleague for importing into their ChiroSpring.





Settings – Nest SOAP Macros



Nesting SOAP Macros essentially means putting Macros you created INTO FOLDERS.

Nest Macros CPT copyright 2013 American Medical Association. All rights reserved.

Subjective Objective Assessment Plan Discharge

Un-Nested Objective Custom Macros ?	Folders ?	Nested Macros/Folders ?
Pre Category III		
Category I RSL		
Category I LSL		
Category II RSL		
Category II LSL		
Category III		
Exam Findings Category I		
Exam Findings Category II		
Exam Findings Category III		
FRONTAL BRAIN		
TOP OF HEAD		
CROWN		
CEREBELLUM		
PITUITARY		

Nest Macro into Selected Folder →

Edit Macro New Basic New Advanced Add Folder Edit Folder Delete Folder Move Up Move Down Edit Macro Delete

Close Dock Save

List order is reflected in Edit SOAP Free Text



Settings – Nest SOAP Macros



First click "Add Folder". Give your folder a name. I am calling mine "Folder 1".

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Subjective Objective Assessment Plan Discharge

Un-Nested Objective Custom Macros ? Folders ? Nested Macros/Folders ?

Pre Category III
Category I RSL
Category I LSL
Category II RSL
Category II LSL
Category III
Exam Findings Category I
Exam Findings Category II
Exam Findings Category III
FRONTAL BRAIN
TOP OF HEAD
CROWN
CEREBELLUM
PITUITARY

Folder

Folder 1

You are adding or editing a folder. You can nest macros or other folders inside this folder.

To create a subfolder, select (highlight) your folder and then click the "Add Folder" button below the Folders list box.

NOTE: Only main parent folders (far left folders) will be available in the "Pin SOAP Macros" app. Ensure you save changes and completely EXIT from ChiroSpring to pin your nested macros. Exiting is necessary to refresh the database with your changes.

Cancel Save & Close

Nest Macro into Selected Folder →

Edit Macro New Basic New Advanced Add Folder Edit Folder Delete Folder Move Up Move Down Edit Macro Delete

Close Dock Save

List order is reflected in Edit SOAP Free Text



Settings – Nest SOAP Macros



Next select the macro you want nested inside of the folder and click the “Nest Macro Into Selected Folder button”.

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Subjective Objective Assessment Plan Discharge

Un-Nested Objective Custom Macros ?	Folders ?	Nested Macros/Folders ?
<ul style="list-style-type: none"> Pre Category III Category I RSL Category I LSL Category II RSL Exam Findings Category I Exam Findings Category II Exam Findings Category III FRONTAL BRAIN CEREBELLUM PITUITARY 	<ul style="list-style-type: none"> Folder 1 <ul style="list-style-type: none"> Category II LSL Category III TOP OF HEAD CROWN 	<ul style="list-style-type: none"> Category II LSL Category III TOP OF HEAD CROWN

Nest Macro into Selected Folder →

Edit Macro New Basic New Advanced Add Folder Edit Folder Delete Folder Move Up Move Down Edit Macro Delete

Close Dock Save

List order is reflected in Edit SOAP Free Text



Settings – Nest SOAP Macros



You can create multiple folders and even folders within folders (as I have shown below). The selected folder will show its contents in the far-right pane (Nested Macros/Folders). Here you can move up or move down the macro or folder to arrange them in the order you want.

After you have nested your Macros, you can then use the Pin SOAP Macros app to add them to your Edit SOAP Macro grid.

The screenshot displays two side-by-side panels. The left panel, titled 'Folders', shows a hierarchical tree structure:

- Folder 1
 - Category II LSL
 - Category III
 - TOP OF HEAD
 - CROWN
 - Folder 2
 - CEREBELLUM
 - PITUITARY
 - Folder 3
 - Exam Findings Category III
 - FRONTAL BRAIN

The right panel, titled 'Nested Macros/Folders', shows a list of items: CEREBELLUM, PITUITARY, and Folder 3. A red arrow points to the 'Folder 3' entry, which is highlighted in blue. At the bottom of the interface, there are several control buttons: 'Add Folder', 'Edit Folder', 'Delete Folder', 'Move Up', 'Move Down', 'Edit Macro', and 'Delete'.



Settings – Labs

The Labs app allows you to create, edit or delete labs from your master list. You can also set their minimum value and maximum value. Setting min and max values is a good idea. This way when you enter a lab result for a patient high values are displayed in red and low values are displayed in blue.

Labs CPT copyright 2013 American Medical Association. All rights reserved.

Lab Names	
Albumin	1751-7
Alkaline phosphatase (Adults > 61 yc)	6768-6
Alkaline phosphatase (Adults: 25-60)	6768-6
ALT - Alanine aminotransferase (Fem)	1742-6
ALT - Alanine aminotransferase (Male)	1742-6
Aluminum	5574-9
Ammonia	16362-6
Amylase	1798-8
Anion Gap	33037-3
AST - Aspartate aminotransferase	1920-8
AST - Aspartate aminotransferase (Fem)	1920-8
AST - Aspartate aminotransferase (Male)	1920-8

Details

Lab Name
Albumin

Long Common Name
Albumin [Mass/volume] in Serum or Plasma

LOINC Code
1751-7

Code (CPT®)
▼

Min (Normal Range)
3.200

Max (Normal Range)
5.000

Unit
g/dL

Description

CloseAdd NewDeleteCancelSave



Settings – Vaccines

The Vaccine's app allows you to create, edit or delete vaccines.

Use of a CVX code is necessary if you want to properly track correct vaccine data (e.g. in the event you perform a transition of care summary for your patient to another practice).

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Vaccines

Vaccines
Adenovirus, Type 4 54
Adenovirus, Type 7 55
Adenovirus, Types 4 and 7 143
Adenovirus, unspecified formulation 82
Anthrax 24
AS03 Adjuvant 801
BCG 19
Botulinum Antitoxin 27
Cholera 26
CMVIG 29
Dengue Fever 56
Diphtheria Antitoxin

Close

Details

Vaccine Short Description
Adenovirus, Type 4

CVX Code
54

Description

Add New Delete Cancel Save



Settings – Images

The Images app allows you to customize the following lists:

- Image Regions
- Image Types
- Image Views

These sections are available in the Dashboard/Images tile.



Image Regions



Image Types



Image Views

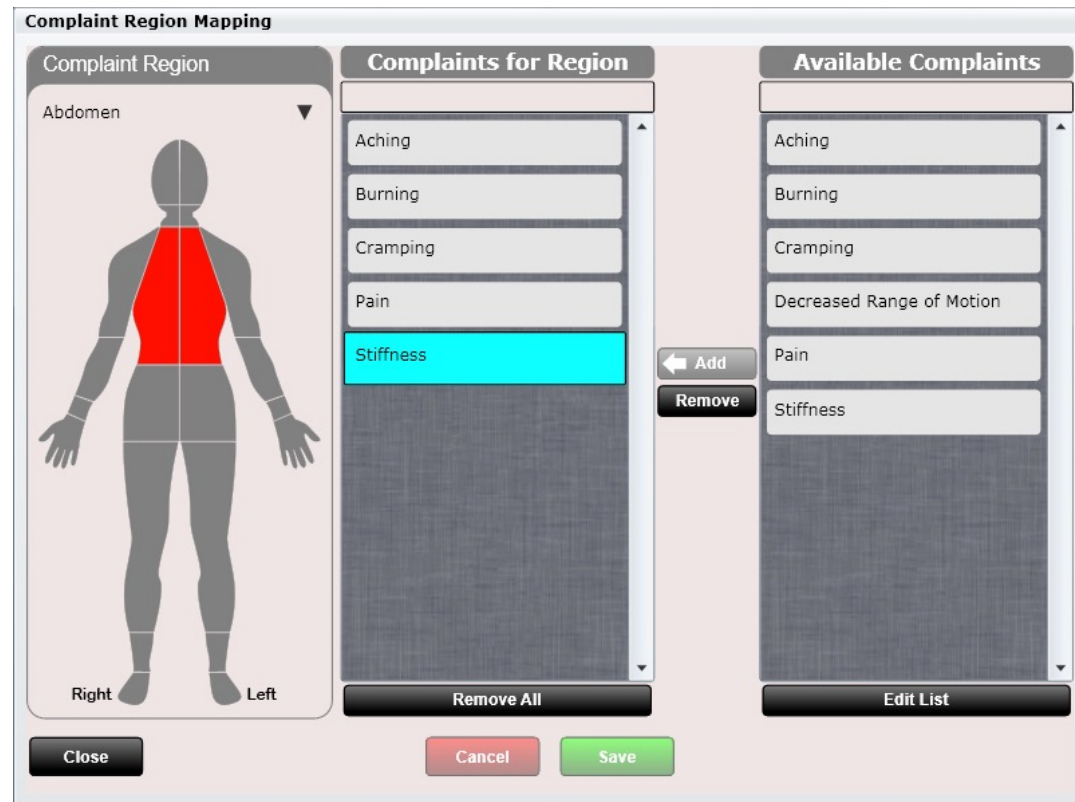
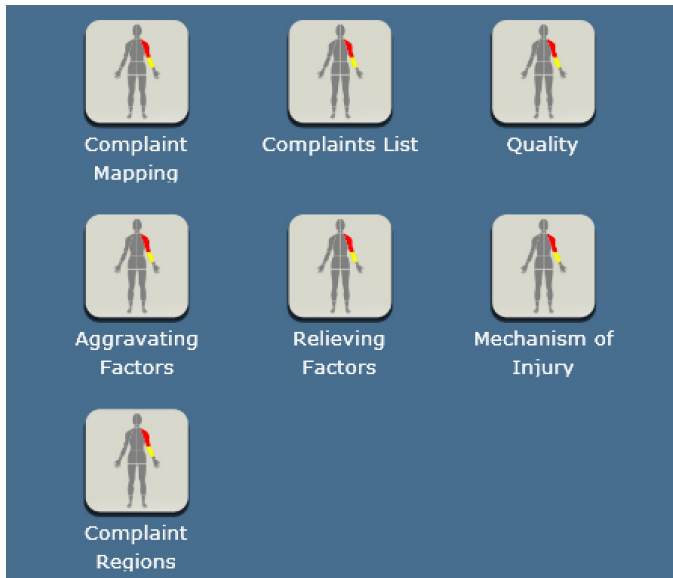


Settings – Complaints

The Complaints app allows you to customize the “Complaints Tab” located inside the SOAP Note.

Shown below is “Mapping”. Here you select a body region from the “Complaint Region” drop down. There are two list boxes. The first is the complaints list box. Here you can add any possible complaint that exists. Then move a complaint to the “Region Complaints” to associate that complaint with that body region.

Here you can edit:
Complaint Mapping, Complaints List, Quality, Aggravating Factors, Relieving Factors, Mechanism of Injury and Severity Scale.





Settings – Acupuncture

Acupuncture is available within the Edit SOAP objective tab. Here you can customize meridians as well as points for each meridian.

You can also customize the color of the meridian (for easy identification).

Use the up/down arrows to arrange the order of both the meridians and points.

Acupuncture

Meridians	Points
<input type="checkbox"/> Lung	Lu 1
<input type="checkbox"/> Large Intestine	Lu 2
<input type="checkbox"/> Stomach	Lu 3
<input type="checkbox"/> Spleen	Lu 4
<input type="checkbox"/> Heart	Lu 5
<input type="checkbox"/> Small Intestine	Lu 6
<input type="checkbox"/> Bladder	Lu 7
<input type="checkbox"/> Kidney	Lu 8
<input type="checkbox"/> Pericardium	Lu 9
<input type="checkbox"/> Triple Warmer	Lu 10
<input type="checkbox"/> Gall Bladder	Lu 11
<input type="checkbox"/> Liver	Sishencong
<input type="checkbox"/> Governing Vessel	Yintang
<input type="checkbox"/> Conception Vessel	Yuyao
	Qiuhou
	Taiyang
	Erjian
	Bitong

Meridian Controls: [Up Arrow] [Down Arrow] [Add Meridian] [Edit Meridian] [Delete Meridian]

Point Controls: [Up Arrow] [Down Arrow] [Add Point] [Edit Point] [Delete Point]

[Close] [Save]



Settings – ROS

The Review of Systems app allows you to customize review of system categories as well as review of system items within that category.

Use the “Make this Gender Specific” option to determine if you want a category to only show for patients regarding their gender.

Review of Systems exists in Edit SOAP in the ROS tab and inside the patient kiosk on the Review of Systems tab.

ROS

Cardiovascular/Respiratory

Nose

Eyes

Ears

Head/Neck

Gastrointestinal

Urinary

Throat/Mouth

Endocrine

Musculoskeletal

Vascular/Hematologic

Neurologic

Psychiatric

Females Only

Males Only

Test - Male

Test - Female

Name
Cardiovascular/Respiratory

Make this Gender Specific?
No

Close

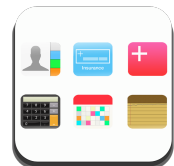
Add Items to Selected Category

Add ROS Category

Delete

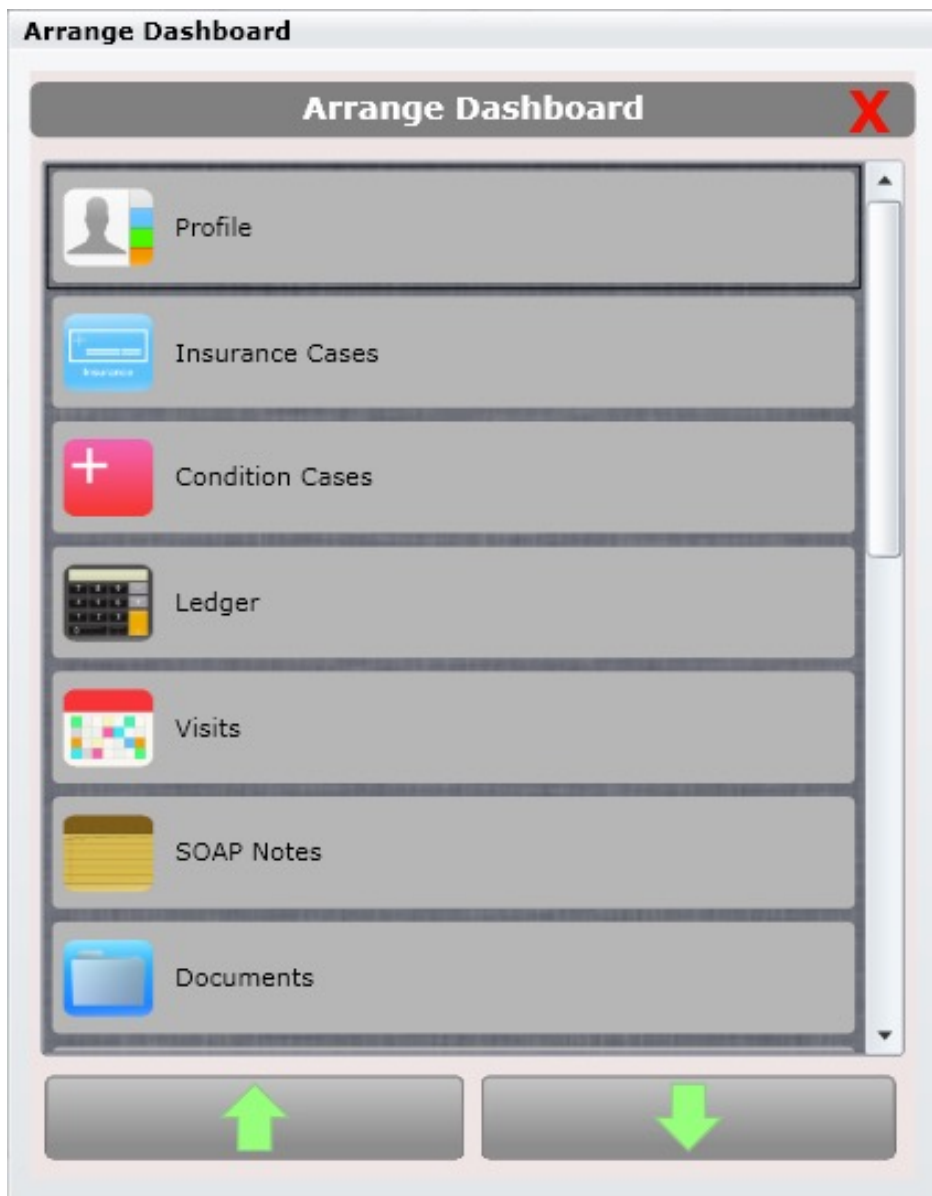
Cancel

Save



Settings – Arrange Dashboard

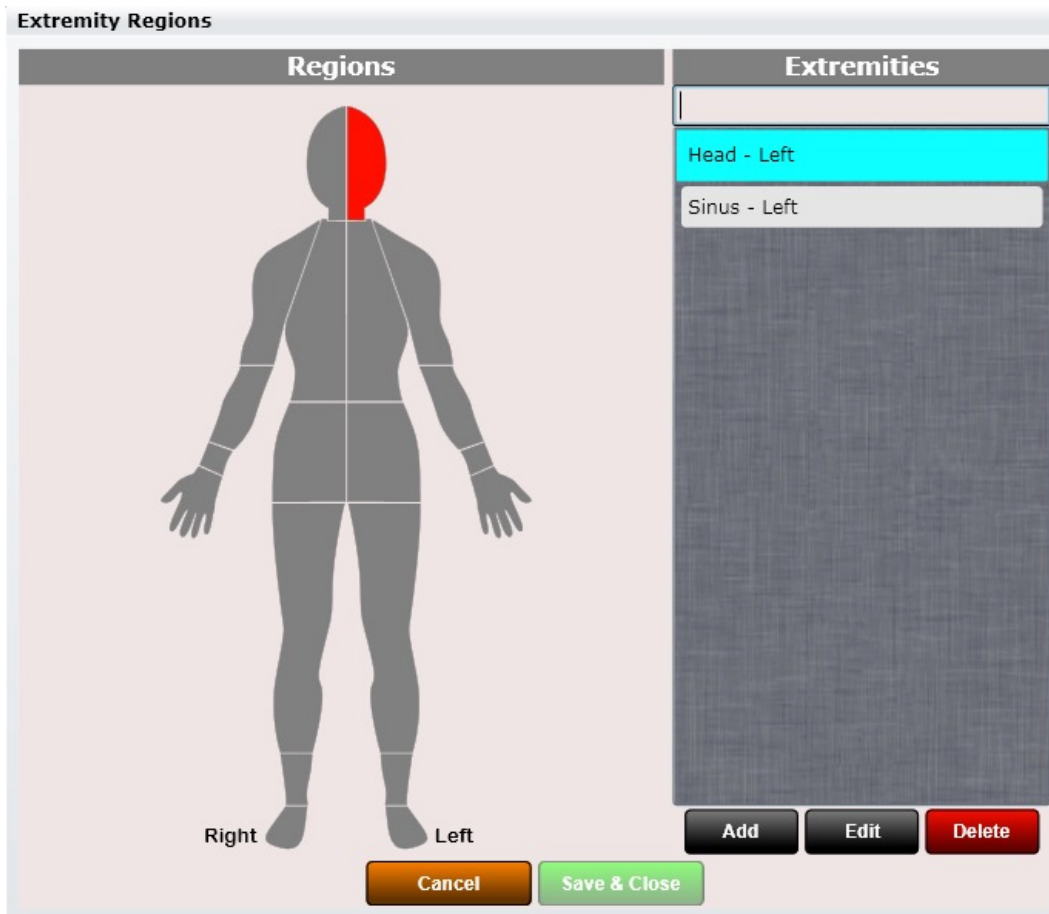
Use the “Arrange Dashboard” app to arrange your patient dashboard. Simply move items up or down. Each user can have their own dashboard arrangement.



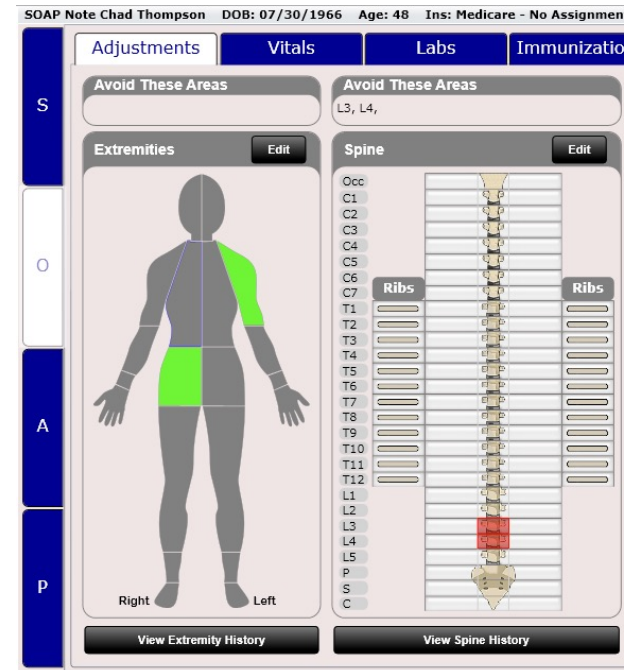


Settings – Extremities

Using the Extremity Regions app you can add, edit or delete body regions that will be used in the SOAP Note Adjustments Tab.



Shown below “Extremities” in Edit SOAP Adjustments Tab.





Settings – Extremities

Using the Extremity Listings app you can add, edit or delete extremity listings that will be used in the extremities section of the SOAP Note's Adjustment Tab. You can create adjusting techniques that each have their own listings.

Using the “Also Adjust These Areas” section you can have a selected listing auto populate another listing(s) when selected during the adjustment.

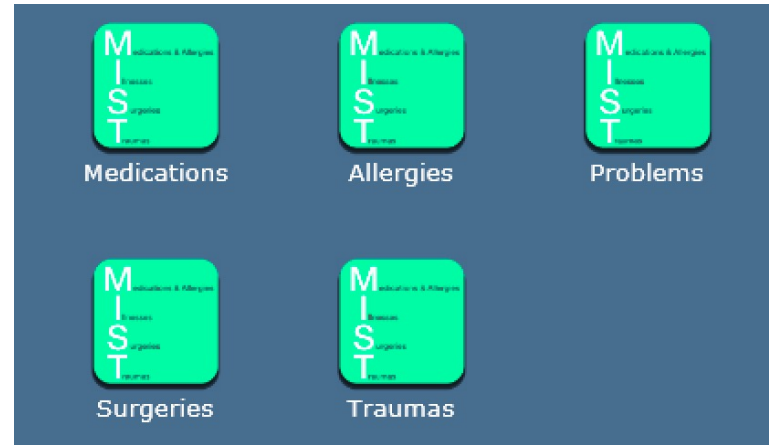
Note, 'Also Adjust' areas cannot be removed in “Edit SOAP” unless the main listing is removed. Consider duplicating this technique and not including “Also Adjust” areas for finer control.

The screenshot displays the 'Extremity Listings' application interface. It is divided into two main panels: 'Region' and 'Technique'.
The 'Region' panel on the left shows a human silhouette with the right shoulder highlighted in red. The dropdown menu is set to 'Acromioclavicular Joint - Left'.
The 'Technique' panel on the right has an 'Activator' dropdown and an 'Edit Technique' button. It features two columns: 'Extremity Region Listings' and 'When This Region is Selected Also Adjust These Regions'. The 'Extremity Region Listings' column contains a list with 'Clavicle-Posterior Superior-Seated' highlighted in cyan. The 'When This Region is Selected Also Adjust These Regions' column shows a human silhouette with the right shoulder highlighted in red and a list with 'Listing Name Here' highlighted in cyan. A red warning message is present: "'Also Adjust' areas cannot be removed in 'Edit SOAP' unless the MAIN listing is removed. Consider duplicating this technique and not including 'Also Adjust' areas for finer control.' Below this list are 'Edit' and 'Remove' buttons.
At the bottom of the interface are 'Close', 'Cancel', and 'Save' buttons. A copyright notice 'CPT copyright 2013 American Medical Association. All rights reserved.' is visible in the top right corner.



Settings – MIST

Add, Edit or Delete your custom Medications, Allergies, Problems, Surgeries and Traumas that will be used in the SOAP Note's MIST Tab.



Shown below is the Edit SOAP Note “MIST Tab”.

SOAP Note Mike Bishop DOB: 04/12/1994 Age: 23 Ins: Blue Cross/Medicaid CPT copyright: 2013 American Medical Association. All rights reserved. Visit: 04/26/2017 9:30 AM

Intro Condition **MIST** Complaint ROS Pt. Intake Free Text

This data is not per visit. Any edits will affect all future and past visits.

Medications	Allergies	Problems	Surgeries	Traumas
<input checked="" type="checkbox"/> Show Active Only	<input checked="" type="checkbox"/> Show Active Only	<input checked="" type="checkbox"/> Show Active Only		
None Currently Prescribed	No Known Drug Allergies	No Known Problems	No History of Surgeries	No History of Traumas
butalbital 50 MG / aspirin 650 MG Oral Tablet 197429 (RxNorm) Last Reviewed:	No known drug allergies 409137002 (SNOMED) Last Reviewed:	Kidney disease (disorder) 90708001 (SNOMED) Last Reviewed:	No known surgeries Last Reviewed: Apr 30, 2017	
Edit Master Medications List	Edit Master Allergies List	Edit Master Problems List	Edit Master Surgeries List	Edit Master Traumas List
Edit Delete	Edit Delete	Edit Delete	Edit Delete	Edit Delete
Document Medications	Reviewed Today	Reviewed Today	Reviewed Today	Reviewed Today

Close Dock Save **Save & Sign** Back Next Dashboard



Settings – How Heard About

Add, Edit or Delete custom “How Heard About” options that can be used to track how patients heard about you.

In the patient profile you can select the “how heard about” option.

The Practice Analysis Report includes a “How Heard About” section to help track how patients are hearing about your practice.



How Heard About

	Name
Drive by	Drive by
Magazine ad	Description
News and Views	
Referral	

Close Add New Delete Cancel Save

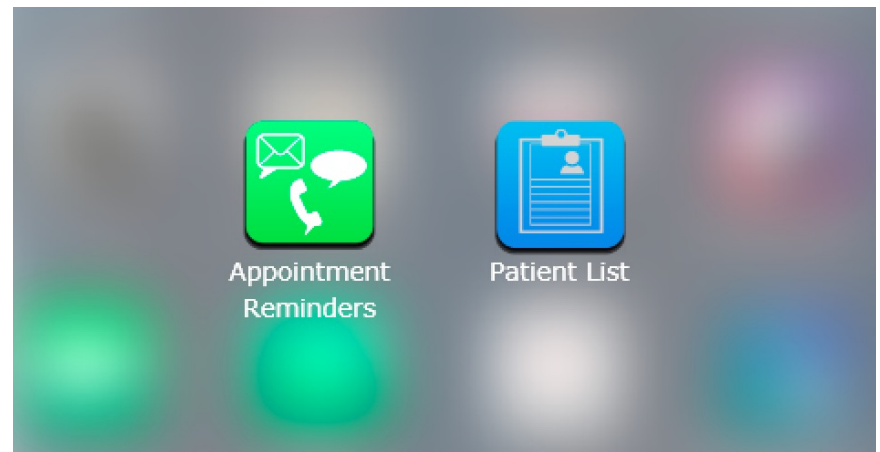


Settings – Patient Messaging

This app contains two messaging apps. These apps are:

- Appointment Reminders
 - Use this app to setup appointment Reminders for your practice. You will need to create an account with www.remindercall.com and enter the information within this app into www.remindercall.com.
- Patient List
 - Use this app to setup messaging for your practice for use with the Patient List app. Each patient has a “Message Contact” dropdown in the patient profile that will determine the patient’s preferred contact method when contacting the patient through the Patient List ap. You will need to create an account with www.remindercall.com and enter the information within this app into www.remindercall.com.

The next few pages will show you how to setup appointment Reminders. You will not have to do anything to setup Patient List messages as setting up appointment Reminders takes care of this.





Settings – Patient Messaging

Appointment Reminders

Two options are available through integrations. Pricing is through each individual vendor.

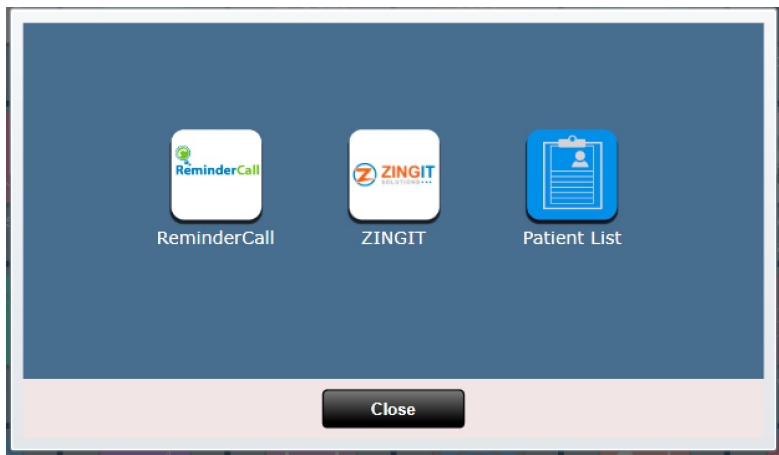
- **Remindercall.com**
 - Provides appointment reminders in the form of voice/text/email
 - Patients can confirm their appointment
 - Confirmation status is displayed on the ChiroSpring Front Desk with a black dot next to “Reminder” for a given patient
- **Zingit**
 - This is a more robust solution. Zingit provides reminders as well as many other services. This option is best for practices who want patient engagement, automatic reactivation, ad-campaigns and automatic 5-star Google Reviews.



Settings – Patient Messaging

Get Started

Navigate to Settings/Patient Messaging and select your preferred option. A dialog will appear with contact information.

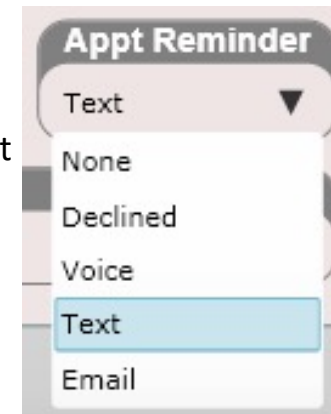




Settings – Remindercall

How to setup Appointment Reminders with Remindercall:

- ChiroSpring supports appointment reminders through the www.remindercall.com website. This is a third-party service with its own fees separate from ChiroSpring. Please visit their website to learn about the services they offer and to setup an account. The information you need to setup an account is shown below.
- Note, you will first have to create a username and password on the remindercall.com website. After you have created a username and password click "Account". Then click "ChiroSpring Settings" and copy and paste the "ChiroSpring Customer ID" and "ChiroSpring Password" into their respective fields on the www.remindercall.com website.
- Here is an informative video explaining the benefits of adding appointment reminders to ChiroSpring.
<https://youtu.be/sLtjAZHsmjI>
- To setup individual patient appointment reminder preferences go to the Patient Profile and use the "appt Reminder" dropdown. This dropdown is also located in the "Check-in" dialog.





Settings – Appointment Reminders

Use the 'Copy' button to copy your ChiroSpring Customer ID and ChiroSpring Password. These will be pasted into Remindercall.com when setting up your account.

Appointment Reminders

ChiroSpring supports appointment reminders through the www.remindercall.com website. This is a third-party service with its own fees separate from ChiroSpring. Please visit their website to learn about the services they offer and to setup an account. The information you need to setup an account is shown below.

Note, you will first have to create a username and password on the remindercall.com website. After you have created a username and password click "Account". Then click "ChiroSpring Settings" and copy and paste the "ChiroSpring Customer ID" and "ChiroSpring Password" into their respective fields on the www.remindercall.com website.

[Here](#) is an informative video explaining the benefits of adding appointment reminders to ChiroSpring.

To setup individual patient appointment reminder preferences go to the Patient Profile in ChiroSpring and use the "Appt Reminder" dropdown.

ChiroSpring Customer ID:

ChiroSpring Password:

These log-in credentials are the same for both appointment reminders and patient lists but are provided in a separate dialog for your convenience.

[Acceptable Use Policy](#)

QUESTIONS relating to setting up your Appointment Reminders account should be directed to Remindercall.



Settings – Appointment Reminders



DASHBOARD

DO NOT CALL

CAMPAIGNS

MAKE CALLS

SEND TEXTS

MY AUDIO

ACCOUNT

SUPPORT

Account Settings / ChiroSpring Preferences

Bold options are not set for your account, and are not required to be set.

Red items are not set, and are required. If left un-set, problems may occur.

ChiroSpring Preferences	
Auto-queue Calls from ChiroSpring Schedule:	<input checked="" type="radio"/> True <input type="radio"/> False
Days Before Appointment To Make Call:	1
Call Days: <i>Days of the week on which you schedule appointments.</i>	<input type="checkbox"/> Sunday <input checked="" type="checkbox"/> Monday <input checked="" type="checkbox"/> Tuesday <input checked="" type="checkbox"/> Wednesday <input checked="" type="checkbox"/> Thursday <input checked="" type="checkbox"/> Friday <input checked="" type="checkbox"/> Saturday
Queue Time: <i>Time of day to retrieve calls from EZClaim schedule.</i>	9:00 AM
Call Time: <i>Time of day to queue calls for delivery.</i>	10:00 AM
ChiroSpring Customer ID:	67363947890737
ChiroSpring Password:	.....
Avoid Calling on Off Days: <i>For days checked under "Active Days", the system will queue calls normally sent on an off day on the first available day before it.</i>	<input checked="" type="radio"/> True <input type="radio"/> False



Settings – Appointment Reminders

Benefits of Using appointment Reminders

The system saves money and increases revenue:

- By reducing no-shows that can cost thousands of dollars a month.
- By costing much less than paying the staff to make the calls manually.
- By freeing up the staff to work on other less tedious tasks.

The system does a better job than the staff can:

- By removing human error.
- By sending reminders even when staff is out or sick.
- By sending text messages.
- By always projecting a professional image.
- By consistently sending reminders at the same time each day.

The system benefits patients:

- Patients do not forget appointments.
- Patients confirm/cancel automatically without having to call and be put on hold.
- Patients can choose their reminder type (call, text message or email).

Additional benefits:

- The system manages an opt-out/do-not-call list for automated compliance with regulations.
- The system avoids calling one family several times if siblings have appointments on same day.
- The system does collection calls.
- The system announces emergency closures (free of charge)



Settings – Appointment Reminders

Additional Information

- A reminder call (30 sec) or text message costs just .09, if you see 10 patients a day, that's less than \$1 per day.
- There's no contract and you can cancel at any time.
- You set it up once and then it runs automatically.
- You can add your own voice to the messages to give them a personal touch.
- You can play back any call you've sent to check for quality.
- Patients can confirm their appointment with a key press, text reply or by email hyperlink.



Settings – Appointment Reminders

Additional Information

Customizable Call System:

Customers get to choose from several voices. They can add their own voice for a personal touch. They can create appointment reminders, collection calls, invitations, alerts or announcements, the possibilities are endless!

They get to use their caller I.D. so the patient knows who's calling.

They can program different key presses for patients to confirm, be transferred, etc.

2-Way Text Messages

Patient responses can go to the customer's email.

Live confirmations give them immediate feedback.

If they accidentally send a text message to a land line, a voice reminder can be sent instead.

Customers can have a true 2-way conversation with patients via text message.

Built-in Compliance

System is HIPAA compliant, PCI compliant and encrypted.

Built-in do-not-contact and opt-out lists ensure that they comply with laws and regulations.

System logs can be used for Meaningful Use audits.

Advanced Management Tools

Customer gets to decide what days and times they would like their reminders to be delivered.

Live statistics show all calls, text messages and emails in real time.

Customers can play back any call for quality control... at no extra charge!



Settings – Server Time

ChiroSpring has adopted the UTC time standard (Coordinated Universal Time) for our Server Time. This time is used to ensure several areas of the software have accurate time-stamps. There is nothing for you to do, or worry about with this app. However, we make the UTC time readily available for your reference.

Server Time

5:23:18 AM

Friday, October 02, 2015

Coordinated Universal Time (UTC)

Close



Settings – Clinical Decision Support

Clinical Decision Support allows you to create “Rules” based on “Criteria”. For example, you could create a rule to trigger for patients who do not have documentation of medications on their profile and have this rule trigger at “Check-in”. The possibilities are endless on what you can do with this app.

We have created many rules for you that should be turned to the “Active” state if you are practicing Meaningful Use. This is because our rules help ensure you are providing correct documentation on EHR required elements such as gathering smoking status, entering medications, gathering family history, etc. Our CDS rules also help ensure you are performing correct actions for the 9 Clinical Quality Measures in ChiroSpring. For example, one of our 9 CQMs is to document the last date your patient had a pneumococcal vaccine. The use of a CDS rule will let you know if your patient is missing documentation of the pneumococcal vaccine for patients 65 years and older.



Settings – Clinical Decision Support



Rule Definition

Active

Yes ▼

Title

This title will be shown at the top of the triggered CDS Rule

Description

Select the "Event" which is WHERE the CDS alert will appear. You can select one or multiple.

Events (This is where the CDS alert will be displayed)

- New Appointment
- Dashboard
- Edit SOAP
- Save SOAP
- Check-In
- Awaiting Checkout
- Check-Out

Criteria Joining Operator

URL/Citation (Displayed in Alert Dialog)

An optional field... this box is displayed at the bottom of the triggered

Criteria

Name	Criteria Type	Delete	Edit
<p>The joining operator joins your created Criteria. Select either "And" or "Or".</p> <p>Now create as many "Rules" as you want based on all of these different criteria types.</p>			

Criteria Type

- Problems
- Risks, Assessments & Interventions
- Products
- Vital Signs
- Demographics
- Allergies
- Lab Tests
- Medications
- Immunizations
- Diagnosis
- Communication Preference
- Nurse
- Non-Provider

Message (This text will be displayed when the CDS rule is triggered)

This is the alert message you will see when the CDS rule is triggered.

The "Who Can See This Rule" section allows you to create rules that are only triggered for specific user types.



Settings – Clinical Decision Support



Clinical Decision Support

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Search Rules

Blood Pressure Has Not Been Recorded for Your Patient
Blood pressure not recorded

CMS122: Diabetes: Hemoglobin A1c Poor Control
Diabetes: Diabetic with Hemoglobin A1c Poor Control

CMS122: Diabetes: Hemoglobin A1c Poor Control
Diabetes: Diabetic with Hemoglobin A1c Poor Control

CMS122: Diabetes: Hemoglobin A1c Poor Control
Diabetes: Diabetic with Hemoglobin A1c Poor Control

CMS122: Diabetes: Hemoglobin A1c Poor Control
Diabetes: Diabetic with Hemoglobin A1c Poor Control

CMS127: Pneumococcal Immunization Status for Older Adults
Pneumonia Vaccination Status for Older Adults

CMS138: Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention

Rule Definition

Alert Criteria

Resource Information

Patient Education

Active

No ▼

Active History

Title

CMS68: Documentation of Current Medications in the Medical Record

Description

Documentation of Current Medications in the Medical Record

Events (This is where the CDS alert will be displayed)

New Appointment Dashboard Edit SOAP Save SOAP Check-In Awaiting Checkout Check-Out CPOE

Criteria Joining Operator

AND ▼

Criteria

Name	Criteria Type	Delete	Edit
Medications Not Entered	Medications	<input type="button" value="Delete"/>	<input type="button" value="Edit"/>

Criteria Type

▼

Message (This text will be displayed when the CDS rule is triggered)

Your patient does not have documentation of a medication on file or an indication of "None Currently Prescribed". Consider updating your patient's medication status as using the MIST tab in Edit SOAP or the MIST tile in Dashboard. This is an EHR requirement.

You should use the Med Rec tile in Dashboard (to document at least once for this patient) to also give yourself credit for the medication reconciliation automated measure requirement.

Who can see this rule?

Active	Provider Type
<input checked="" type="checkbox"/>	Chiropractor
<input type="checkbox"/>	Massage Therapist
<input type="checkbox"/>	Physical Therapist
<input type="checkbox"/>	Acupuncturist
<input type="checkbox"/>	Medical Doctor/Nurse Practitioner
<input type="checkbox"/>	Nurse
<input checked="" type="checkbox"/>	Non-Provider



Settings – Clinical Decision Support

If you wish to attach an educational PDF to the CDS rule, select the Patient Education tab. Then upload a PDF. When the CDS rule triggers you will then be able to click on an INFO button in the alert to view this PDF document.

Rule Definition

- Alert Criteria
- Resource Information
- Patient Education**

Add Document **View Document** **Remove Document**



Settings – Clinical Decision Support



Below is an example of a CDS rule that has triggered at the patient dashboard.

Dashboard - John Abraham ABRJ0000 DOB: 10/10/2000 Age: 16 INS: Cash CPT copyright 2013 American Medical Association. All rights reserved.

CDS AlertInformation

Rules:
1 of 1

Title:
Smoking Status Has Not Been Recorded

Description:
Smoking Status not recorded

Message:
It is an EHR requirement to record smoking status on patients age 13 years and older. Consider recording your patient's smoking status in the Dashboard/Health History tile.

(NOTE: criteria have changed and this is now optional and not required)

PreviousOkNext

Close Dock



Settings – Evaluation

Here you can customize muscles, body regions and listings that all work in conjunction with the Edit SOAP Evaluation tab.

The image shows a grid of settings options for evaluation, each represented by a pink rounded square with the word "EVAL" in white, and a label below it. The options are:

- Deep Tendon Reflexes
- Muscle Strength Analysis
- Muscle Tone Regions
- Muscle Tone Listings
- Range of Motion Attributes
- Orthopedic Tests
- Sensory Tests
- Special Tests



Settings – Treatment

Here you can customize muscles, and body regions that all work in conjunction with the Edit SOAP Treatment tab.

ART Treatment	Laser Treatment	AIS Treatment	Manual Therapy	Relaxation Massage	Traction
Diathermy	UltraSound	Muscle Stimulation	Interferential Therapy	Kinesiology Taping	Laser Therapy
Infrared	IASTM	Heat Therapy	Cryotherapy	Trigger Point Therapy	Graston IASTM
Therapeutic Exercises	Dry Needling				

Close



Settings – Goals

The Goals app allows you to create Goals which are selectable in the Edit SOAP “Care Plan” Tab.

Goals

Goal	Details
Preventative Health 285636001	Goal Text Preventative Health
Weight Loss 289169006	Description
Asthma Management 406162001	SNOMED CT Code 285636001
Smoking Cessation 22532300	
Increase Range of Motion	

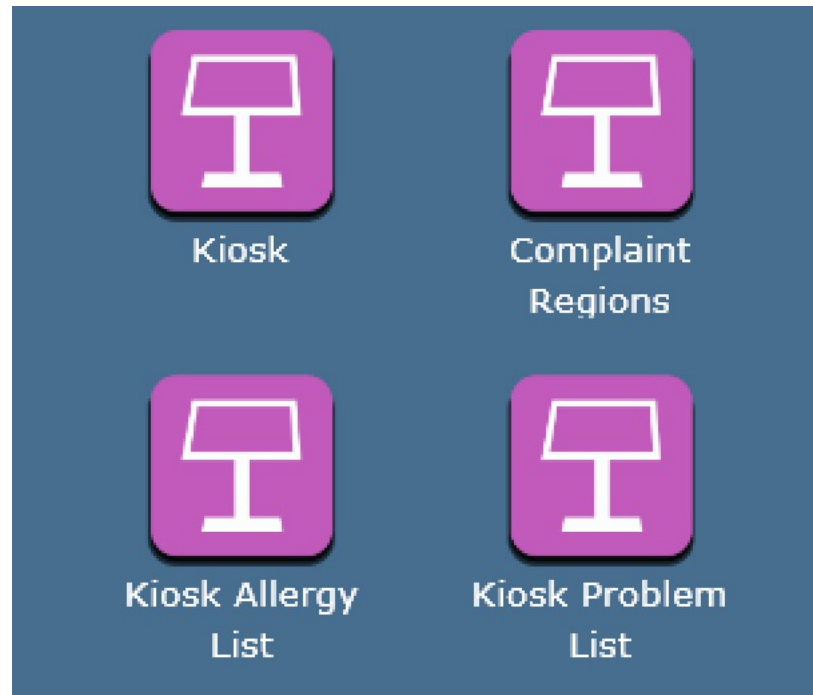
Close Add New Delete Cancel Save



Settings – Kiosk

The Kiosk app will allow you to customize which kiosk sections you want shown, create documents for acknowledgement as well as write your own intake questions. Using the kiosk is a MAJOR time-saver!

We have also created individual apps to customize the allergies and problems shown at the kiosk as well as an app to customize which body regions are shown at the kiosk for the Complaints section.





Settings – Kiosk



Here we have the different Kiosk sections. Determine which providers to show each section for or if it is required.

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Kiosk Sections | **Acknowledgements** | **Additional Intake Questions**

Kiosk Sections

- Welcome
- Personal Information
- Enrollment
- Demographics
- Emergency Contact
- Employment Information
- Family Medical History
- Smoking Status
- Social History
- Complaints
- Medications
- Allergies
- Problems
- Review of Systems

Details

Section Name

Welcome

Welcome to Spinal Care Chiropractic. We are here to help you get back to optimal health!

Provider Name	Status for this Section	Make Required?
Dr. Brian	Show for all visits ▼	Yes ▼
Chrissy DC	Show for all visits ▼	No ▼
Dan	Show for all visits ▼	No ▼
Ima Therapist	Show for all visits ▼	No ▼
Miranda Hansen	Show for all visits ▼	No ▼
Vishal	Show for all visits ▼	No ▼
test chiropractor	Show for all visits ▼	No ▼
Sarah	Show for all visits ▼	No ▼
ameba tech	Show for all visits ▼	No ▼
vishal provider	Show for all visits ▼	No ▼
Harjeet Kaur	Show for all visits ▼	No ▼

Select All Clear All Save

Close Dock



Settings – Kiosk



With acknowledgements you can import any text and assign a repeat frequency. Set gender and age requirements.

Kiosk CPT copyright 2013 American Medical Association. All rights reserved.

Kiosk Sections | Acknowledgements | **Additional Intake Questions**

Acknowledgements | **Details**

Title
Authorization to Contact

Body
I authorize this healthcare provider to contact me via telephone, email, and/or postal mail in providing appointment reminders and healthcare information.

Edit Body Text

Show at Kiosk: Yes

Make this Gender Specific?: No

Require a Date for This Acknowledgement: No

If 'Yes' Text associated with Date (e.g. Date of last Menstral Period)

Require an Age for This Acknowledgement: No

Age Low:

Age High:

Require Re-Acknowledgement
 Every

Add New **Delete** **Cancel** **Save**

Close **Dock**



Settings – Kiosk



Create Intake Categories and then create intake questions within those categories. Creating intake questions works the same as creating Advanced SOAP Macros.

Kiosk CPT copyright 2013 American Medical Association. All rights reserved.

Kiosk Sections | **Acknowledgements** | **Additional Intake Questions**

Categories	Intake Questions	Intake Question Details
<ul style="list-style-type: none"> Personal Injury - History Personal Injury - Hospital Information Personal Injury - Condition Auto Accident - History Auto Accident - Hospital Information Auto Accident - Condition 	<ul style="list-style-type: none"> When did the accident occur? What time of day did the accident occur? Where did the accident occur? The injury was a result of? Describe here if the injury was a result of a different accident: What areas of your body experienced injury? Did you lose consciousness? If work related, name, address and details of your employer Did anyone witness the accident? If yes, name, address and details of the witness or 	<p>Intake Text</p> <p>When did the accident occur?</p> <p>Response Type</p> <p>Date</p> <p>The response type will determine how your patient will respond to your Intake Text.</p> <p>Response Text ?</p> <p>{Name} was involved in a personal injury accident on {Date}.</p> <p>Help - See Some Examples</p> <p>Patient Name Him/Her him/her Mr./Mrs. Lastname</p> <p>He/She he/she His/Her his/her Date</p> <p>Example</p> <p>On a scale of 0 to 10, with 0 being no pain at all and 10 being the worst pain imaginable, {He/She} rates {his/her} pain as a *.</p> <p>Selections</p> <p>Add New</p> <p>To add a selection type above and select 'Add New'</p> <p>↑ ↓ × ALL</p>

Edit Categories
 ↑ ↓ × ALL
 Add Intake Question/Statement
 Cancel
 Save



Settings – Kiosk



Creating intake questions works very similar to creating custom SOAP Macros. First you will need to create a category. For example, create a category called “Personal Injury - History”.

Below I am making a category called “Personal Injury - History”.

There is a drop down called “Ask Lead-in Question?”. This is a Yes/No question and when “Yes” then and only then will the patient be shown the questions inside of this category.

For example... “Were you involved in a personal injury accident?”. If the patient selects “Yes” they will be shown all of the questions in this category like “How fast was the vehicle traveling at time of impact?”. If the patient selects “No” they will not be shown any of the questions inside of this category.

Details

Category Name (Internal use only - not shown at Kiosk)

Personal Injury - History

Ask Lead-in Question?

Yes

?



Lead-in Question Text to Show in Kiosk

Were you involved in a personal injury accident?

This is a Yes or No question. When your patient answers 'Yes' they will be presented with all of the questions inside of this category. If the patient answers 'No' they will not be presented with any questions inside of this category.



Settings – Kiosk



If you select “No” for the “Ask Lead-in Question?” drop-down then the patient will see all questions in this category. There is no lead in question. This option is popular for intake questions you want shown such as a food diary as an example.

Details	
Category Name (Internal use only - not shown at Kiosk)	Personal Injury - History
Ask Lead-in Question?	No ?
Lead-in Question Text to Show in Kiosk	Were you involved in a personal injury accident?



This is a Yes or No question. When your patient answers 'Yes' they will be presented with all of the questions inside of this category. If the patient answers 'No' they will not be presented with any questions inside of this category.



Settings – Patient Education

The Patient Education app will allow you to upload PDF educational content. This content can be viewed using the Dashboard/Patient Education tile or in the Edit SOAP Patient Education tab.

The content you upload can be associated with one or more medications, allergies, problems or labs. Using the INFO button when in the Dashboard/Patient Education tile or in the Edit SOAP patient education tab you can view your attached PDF content.

There is no way to PRINT out this educational content. If you intend on providing educational handouts to your patient, make sure you have them printed in advance.

For those practicing meaningful use it is required to provide an educational handout (and document you did so) on 10% or more of your patients (just once per patient).



Settings – Patient Education



Patient Education

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Use this app to add an educational handout that can be triggered by clicking the info button within the Edit SOAP Pt. Education tab.
Add one or more medications, allergies, problems or labs and associate them to one document.

Groups

Warfarin Information

A Guide to Cholesterol

What is Diabetes

Codeine Information

LDL Information

Group Name

Warfarin Information

Codes	Labs (LOINC)	Problems (SNOMED)	Allergies (RxNorm)	Medications (RxNorm)
855332 RxNorm				
855312 RxNorm				
374319 RxNorm				
X				
X				

Albumin 1751-7	ADD
Alkaline phosphatase (Adults > 61 yo) 6768-6	ADD
Alkaline phosphatase (Adults: 25-60 yo) 6768-6	ADD
ALT - Alanine aminotransferase (Female) 1742-6	ADD
ALT - Alanine aminotransferase (Male) 1742-6	ADD
Aluminum 5574-9	ADD
Ammonia 16362-6	ADD
Amylase 1798-8	ADD

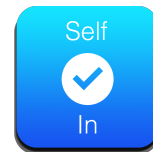
Add Document

View Document

Remove Document

Close Dock

Add New Delete Cancel Save



Settings – Self Check-in

The Self Check-in app is useful for practices that are using the multiple room Patient Flow feature and want their patients to move themselves into an empty room when available. This is the purpose of the Self Check-in app.

To use the app open on a computer accessible to your patients. Note patients will not be able to access any areas of ChiroSpring and their names will be shortened for HIPAA reasons.

There are two ways your patient can be checked in.

- Patient right clicks on their name and moves themselves into a room
- The software automatically moves a patient into a room when one becomes available

These changes can be made in the Settings/Self Check-in app.



Settings – Self Check-in



Pt. Self Check-in

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Pt. Self Check-in

Move into available room automatically ?

No - Patient can move themselves into an open room ▼

Sort rooms by ?

Check-In Time (older times on top) ▼

Only show available (open) rooms as a selectable option when patients attempt to check-in ?

Yes ▼

Instructions: (Will be shown to patient to assist in understanding Self Check-in)

To use, open the Pt. Self Check-in app on a computer. Then train patients to right click (or double click) on their name followed by selecting an available room.

The Self Check-in app is designed so that your patient is informed where they are within the practice. This app can be setup such that patients can check themselves in or the system can do this for them automatically when a room becomes available. Alternatively you can set it up such that patients can do nothing except view. Your staff would then check them in using Patient Flow.

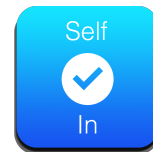
This app coincides with the Front Desk's Patient Flow section. We recommend mounting a large TV for patients to view. If allowing patients to check themselves in you will need to provided them a computer to do so.

Close

Dock

Cancel

Save



Settings – Self Check-in

The Self Check-in app is useful for practices that are using the multiple room Patient Flow feature and want their patients to move themselves into an empty room when available. This is the purpose of the Self Check-in app.

To use the app open on a computer accessible to your patients. Note patients will not be able to access any areas of ChiroSpring and their names will be shortened for HIPAA reasons.

There are two ways your patient can be checked in.

- Patient right clicks on their name and moves themselves into a room
- The software automatically moves a patient into a room when one becomes available

These changes can be made in the Settings/Self Check-in app.



Settings – CompliantDC

We are pleased to partner with CompliantDC to help fulfil your compliance needs.

CompliantDC provides all the forms you need to ensure your practice is compliant.

CompliantDC

CompliantDC is a premier ChiroSpring partner that can help prepare you for a Medicare audit.

[**Schedule a Consultation**](#)

Are you aware you are required to have an effective OIG compliance program in place for your chiropractic practice?

Most chiropractors know there is a complicated scheme of federal laws and rules concerning Medicare and Medicaid. Obamacare has made compliance programs mandatory.

An effective compliance program includes implementation of seven distinct elements to ensure your adherence with federal fraud and abuse laws.

An effective compliance program will be mandatory for participation with Medicare and Medicaid programs.

CompliantDC guides you to creating and maintaining all required elements of an effective compliance program for your chiropractic practice.

Included:

- 1. Step-by-step guide** to creating your effective compliance program
- 2. Pre-done policies and procedures** including HIPAA manual
- 3. Effective Training and Education** for all staff
- 4. Audit system** to ensure billing compliance with federal and state law
- 5. Document storage** for all documents related to your compliance program

Close

CMS 02/12 HCFA Fields – Where Are They?

ChiroSpring marks every HCFA field in the software with a red box next to the field. This makes it easy to know what HCFA field you are actually populating.



HEALTH INSURANCE CLAIM FORM
APPROVED BY NATIONAL UNIFORM CLAIM COMMITTEE (NUCC) 02/12

1. MEDICARE (Medicare) MEDICAID (Medicaid) TRICARE (TRICARE) CHAMPVA (Member Drg) GROUP HEALTH PLAN (Group Drg) FECA (FECA) OTHER (Other)

2. PATIENT'S NAME (Last Name, First Name, Middle Initial) 3. PATIENT'S BIRTH DATE SEX 4. INSURED'S NAME (Last Name, First Name, Middle Initial) 5. PATIENT'S ADDRESS (No. Street) 6. PATIENT RELATIONSHIP TO INSURED 7. INSURED'S ADDRESS (No. Street) 8. RESERVED FOR NUCC USE 9. RESERVED FOR NUCC USE 10. RESERVED FOR NUCC USE 11. INSURED'S POLICY GROUP OR FECA NUMBER 12. IS PATIENT'S CONDITION RELATED TO: 13. INSURED'S DATE OF BIRTH SEX 14. IS THERE ANOTHER HEALTH BENEFIT PLAN? 15. PATIENT'S OR AUTHORIZED PERSON'S SIGNATURE I authorize the release of any medical or other information necessary to process this claim. I also request payment of government benefits either to myself or to the party who accepts assignment below. 16. AUTO ACCIDENT? PLACE (State) 17. OTHER CLAIM ID (Designated by NUCC) 18. INSURED'S OR AUTHORIZED PERSON'S SIGNATURE I authorize payment of medical benefits to the undersigned physician or supplier for services described below. 19. DATE OF CURRENT ILLNESS, INJURY, or PREGNANCY (LMP) QUAL. 20. OTHER DATE QUAL. 21. HOSPITALIZATION DATES RELATED TO CURRENT SERVICES 22. OUTSIDE LAB? \$ CHARGES 23. SUBMISSION CODE ORIGINAL REF. NO. 24. ADDITIONAL CLAIM INFORMATION (Designated by NUCC) 25. PHYSICIAN AUTHORIZATION NUMBER 26. FEDERAL TAX ID NUMBER SSN (BIN) 27. PATIENT'S ACCOUNT NO. 28. TOTAL CHARGE 29. AMOUNT PAID 30. Net to NUCC Use 31. SIGNATURE OF PHYSICIAN OR SUPPLIER INCLUDING DEGREES OR CREDENTIALS (Identify the statements on the reverse apply to this bill and are made a part thereof.) 32. SERVICE FACILITY LOCATION INFORMATION 33. BILLING PROVIDER INFO & P# () 34. ACCEPT AGREEMENT? (To bill, check one below) YES NO 35. SIGNATURE OF PHYSICIAN OR SUPPLIER 36. DATE 37. DATE 38. DATE 39. DATE

NUCC Instruction Manual available at: www.nucc.org PLEASE PRINT OR TYPE APPROVED OMB-0938-1197 FORM 1500 (02-12)

HCFA Fields – Where Are They?

1

<input type="checkbox"/>	1. MEDICARE <i>(Medicare #)</i>	<input type="checkbox"/>	MEDICAID <i>(Medicaid #)</i>	<input type="checkbox"/>	TRICARE CHAMPUS <i>(Sponsor's SSN)</i>	<input type="checkbox"/>	CHAMPVA <i>(Member ID#)</i>	<input type="checkbox"/>	GROUP HEALTH PLAN <i>(SSN or ID)</i>	<input type="checkbox"/>	FECA BLK LUNG <i>(SSN)</i>	<input type="checkbox"/>	OTHER <i>(ID)</i>
--------------------------	---	--------------------------	--	--------------------------	--	--------------------------	---------------------------------------	--------------------------	--	--------------------------	--	--------------------------	-----------------------------

Located: Settings/Insurance Carriers app

Coverage Type 1

- Other
- Medicare
- Medicaid
- TRICARE CHAMPUS
- CHAMPVA
- Group Health Plan
- FECA Black Lung
- Other

HCFA Fields – Where Are They?

2, 3, 5

2. PATIENT'S NAME (Last Name, First Name, Middle Initial)		3. PATIENT'S BIRTH DATE		SEX	
		MM	DD	YY	M <input type="checkbox"/> F <input type="checkbox"/>
5. PATIENT'S ADDRESS (No., Street)			6. PATIENT RELATIONSHIP TO INSURED		
			Self <input type="checkbox"/> Spouse <input type="checkbox"/> Child <input type="checkbox"/> Other <input type="checkbox"/>		
CITY		STATE		8. RESERVED FOR NUCC USE	
ZIP CODE		TELEPHONE (Include Area Code)			
		()			

Located: Dashboard/Profile/Personal Info Tab

HCFA Fields – Where Are They?

2, 3, 5

Located:
Dashboard/Profile/Personal Info
Tab

2. PATIENT'S NAME (Last Name, First Name, Middle Initial)		3. PATIENT'S BIRTH DATE MM | DD | YY		SEX M <input type="checkbox"/> F <input type="checkbox"/>	
5. PATIENT'S ADDRESS (No., Street)			6. PATIENT RELATIONSHIP TO INSURED Self <input type="checkbox"/> Spouse <input type="checkbox"/> Child <input type="checkbox"/> Other <input type="checkbox"/>		
CITY			STATE		
ZIP CODE		TELEPHONE (Include Area Code) ()			
8. RESERVED FOR NUCC USE					

Prefix	First 2	Last 2	MI 2	Suffix	Nickname
DOB 3	Age	Sex 3	SSN	Email Address	
Address 5		City 5	State 5	Zip 5	
Phone 1 5	Type Home ▼	Phone 2	Type Home ▼	Fax	

HCFA Fields – Where Are They?

6: Relationship to Insured

6. PATIENT RELATIONSHIP TO INSURED

Self Spouse Child Other

Located: Dashboard/Insurance/Edit Insurance/Policy Info Tab

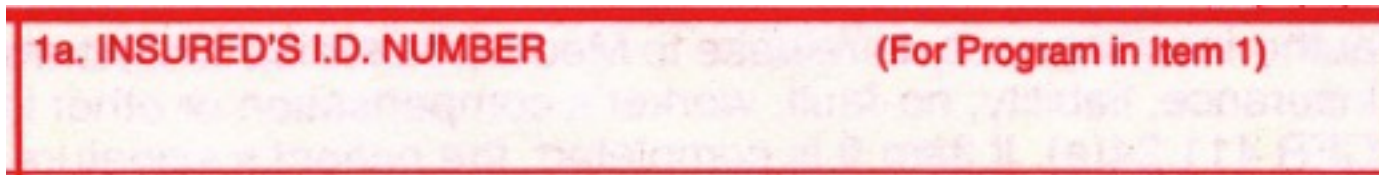
Insured's Info
Policy Info
Patient Responsibility and Annual Limits
Adjuster
Card Image

Relationship to Insured 6

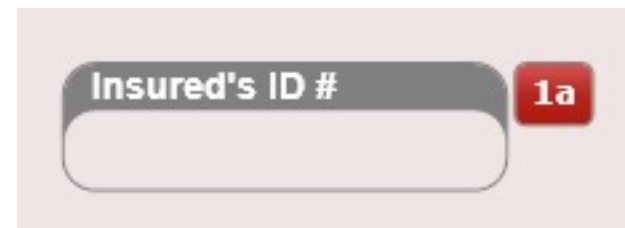
Self ▼

HCFA Fields – Where Are They?

1a



Located: Dashboard/Insurance/Edit Insurance/Policy Info Tab



HCFA Fields – Where Are They?

4, 7

4. INSURED'S NAME (Last Name, First Name, Middle Initial)	
7. INSURED'S ADDRESS (No., Street)	
CITY	STATE
ZIP CODE	TELEPHONE (Include Area Code) ()

ChiroSpring will populate 4 for primary insurance and 9 for secondary insurance

Located: Dashboard/Insurance/Edit Insurance/Insured's Info Tab

Insured's Info
Policy Info
Patient Responsibility and Annual Limits
Adjuster
Card Image

Prefix	First Chad	4 9	Last Thompson	4 9	MI	4 9	Suffix	Nickname
DOB 7/30/1966	11a	Age 48	Sex M	SSN	Email Address			
Address 123 Sunny Dr	7	City Davenport	7	State Abbr. IA	7	Zip 54356	7	7
Phone 1 555-332-3443	7	Type Mobile	Phone 2	Type Home	Fax			

HCFA Fields – Where Are They?

Box 4 defaults to “Insured’s Name”

Medicare, however, has specific requirements as follow:

- Medicare is Primary: Leave Blank
- Medicare is Secondary: 'SAME' if same as patient, otherwise insured’s name
- Medicare w/ Medigap: Leave Blank

The image shows a software interface for setting HCFA fields. A dropdown menu is open for the field labeled "Insured's Name". The menu contains four options: "Insured's Name", "'SAME' if same as patient, otherwise insured's name", and "Leave blank". To the right of the dropdown, there are two red square buttons with white numbers: "4" and "9".

Located: Settings/Insurance Carriers/HCFA (1)

HCFA Fields – Where Are They?

9

9. OTHER INSURED'S NAME (Last Name, First Name, Middle Initial)

ChiroSpring will populate 9 for secondary insurance for the name fields shown below

Located: Dashboard/Insurance/Edit Insurance/Insured's Info Tab

Insured's Info

Policy Info

Patient Responsibility and Annual Limits

Adjuster

Card Image

First	4	Last	4	MI	4
Chad	9	Thompson	9		9

HCFA Fields – Where Are They?

9a

a. OTHER INSURED'S POLICY OR GROUP NUMBER

ChiroSpring will populate 9a for secondary insurance in the box shown below

Located: Dashboard/Insurance/Edit Insurance/Policy Info Tab

Insured's Info

Policy Info

Patient Responsibility
and Annual Limits

Adjuster

Card Image

Policy/FECA Group #

9a

11

HCFA Fields – Where Are They?

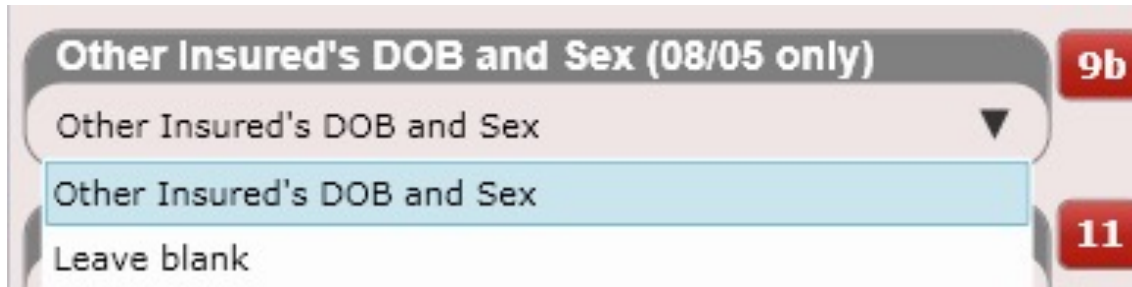
9b



b. RESERVED FOR NUCC USE

Box 9b is only populated in ChiroSpring if using the OLD 08/05 HCFA form (which no one uses anymore). Therefore, do not worry about this box.

However, you can use the dropdown in Settings/Insurance Carriers to select the content of 9b if you are billing on the 08/05 HCFA.



Other Insured's DOB and Sex (08/05 only) **9b**

Other Insured's DOB and Sex ▼

Other Insured's DOB and Sex **11**

Leave blank

HCFA Fields – Where Are They?

9c, 9d

c. RESERVED FOR NUCC USE
d. INSURANCE PLAN NAME OR PROGRAM NAME

Box 9c is blank as it is reserved for NUCC Use.

Box 9d can be found in the patient’s Insurance Case. ChiroSpring will populate 9d for secondary insurance in the box shown below.

Located: Dashboard/Insurance/Edit Insurance/Policy Info Tab

Insured's Info
Policy Info
Patient Responsibility and Annual Limits
Adjuster
Card Image

Plan Name	9d
	11c

HCFA Fields – Where Are They?

11

11. INSURED'S POLICY GROUP OR FECA NUMBER

Located: Dashboard/Insurance/Edit Insurance/Policy Info Tab

Insured's Info

Policy Info

Patient Responsibility
and Annual Limits

Adjuster

Card Image

Policy/FECA Group #

9a

11

HCFA Fields – Where Are They?

11a

11. INSURED'S POLICY GROUP OR FECA NUMBER

a. INSURED'S DATE OF BIRTH

MM | DD | YY

SEX

M F

ChiroSpring will populate 11a for primary insurance for the DOB and SEX fields for the Insured's DOB and Gender.

Located: Dashboard/Insurance/Edit Insurance/Insured's Info Tab

- Insured's Info
- Policy Info
- Patient Responsibility and Annual Limits
- Adjuster
- Card Image

DOB: 7/30/1966

Age: 48

Sex: M

Some insurance carriers may request Box 11a be blank. This option is located in Settings/Insurance Carriers/HCFA (1)

Insured's DOB and Sex

Leave blank

HCFA Fields – Where Are They?

11d

d. IS THERE ANOTHER HEALTH BENEFIT PLAN?

YES

NO

If yes, return to and complete item 9 a-d.

This field is located in the Policy Info tab within the individual insurance plan (e.g. Primary, Secondary or Tertiary. For Medicare select “Never check either Yes or No (i.e. leave blank)”

Another Health Plan Selection

11d

Only check No

Only check Yes

Always check Yes & if primary paid zero also check No

Only check No

Always check both Yes & No

Never check either Yes or No (i.e. leave blank)

Insured's Info

Policy Info

Patient Responsibility
and Annual Limits

Adjuster

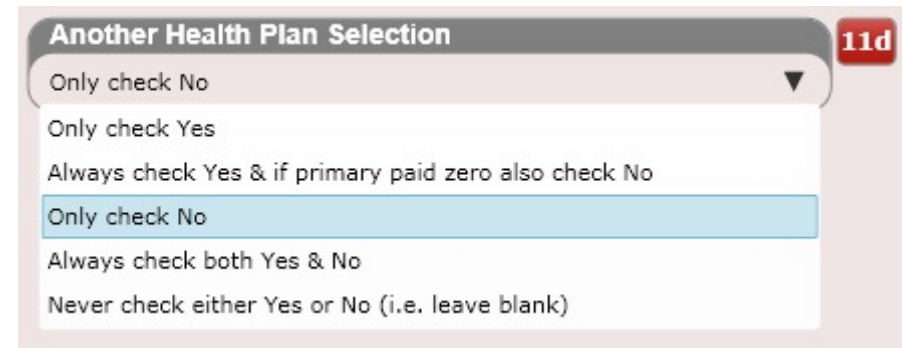
Card Image

Insurance – Box 11d

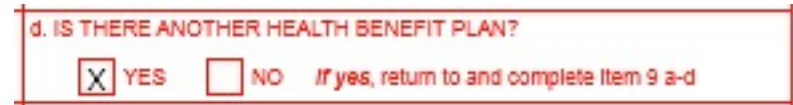
Box 11d (Another Health Plan Selected)

HCFA box 11d can be either Yes, No or both. This may sound confusing. Box 11d has a Yes and a No check box on the actual HCFA form. Most insurances want “Yes” selected if the patient has secondary insurance. However, oddly, some insurance may also want both boxes selected if the patient has secondary. This dropdown gives you this kind of flexibility.

By default it is set to “Only Check No.” If the patient does not have a secondary or tertiary insurance you will want to move this to “No”. Other options are shown to the right.



The image shows a dropdown menu titled "Another Health Plan Selection" with a red "11d" label in the top right corner. The menu is open, showing several options: "Only check No" (highlighted in blue), "Only check Yes", "Always check Yes & if primary paid zero also check No", "Always check both Yes & No", and "Never check either Yes or No (i.e. leave blank)".



The image shows a red-bordered box containing the question "d. IS THERE ANOTHER HEALTH BENEFIT PLAN?". Below the question are two checkboxes: "YES" (checked with an 'X') and "NO" (unchecked). To the right of the checkboxes is the instruction "If yes, return to and complete Item 9 a-d".

See examples of Medicare and Medicaid on subsequent pages

Insurance – Box 11d (Medicaid)

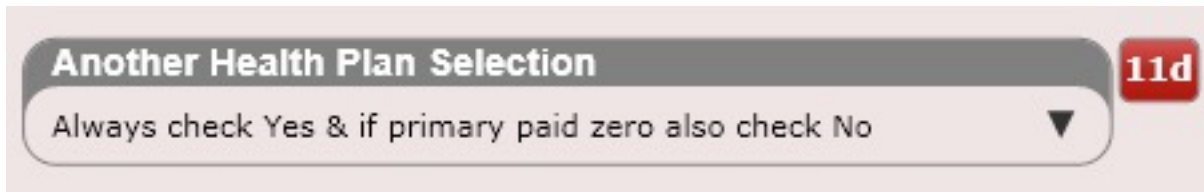
Box 11d (Medicaid)

- If the patient ONLY has Medicaid (e.g. has no Secondary)



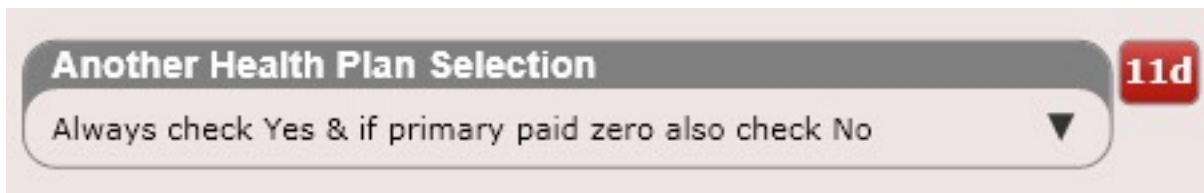
A screenshot of a form titled "Another Health Plan Selection" with a red "11d" label in the top right corner. The form contains a dropdown menu with the text "Only check No" and a downward-pointing arrow on the right side.

- If the patient has Medicaid for Primary (and has another insurance for Secondary)



A screenshot of a form titled "Another Health Plan Selection" with a red "11d" label in the top right corner. The form contains a dropdown menu with the text "Always check Yes & if primary paid zero also check No" and a downward-pointing arrow on the right side.

- If the patient has Medicaid for Secondary (and has another insurance for Primary)



A screenshot of a form titled "Another Health Plan Selection" with a red "11d" label in the top right corner. The form contains a dropdown menu with the text "Always check Yes & if primary paid zero also check No" and a downward-pointing arrow on the right side.

HCFA Fields – Where Are They?

11b, 11c

b. OTHER CLAIM ID (Designated by NUCC)
c. INSURANCE PLAN NAME OR PROGRAM NAME

Other Claim ID **11b**

11b: Located: Dashboard/Insurance Case

11c: Located: Dashboard/Insurance Case/Edit Insurance/Policy Info Tab

Insured's Info
Policy Info
Patient Responsibility and Annual Limits
Adjuster
Card Image

Employer/School Name

Plan Name **9d**
11c

HCFA Fields – Where Are They?

10a, 10b, 10c, 10d, 11b

10. IS PATIENT'S CONDITION RELATED TO:

a. EMPLOYMENT? (Current or Previous)
 YES NO

b. AUTO ACCIDENT? PLACE (State)
 YES NO _____

c. OTHER ACCIDENT?
 YES NO

10d. RESERVED FOR LOCAL USE

b. OTHER CLAIM ID (Designated by NUCC)

Condition

Related To **10**
None ▼

Place State **10b**

Reserved **10d**

Qual **Other Claim ID** **11b**

Located: Dashboard/Insurance Case

HCFA Fields – Where Are They?

12, 13

READ BACK OF FORM BEFORE COMPLETING & SIGNING THIS FORM.

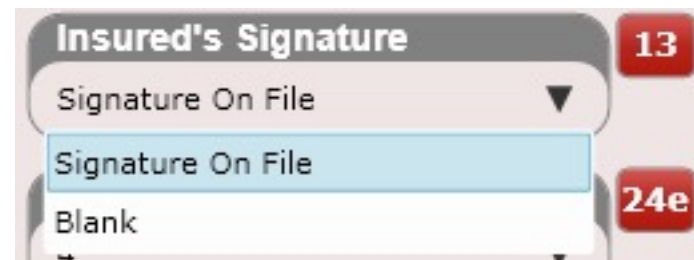
12. PATIENT'S OR AUTHORIZED PERSON'S SIGNATURE I authorize the release of any medical or other information necessary to process this claim. I also request payment of government benefits either to myself or to the party who accepts assignment below.

SIGNED _____ DATE _____

13. INSURED'S OR AUTHORIZED PERSON'S SIGNATURE I authorize payment of medical benefits to the undersigned physician or supplier for services described below.

SIGNED _____

12 is Automatically populated. 13 defaults to "Signature on File" but can be changed to "Blank". This dropdown is in Settings/Insurance Carriers/HCFA (2)



HCFA Fields – Where Are They?

14, 15

14. DATE OF CURRENT ILLNESS, INJURY, or PREGNANCY (LMP)	15. OTHER DATE
MM DD YY QUAL.	QUAL. MM DD YY

Located: SOAP Note/Assessment/Diagnosis Tab

Note: Once populated these values will be copied over to the next visit

Qualifier	Date of Current Illness	14	Qualifier	Other Date	15
▼ X	▼ X		▼ X	▼ X	

HCFA Fields – Where Are They?

16, 18

16. DATES PATIENT UNABLE TO WORK IN CURRENT OCCUPATION						
MM	DD	YY	TO	MM	DD	YY
FROM						
18. HOSPITALIZATION DATES RELATED TO CURRENT SERVICES						
MM	DD	YY	TO	MM	DD	YY
FROM						

Located: SOAP Note/Objective/Intro Tab

Note: Once populated these values will be copied over to the next visit

Unable to Work Date Range	16	Hospitalization Date Range	18
Start Date	End Date	Start Date	End Date
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
▼ X	▼ X	▼ X	▼ X

HCFA Fields – Where Are They?

17, 17a, 17b

17. NAME OF REFERRING PROVIDER OR OTHER SOURCE	17a.		
	17b.	NPI	

Located: Settings/Referring Provider – Here is where you create the referring provider

Located: SOAP/Subjective/Condition Case Tab – Here is where you select the referring provider

Referring Provider Select Remove 17

Name: None
Phone:
Fax:
Email:
NPI:

First 17 **Last** 17

Qualifier 17a **Number** 17a **NPI** 17b

HCFA Fields – Where Are They?

20

20. OUTSIDE LAB? <input type="checkbox"/> YES <input type="checkbox"/> NO	\$ CHARGES
--	------------

Not currently supported. Will always be marked "No."

HCFA Fields – Where Are They?

19, 22, 23

19. ADDITIONAL CLAIM INFORMATION (Designated by NUCC)	
22. RESUBMISSION CODE	ORIGINAL REF. NO.
23. PRIOR AUTHORIZATION NUMBER	

Located: SOAP Note/Subjective/Intro Tab

Note: 19 and 23 will be copied over on subsequent visits. 22 will not be copied over on subsequent visits.

19 Reserved for Local Use 19

Prior Authorization No. 23

Medicaid Resubmission 22

Code	Original Ref No.
<input type="text"/>	<input type="text"/>

Per HCFA Box 19 will render as two lines. The top line supports 23 characters, and the bottom supports 48 characters.

HCFA Fields – Where Are They?

21

21. DIAGNOSIS OR NATURE OF ILLNESS OR INJURY Relate A-L to service line below (24E)				ICD Ind.
A. _____	B. _____	C. _____	D. _____	_____
E. _____	F. _____	G. _____	H. _____	_____
I. _____	J. _____	K. _____	L. _____	_____

Diagnosis

723.3
Cervicobrachial Syndrome
(diffuse)

↑ ↓ ✕ ALL

Post Diagnosis

Located: SOAP Note/Assessment/Diagnosis Tab

NOTE: These fields will be copied over to the subsequent visit

NOTE: For Medicare ensure you have “Max Diagnosis Pointers” set to 1.
This option exists in Setting/Insurance Carriers/HCFA (2)

Max Diagnosis Pointers 24e

1 ▼

HCFA Fields – Where Are They?

24a, 24b, 24c, 24h

Visit Date & Time 24a
Aug 22, 2013 9:00 AM

24. A. DATE(S) OF SERVICE
From To
MM DD YY MM DD YY

B. PLACE OF SERVICE
EMG

H. EPSDT Family Plan
Family Plan

POS 24b 11
EMG 24c
EPSDT 24h

Printed Date Format 24a
MM/DD/YY
MM/DD/YY
MM/DD/YYYY

Located: SOAP Note/Subjective/Intro Tab

Note: 24a is populated automatically based on the visit date. However, you can change the printed format for this field In Settings/Insurance Carriers/HCFA (2). Fields 24b, 24c and 24h will NOT be copied over to the subsequent visit. 24b has a default value which is created in Settings/Practice Info

Note: 24b, 24c and 24h: Enter a value in these boxes to override any default values. This will affect that visit only. 24b auto populates with the default place of service code entered for your practice.

HCFA Fields – Where Are They?

24a

24. A. DATE(S) OF SERVICE					
From			To		
MM	DD	YY	MM	DD	YY

Printed Date Format **24a**

MM/DD/YY ▼

MM/DD/YY

MM/DD/YYYY

24a is automatically populated based on the scheduled Visit Date of Service.

Visit Date & Time **24a**

Aug 22, 2013 9:00 AM

Located: Settings/Insurance Carriers/HCFA (2)

Note: This box allows you to change the printed date format for box 24a. It defaults to MM/DD/YY which is required by the CMS-1500 form. However, some insurance companies will only accept MM/DD/YYYY. Therefore we provide this option.

Note: This change will ONLY affect the Printed HCFA forms.

HCFA Fields – Where Are They?

24b, 24c, 24h



A screenshot of a software interface showing a field labeled 'Default Place Of Service Code' with the value '11'. A red '24b' label is positioned to the right of the field.

The DEFAULT value for 24b is located in Settings/Practice Info/General Tab

24b, 24c and 24h can also have OVERRIDABLE values associated with a product or service. Located in Settings/Products or Settings/Services

Three software interface fields are shown: 'POS' with a red '24b' label, 'Emergency' with a red '24c' label, and 'EPSDT' with a red '24h' label.

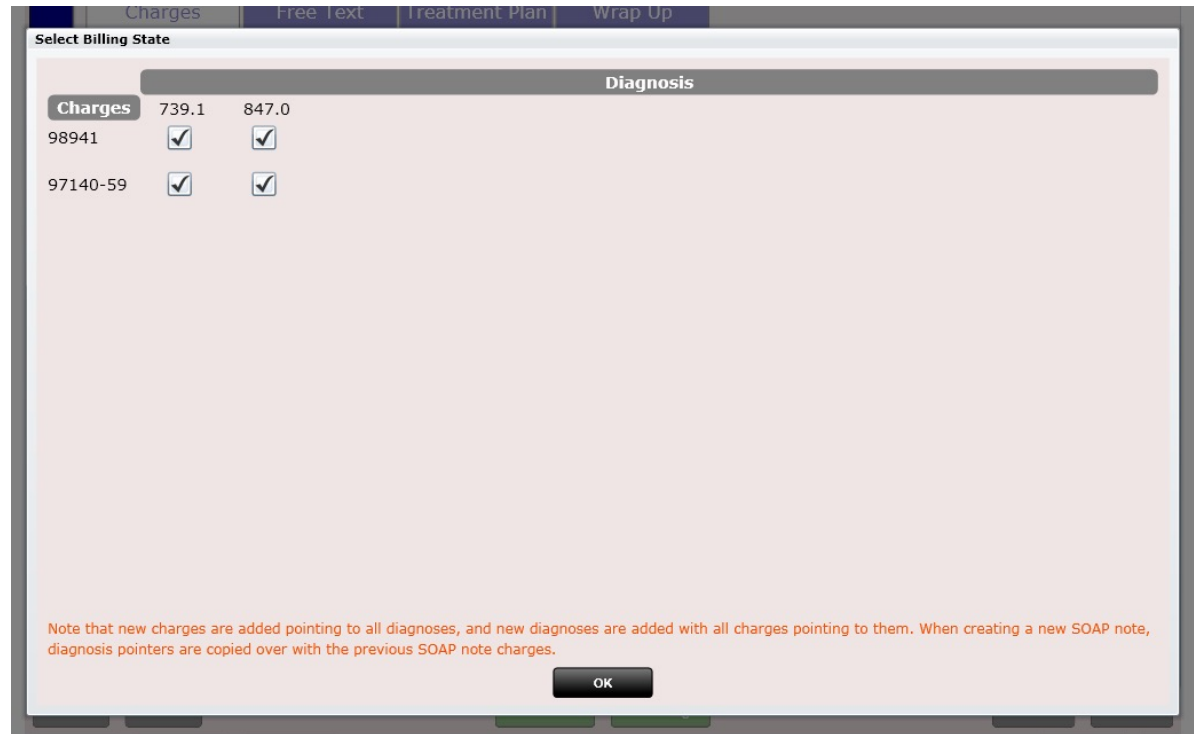
- » Set Tax Rate to zero to use Practice Tax Rate.
- » Specifying POS(24b), Emergency(24c) or EPSDT(24h) will override Visit values, otherwise leave blank.

HCFA Fields – Where Are They?

24e



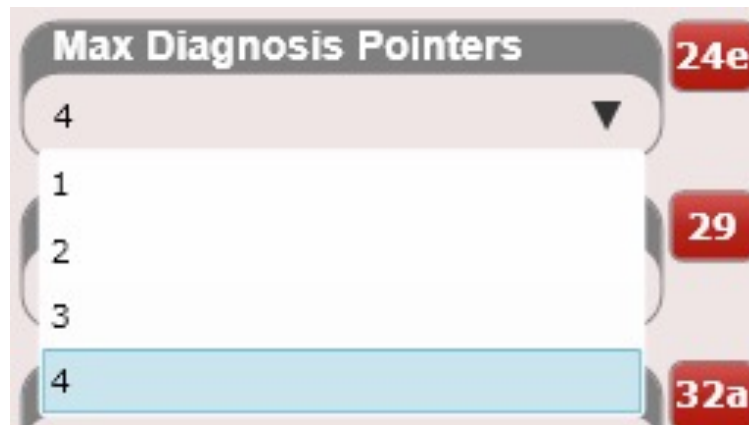
Located: SOAP Note/Plan/Charges Tab.
Select the “Diagnosis Pointers” button to
view the diagnosis pointers.



Note: By default, all diagnoses point to all charges. If you do edit the diagnosis pointers your selections will copy over on subsequent visits.

HCFA Fields – Where Are They?

HCFA box 24e defaults to 4. However, there are some insurance carriers that only want 1 diagnosis pointer (e.g. Medicare wants 1).



The image shows a software interface for setting 'Max Diagnosis Pointers'. The title of the dropdown is 'Max Diagnosis Pointers'. The current selection is '4', which is highlighted in light blue. The dropdown menu is open, showing a list of options: '1', '2', '3', and '4'. To the right of the dropdown, there are three red buttons labeled '24e', '29', and '32a'.

Located: Settings/Insurance Carriers/HCFA (2)

HCFA Fields – Where Are They?

24d

D. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances)				
CPT/HCPCS	MODIFIER			

Charges contain CPT codes and sometimes Modifiers. You can create products or services in Settings/Products or Settings/Services

Charges

97012
Therapy-Traction/Mechanical
Cash PRC: \$20.00 DISC: \$0.00
1 Units

98941
Manipulation 3-4 Regions
Cash PRC: \$40.00 DISC: \$0.00
1 Units

↑ ↓ × × ALL

Code (CPT®)	Modifier 1	Modifier 2	Modifier 3	Modifier 4	24d
20000	M11	M21	M31	M41	

Once Products or Services are created you add them in the SOAP/Plan/Charges Tab

HCFA Fields – Where Are They?

24f

F. \$ CHARGES

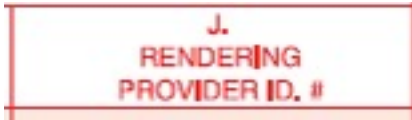
The DEFAULT value for 24f is located in the Settings/Products or Settings/Services. Here you can customize the price for a product or service. ChiroSpring supports up to five prices per product or service.

When you add charges to the SOAP Note box 24f is populated. The charges tab is in SOAP/Plan/Charges

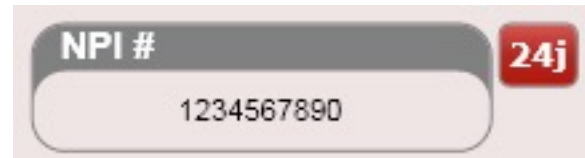
Price (Sched A) 0.00	Price (Sched B) 0.00	Price (Sched C) 0.00	Price (Sched D) 0.00	Price (Sched E) 0.00
--------------------------------	--------------------------------	--------------------------------	--------------------------------	--------------------------------

HCFA Fields – Where Are They?

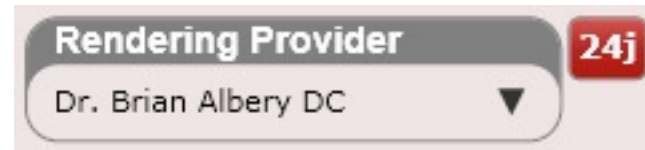
24j



The DEFAULT value for 24j is located in Settings/Users/Provider Info Tab. This is the NPI number of the provider.



The Rendering Provider's NPI number will be automatically populated in 24j for the visit. You can change the rendering provider in SOAP/Intro Tab.



HCFA Fields – Where Are They?

24i, 24j

L ID. QUAL.	J. RENDERING PROVIDER ID. #
--	--

The DEFAULT value for 24i and 24j is in Settings/Users/Provider Info Tab. Use one of these fields if you do not want to use the NPI number for 24j.

The Rendering Provider's NPI number will be automatically populated in 24j for the visit. You can change the rendering provider in SOAP/Intro Tab.

Qual	License #	24i	32b
<input type="text"/>	<input type="text"/>	24j	33b
Qual	Physician ID #	24i	32b
<input type="text"/>	<input type="text"/>	24j	33b

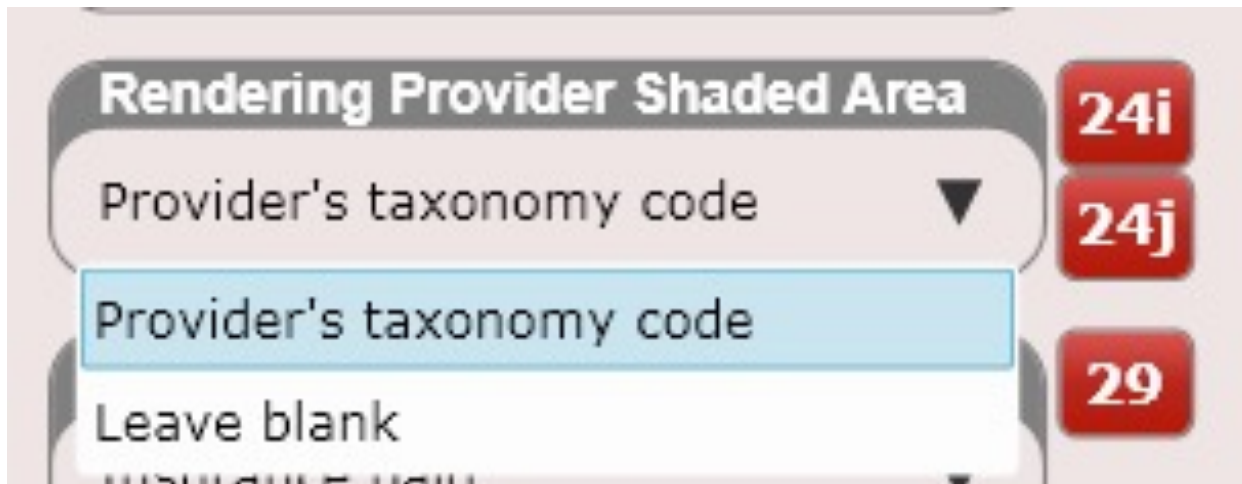
Taxonomy Code	24i	32b	
<input type="text"/>	24j	33b	
Qual	Medicare ID #	24i	32b
<input type="text"/>	<input type="text"/>	24j	33b
Qual	Physician Group #	24i	32b
<input type="text"/>	<input type="text"/>	24j	33b

HCFA Field: Box 24i & 24j Medicaid

Medicaid has a specific requirement in some states that Box 24i must populate “ZZ” and box 24j must populate the provider’s taxonomy code. Then select “Provider’s taxonomy code” from the dropdown box shown here.

This dropdown is located in Settings/Insurance Carriers/HCFA (2)

As a reminder, you can populate the provider’s qualifier and taxonomy code in Settings/Users/Provider Info.



HCFA Fields – Where Are They?

25

25. FEDERAL TAX ID. NUMBER	SSN EIN
	<input type="checkbox"/> <input type="checkbox"/>

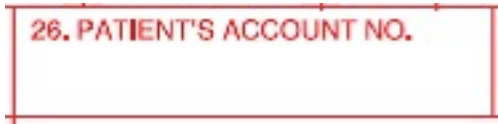
The DEFAULT provider value for 25 is in Settings/Users/Service and Billing Location Tab. Use the drop-down box to determine if you want the Practice EIN number, Provider EIN or SS# populated in box 25.

Federal Tax ID Content 25	Provider's EIN 25	Social Security # 25
Practice EIN Practice EIN Provider EIN Provider SSN		
32a		
	Federal Tax ID # (EIN) 25	

The Federal Tax ID # (EIN) is located in Settings/Practice Info/Billing Address Tab

HCFA Fields – Where Are They?

26



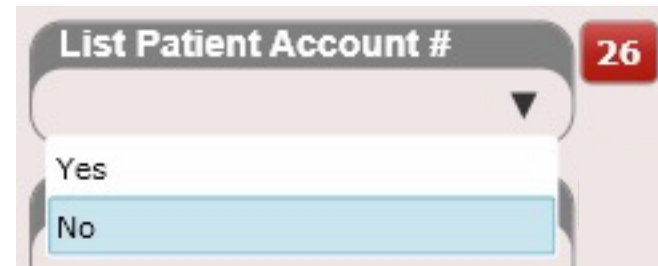
26. PATIENT'S ACCOUNT NO.

The Patient's Account Number is located in the Patient Profile/Personal Info Tab.



Account # 26
MINT0000

In Settings/Insurance Carriers/HCFA (2) there is a drop-down box that determines Yes/No if you want to populate box 26 with the patient's account number.



List Patient Account # 26
Yes
No

HCFA Fields – Where Are They?

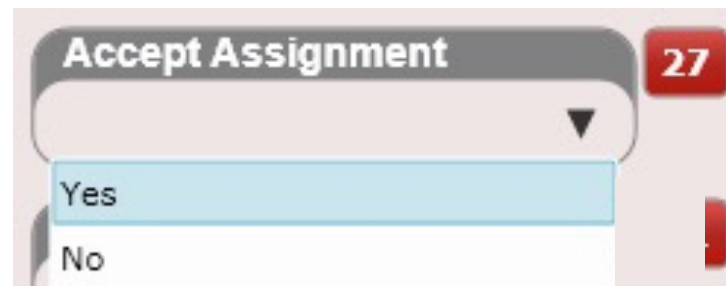
27



27. ACCEPT ASSIGNMENT?
(For govt. claims, see back)

YES NO

Box 27 (Accept Assignment) has a drop-down box (Yes/No) located in Settings/Insurance Carriers/HCFA (2)



Accept Assignment 27

Yes

No

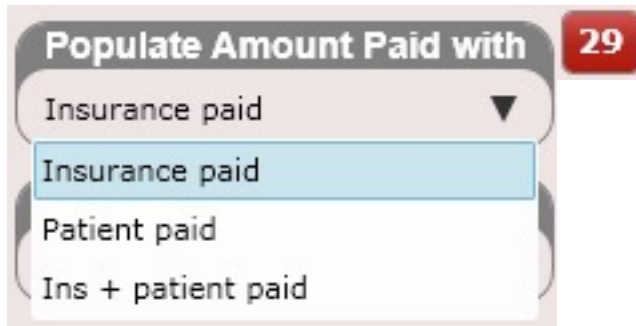
HCFA Fields – Where Are They?

28, 29, 30

28. TOTAL CHARGE	29. AMOUNT PAID	30. Rsvd for NUCC Use
\$	\$	

These values are automatically calculated based on what charges you have entered for the visit as well as what you have collected so far in payments. However, Box 29 can be modified to show:

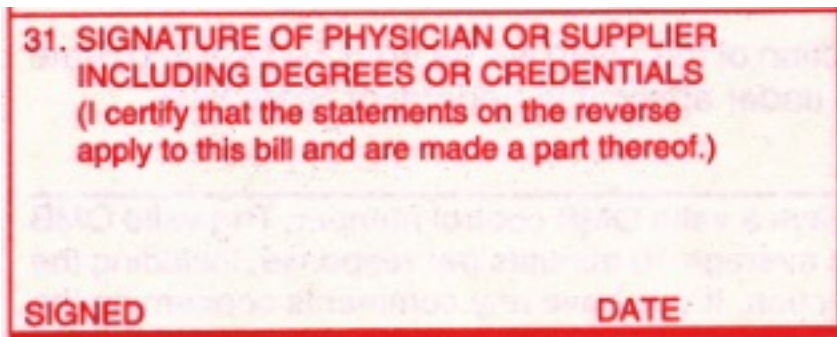
- Insurance Paid
- Patient Paid
- Insurance + Patient Paid



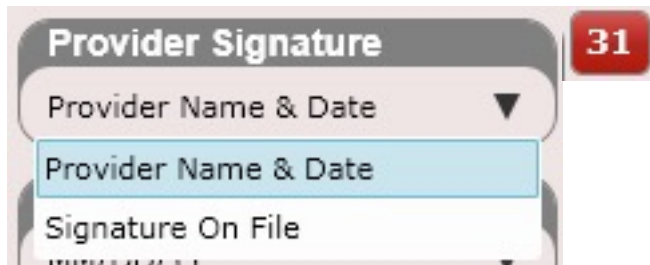
This box is located on the Insurance Carrier screen found in Settings/Insurance Carriers/HCFA (2)

HCFA Fields – Where Are They?

31



These values are automatically populated based on the visit date and rendering provider



However, you can determine what gets populated in box 31:

- Provider Name & Date
- Signature on File

This box is located in Settings/Insurance Carriers/HCFA (2)

HCFA Fields – Where Are They?

32

32. SERVICE FACILITY LOCATION INFORMATION	
a.	b.

32 information can be populated in Settings/Practice Info/Facility Address Tab

Service Facility Location						32
Name			Email Address			
Address		City	State	Zip		
Phone 1	Type Home ▼	Phone 2	Type Home ▼	Fax		

HCFA Fields – Where Are They?

32

32. SERVICE FACILITY LOCATION INFORMATION	
a. NPI	b.

32 USER information can be populated in Settings/Users/Service and Billing Location Tab. To override Box 32 select the check box “Override Service Facility Location.”

Service Facility Location

 Override Service Facility Location:

Name <input type="text"/> <small>Edit User</small>		Email Address <input type="text"/>		
Address <input type="text"/>	City <input type="text"/>	State <input type="text"/>	Zip <input type="text"/>	
Phone 1 <input type="text"/>	Type <input type="text"/>	Phone 2 <input type="text"/>	Type <input type="text"/>	Fax <input type="text"/>

32

HCFA Fields – Where Are They?

NOTE: If the drop-down selection you are looking for is NOT present for boxes 32a or 32b, 33a or 33b then select “Other Content” from the drop down and populate the appropriate “Other Content” box (see below).

Populate Facility NPI with 32a Other Content ▼	32a	Populate Facility Other ID w/ 32b Other Content ▼	32b
32a Other Content <input type="text"/>	32a	32b Other Content <input type="text"/>	32b
Populate Billing NPI with 33a Other Content ▼	33a	Populate Billing Other ID with 33b Other Content ▼	33b
33a Other Content <input type="text"/>	33a	33b Other Content <input type="text"/>	33b

Located: Settings/Insurance Carriers/HCFA (2)

HCFA Fields – Where Are They?

32a

32. SERVICE FACILITY LOCATION INFORMATION	
a.	b.

32a information can be populated in Settings/Practice Info/Facility Location

Facility NPI #	32a
----------------	-----

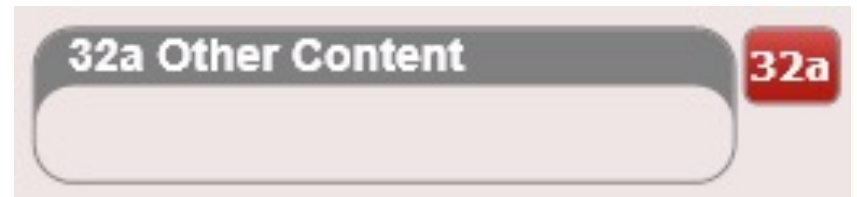
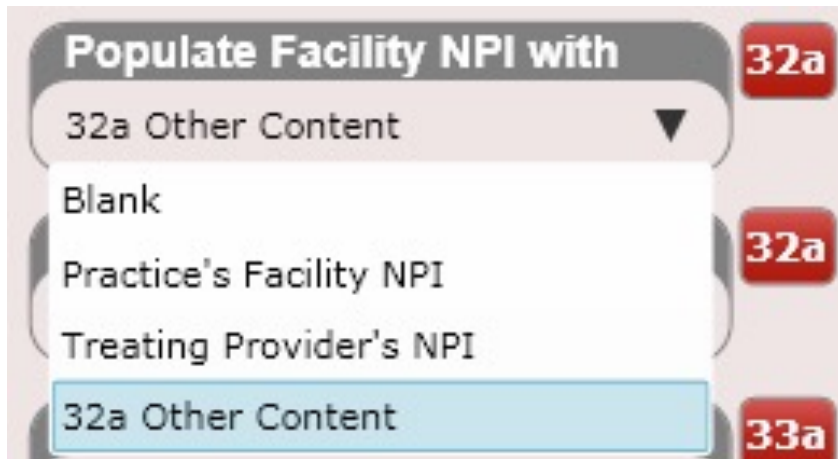
If you wish to override the facilities NPI number populate the “Override Facility NPI” box located in Settings/Users/Service and Billing Location Tab

Override Facility NPI	32a
-----------------------	-----

HCFA Fields – Where Are They?

HCFA box 32a can be populated with the following fields: Blank, Practice’s Facility NPI, Treating Provider’s NPI, 32a Other Content. You are only making the selections from this drop down here. You will need to add the actual numbers in either the Practice Info app or the User’s app (both found in settings).

To populate “32a Other Content” type the content into the text box labeled “32a Other Content”.



HCFA Fields – Where Are They?

32b

32. SERVICE FACILITY LOCATION INFORMATION	
a.	b.

32b information can be populated in Settings/Users/Provider Info Tab

Qual	License #	24i	32b
<input type="text"/>	<input type="text"/>	24j	33b
Qual	Physician ID #	24i	32b
<input type="text"/>	<input type="text"/>	24j	33b

	Taxonomy Code	24i	32b
	<input type="text"/>	24j	33b
Qual	Medicare ID #	24i	32b
<input type="text"/>	<input type="text"/>	24j	33b
Qual	Physician Group #	24i	32b
<input type="text"/>	<input type="text"/>	24j	33b

HCFA Fields – Where Are They?

32b

32. SERVICE FACILITY LOCATION INFORMATION	
a. NPI	b.

32b (Taxonomy Code) information can be populated in Settings/Practice Info/General Tab

Taxonomy Code	32b
<input type="text"/>	33b

32b (Facility Other ID #) information can be populated in Settings/Practice Info/Facility Locations Tab

Facility Other ID #	32b
<input type="text"/>	

HCFA Fields – Where Are They?

HCFA box 32b can be populated with the following fields: Blank, Practice's Facility Other ID, Practice Taxonomy Code, Provider's Taxonomy Code, Provider's License #, Provider's Medicare ID #, Provider's Physician ID #, Provider's Physician Group #. You are only making the selections from this drop down here. You will need to add the actual numbers in either the Practice Info app or the User's app (both found in settings).

To populate "32b Other Content" type the content into the text box labeled "32b Other Content".

Populate Facility Other ID w/ **32b**

32b Other Content ▼

- Blank **32b**
- Practice's Facility Other ID **32b**
- Practice Taxonomy Code **33b**
- Provider's Taxonomy Code **33b**
- Provider's License # **33b**
- Provider's Medicare ID # **33b**
- Provider's Physician ID # **33b**
- Provider's Physician Group # **33b**
- 32b Other Content**

32b Other Content **32b**

32. SERVICE FACILITY LOCATION INFORMATION

a.	NPI	b.
----	-----	----

HCFA Fields – Where Are They?

33

33. BILLING PROVIDER INFO & PH # ()	
a. NPI	b.

33 information can be populated in Settings/Practice Info/Billing Address Tab

Billing Provider Information 33

Name		Email Address		
<input type="text"/>		<input type="text"/>		
Address	City	State	Zip	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Phone 1	Type	Phone 2	Type	Fax
<input type="text"/>	Home ▼	<input type="text"/>	Home ▼	<input type="text"/>

HCFA Fields – Where Are They?

33

33. BILLING PROVIDER INFO & PH # ()	
a. NPI	b.

33 USER information can be populated in Settings/Users/Service and Billing Address Tab. To override Box 33 select the check box “Override Billing Provider Location.”

Billing Provider Location 33

Override Billing Provider Location:

Name <input type="text"/> Edit User		Email Address <input type="text"/>		
Address <input type="text"/>	City <input type="text"/>	State <input type="text"/>	Zip <input type="text"/>	
Phone 1 <input type="text"/>	Type ▼	Phone 2 <input type="text"/>	Type ▼	Fax <input type="text"/>

HCFA Fields – Where Are They?

33a

33. BILLING PROVIDER INFO & PH # ()	
a. NPI	b.

33a information can be populated in Settings/Practice Info/Billing Address Tab

Billing NPI #	33a
<input type="text"/>	

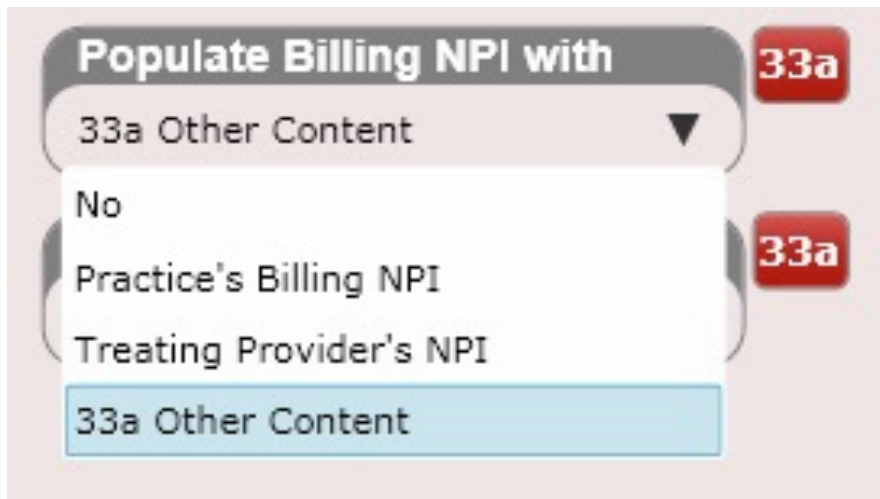
If you wish to override the Billing NPI number populate the “Override Billing NPI” box located in Settings/Users/Service and Billing Location Tab

Override Billing NPI	33a
<input type="text"/>	

HCFA Fields – Where Are They?

HCFA box 33a can be populated with the following fields: No, Practice’s Billing NPI, Treating Provider’s NPI, 33a Other Content. You are only making the selections from this drop down here. You will need to add the actual numbers in either the Practice Info app or the User’s app (both found in settings).

To populate “33a Other Content” type the content into the text box labeled “33a Other Content”.



HCFA Fields – Where Are They?

33b

33. BILLING PROVIDER INFO & PH # ()	
a. NPI	b.

33b information can be populated in Settings/Users/Provider Info Tab

Qual	License #	24i	32b
<input type="text"/>	<input type="text"/>	24j	33b
Qual	Physician ID #	24i	32b
<input type="text"/>	<input type="text"/>	24j	33b

	Taxonomy Code	24i	32b
	<input type="text"/>	24j	33b
Qual	Medicare ID #	24i	32b
<input type="text"/>	<input type="text"/>	24j	33b
Qual	Physician Group #	24i	32b
<input type="text"/>	<input type="text"/>	24j	33b

HCFA Fields – Where Are They?

33b

33. BILLING PROVIDER INFO & PH # ()	
a. NPI	b.

33b (Taxonomy Code) information can be populated in Settings/Practice Info/General Tab

Taxonomy Code	32b
<input type="text"/>	33b

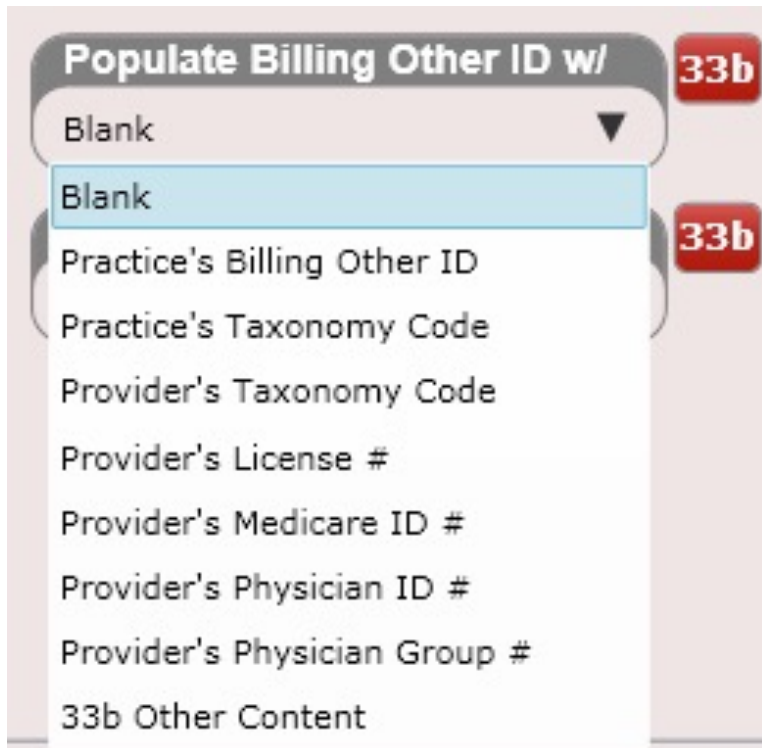
33b (Billing Other ID #) information can be populated in Settings/Practice Info/Billing Address

Billing Other ID #	33b
<input type="text"/>	

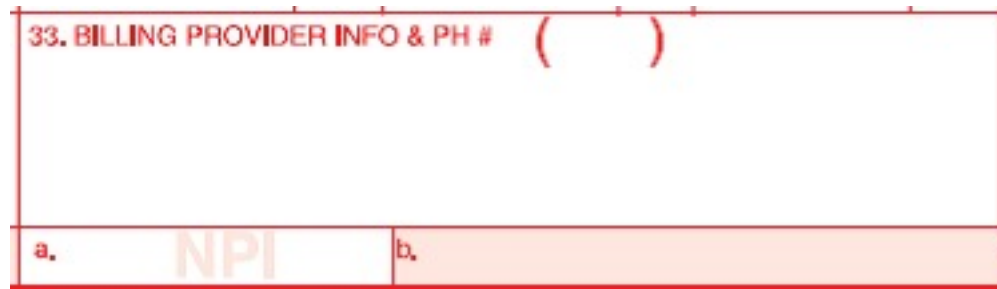
HCFA Fields – Where Are They?

HCFA box 33b can be populated with the following fields: Blank, Practice's Billing Other ID, Practice's Taxonomy Code, Provider's Taxonomy Code, Provider's License #, Provider's Medicare ID #, Provider's Physician ID #, Provider's Physician Group #, 33b Other Content. You are only making the selections from this drop down here. You will need to add the actual numbers in either the Practice Info app or the User's app (both found in settings).

To populate "33b Other Content" type the content into the text box labeled "Box 33b Other Content".



33b



CPT Codes

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