

HealthTec PM

Practice Management

- ◆ Multi-Site, Multi-Provider System
- ◆ Integration with CCHIT Certified HT-EHR solution
- ◆ Electronic Patient Statements with Review & Approve Features
- ◆ Electronic Claims—All Payor Solution includes
 - ◆ Claim Scrubber (400,000 CCI and payer specific edits)
 - ◆ Correct Claim Errors Online
 - ◆ Electronic EOB posting
- ◆ Enhanced Claim Editor
- ◆ E-Prescribing
- ◆ HT Query Custom Report Writer
- ◆ Export Reports to CSV format/Excel
- ◆ Quickbooks Integration
- ◆ Enhanced Reporting Module
- ◆ New Transaction Screen Views
- ◆ Easy Pay Integrated Credit Card Payment Module
- ◆ Enhanced Superbill Creator
- ◆ Expanded Patient Look-up
- ◆ Anesthesia Billing Module

Patient Record for JOHN SMITH (666)

Demographics

Patient# 666 [Responsible Party with 0 dependents] Patient (Y/N)

Last Name SMITH First JOHN M F MR MS M T

Address 343 ALAMO BLVD City/State/Cp SAN ANTONIO TX 78230 7706 Home Ph: (210) 545-1010 Other Ph: (210) 559-5559 Gender M

Solution Birth Date 01/31/1965 Age 42 Occupation Employer Total Production 187.61

SSN D.L.# 23456789 Emp Address Emp City/State/Cp Emp Phone

Relations BEL Spouse MRS SMITH Patient Owes 0.00

Email jsmith@healthtec-software.com HIPAA Privacy Notice Status Blank Last Knowledge Date

Notes The patient is a personal friend of the Dr.

Referral 300 Referral Name Statement Sent 06/28/2007 Last Visit 05/27/2007 Last Age 10/22/2007 Home Site ADG01 Last Svc 01/19/2007 Last Age 05/27/2007

Referrals

Individual	Current	30	60	90	120+	Total
Individual	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

[U] - MR F [y] (y) - (y) (y) - Next Prev Tab [F10] - F21 [Alt F] - FAMILY [Alt A] - AGE PATIENT'S BALANCE

Payment Info

09/05/2006 65467234 21435.00 21086.22

Filter Settings: Pat Name, Pat ID, DOS, Conf, # Items, Total Chgs, On

Advanced Default

DOS Range: 03/27/2005 04/25/2007

Item Detail

Code	DOS	Description	Charge	Allowed	Expnd	Balance	Y	N
86010	08/07/2006	SPRAYMETRY BI	100.00	100.00	100.00	100.00	Y	N

Transaction Detail

By	Check #	Pat Name	Code	DOS	Charge	Paid	Disab	Other Adj	Balance	Post	On	Bill
I	65467234	BANNERMAN 95117		08/08/2006	30.00	4.02	0.00	25.98	0.00	N	Y	N
I	65467234	BERNALDIZ 05115		08/17/2006	25.00	13.50	0.00	0.00	11.50	N	Y	N
I	65467234	BERNALDIZ 05115		08/31/2006	23.00	13.50	0.00	0.00	11.50	N	Y	N
I	65467234	BESSER PA65117		08/08/2006	30.00	4.02	0.00	25.98	0.00	N	Y	N
I	65467234	CEPPOS GA69213		08/07/2006	75.00	10.90	0.00	64.10	0.00	N	Y	N
I	65467234	CEPPOS GA64010		08/07/2006	100.00	100.00	0.00	0.00	0.00	N	Y	N

[Click] or [Ctrl+Click] on Payment Info or Session Info to Edit [Alt F] Underlined letter activates or clicks button

Transaction History for Samuel Saamy

Display For: Patient, Family, One Dr, One Site

Date Sorted By: Posting, Paid

Filter By: All Items, Unpaid, Voids

Range of Dates: From 04/01/2007 To 12/05/2007

Show: Running Bal, Claim Amt, Notes/Rem, Voids

Inv #	DOS	Code	Description	Dr	Site	Pos	To	Qty	Ref	Total	Balance
71055	04/01/2007	86040	INTRINSIC FACTOR ANTIBODY	4	1	11	1.0	1.2	4.20	162.42	
71065	04/01/2007	86039	ANTINUCLEAR ANTIBODIES (A	4	1	11	1.0	1.2	4.20	166.62	
71055	04/01/2007	86235	Sigrens AMP-SS-AGS-B	4	1	11	1.0	1.2	1500.00	1666.62	
71055	04/01/2007	86228		4	1	11	1.0	1.2	200.00	1866.62	
71055	07/25/2007	REM	The claim was denied by	4	1	11	1.0	0.00	1966.62		
71055	11/19/2007	86213	OFFICE/PATIENT VISIT	4	1	11	EE	1.0	1.23	105.39	1972.01
71055	11/19/2007	84439	ASSAY OF FREE THYROXINE	4	1	11	EE	1.0	1.23	4.20	1976.21
71055	11/19/2007	RMVSV		4	1	11	EE	1.0	0.00	35.00	1941.21
71079	11/21/2007	86213	OFFICE/PATIENT VISIT	4	1	11	EE	1.0	1.1	105.29	2046.50
81068	12/05/2007	NOTE	Statement Sent	4	0	0	0.0	0.00	0.00	2046.50	

Pat Last Invoice # 71082 Inv Date 12/03/2007 Doctor Last A Braswell, M Crnk Smith CDR

Samual Saamy

Description Code DOS From To Qty Reference Pat Paid

Statement Sent NOTE 12/03/2007 / / 0 0 0.00

Mod1 Mod2 Mod3 Mod4 Pat Billed Day 1 Day 2 Day 3 Day 4 Ins Paid 0.00

POS TOB Pri Billed Chm Status Due By Expected Ins Disallowed Adj Paid 0.00

Sec Billed Balance 0.00



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