Software of Excellence

EXACT New Starter Guides

The material in this booklet is provided to accompany the EXACT Get You Started Training.
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1. A reception users guide to EXACT

Patient calls to book an appointment.

Is the patient an existing patient?

Yes

Double click onto the clipboard and locate the patient. Enter details for the appointment, i.e. service, length. Find an available appointment and drag the patient into the appointment.

When the patient arrives, mark their appointment, to indicate that they are waiting.

Is the patient Exempt from charges?

No

If the patient is not exempt there is nothing more to do until the patient has been seen in the surgery.

Yes

Double click onto the appointment, click onto the ‘Exemption’ button and enter relevant exemption.
To indicate that the patient’s treatment has been completed in the surgery, a ‘hand’ will appear next to their name in the appointment.

Yes

Does the patient need a further appointment?

No

Does the patient owe any money?

Yes

Within the planned treatment area; double click onto the next required appointment; this information will transfer into the service & length fields. Click on the ‘Copy to Clipboard’ button and drag from the clipboard into an appointment.

Yes

No

Does the patient owe any money?

Yes

Click onto the payment button and take a payment from the patient. When you have finished dealing with the patient tick in the box to mark the appointment complete.

No

If the patient does not owe any money, there is nothing more for you to do for this patient except tick in the box to mark appointment as complete.
2. Family appointment guides

2.1 How to book an individual appointment after a Family Appointment.

a. Double click on today’s family appointment when the Hand / Tick appears.

b. If an individual requires a further appointment, the treatment codes will be displayed as shown below:

   ![Appointment Booking Guide]

   c. Click once to highlight the patient requiring a further appointment.
   d. Click the Book Single Appointment button – this copies the patient name onto the clipboard.
   e. Close the open window shown above, by clicking the Cancel button.
   f. Double click the patient name that has been transferred onto the hold list (or clipboard) to open the edit appointment window.
   g. Double click onto the planned treatment and make sure the information has been transferred into the Service field.
   h. Click the SAVE button to replace the new information onto the clipboard
   i. Make the appointment.

   Repeat for any further patient treatment appointments as required.

2.2 How to cancel an entire family appointment

a. Single click on the family appointment that is to be cancelled. A bold black outline will surround the appointment.

b. Click onto the Red cancel button – a message will be displayed asking if you wish to cancel the selected family appointment.
c. Select the relevant cancellation and reason, and then type any notes if required.

2.3 How to rebook a cancelled family appointment

a. Make a note of the date of the cancelled family appointment to be rebooked.
b. Select the Cancels tab at the foot of the Appointment Book.
c. Select the Cancelled status.
d. The cancelled family appointment will be displayed in date order.
e. Find a new suitable date, and drag the family appointment out of the cancels tab and onto the required day and time.

2.4 How to cancel an individual from a family appointment

a. Double click onto the family appointment that has been booked.
b. In the Family Attending box, click once onto the family member that has to be cancelled.
c. Click onto the Cancel button underneath this box.
d. Ensure that the correct patient has been highlighted, and then select the YES button.

e. Select the relevant cancellation and reason, and then type any notes if required.
f. The patient name will be transferred to the Family Not Attending box.
g. If the total length of the family appointment is now to be reduced in length – click into the Total Length field, and make the change that is required.
h. Select the Save button to complete the changes.
3. **A clinical users guide to EXACT**

From the workspace, select **Patients** to open the patient record.

Do you see ‘stick people’ at your door?

- **No**
  - This indicates that you do not have any patients waiting.

- **Yes**
  - This indicates that a patient is waiting. Double click onto the door to view patients that are waiting. Highlight a patient then select ‘move to chair’ then ‘view patient’.

Select the Medical tab and check the patient’s medical history.

Do you need to base chart for this patient?

- **No**
- **Yes**
Go to the Chart tab and select the ‘Base’ tab, ensure that the category is ‘Base chart’ and carry out a base chart on the patient. You are now ready to plan treatment.

Is the patient NHS or Private/Denplan?

NHS/PDS

Private/Denplan

Select the ‘**Private Fees’, or the ‘**Favourite Private Fees’ category.

Select the first item that you wish to chart – remembering that any treatment that is non tooth specific you double click to select and items which are tooth specific you select the service then chart onto the tooth using the left and right mouse buttons. To produce an estimate for the patient click onto the estimate button at the bottom of the chart screen.

Does the patient need any further appointments?

No

Yes

Make any clinical notes by double clicking onto the service and typing. Tick the box alongside ‘Appointment 1’ and press the TC button.
To add additional appointments; position the mouse cursor where you want to add the appointment, in this example the next appointment will be added for the scale & polish – note the position of the arrow acting as a guide.

Once the arrow is in place, right click on the mouse and select ‘Add Appointment’. Next double click onto the bold zero’s and enter the length of time that you require for the appointment.

Make any clinical notes by double clicking onto the service and typing. Tick the box alongside ‘Appointment 1’ and press the ‘Charge’ button. Repeat this process at each appointment, once the treatment is completed press the ‘TC’ button.
4. **EXACT clinical users guide to family appointments**

When a family appointment has been made, the family symbol displays in the View Patient window, together with all a list of all family members to be seen, and a total length booked to cover all these patients.

![Family Appointment Example](image)

- Click once on the first family member that is going to be seen *(Remember this may not necessarily be the first one displayed in the list)*.
- With the correct patient highlighted, click the Move to Chair button, and then the View Patient button.
- When everything has been charted for the patient, and they are ready to leave the chair, use the Charge or TC button as required. Set the recall date as appropriate.
- If the message appears ‘Should the Patient Appointment Be Marked as Complete’ – use the YES or NO buttons as normal.
- Repeat as above, until the last member of the family has been seen.
5. Treatment code shortcuts

Instead of scrolling through the list of services it is possible to jump directly to a specific treatment item (or very near it) if you know the relevant code. To do this simply click once into the area you are searching in (e.g. PVT Favourites) and type on the keyboard the relevant letter (C for Crowns, S for Surgical etc) and EXACT will take you to the first item with that letter. If you are searching for NHS services you must have the ‘Sort by Payor Code’ box ticked and type in the relevant NHS code (01 for Exams, 14 for Fills etc).

**Base Chart**

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td>.B</td>
<td>Bridges</td>
<td>E</td>
</tr>
<tr>
<td>.C</td>
<td>Crowns</td>
<td>M</td>
</tr>
<tr>
<td>.D</td>
<td>Dentures</td>
<td>R</td>
</tr>
<tr>
<td>.F</td>
<td>Fillings</td>
<td>W</td>
</tr>
<tr>
<td>.I</td>
<td>Implants, Inlays &amp; Veneers</td>
<td></td>
</tr>
<tr>
<td>.R</td>
<td>RCT</td>
<td></td>
</tr>
</tbody>
</table>

**PVT Fee List/PVT Favourites**

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
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</tr>
</thead>
<tbody>
<tr>
<td>B</td>
<td>Bridges</td>
<td>P</td>
</tr>
<tr>
<td>C</td>
<td>Crowns</td>
<td>R</td>
</tr>
<tr>
<td>D</td>
<td>Dentures</td>
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<td>E</td>
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<td>W</td>
</tr>
<tr>
<td>F</td>
<td>Fillings</td>
<td></td>
</tr>
</tbody>
</table>

**Favourites (NHS) – Place a tick in sort by payor code.**

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
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<tr>
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<tr>
<td>02</td>
<td>X-rays</td>
<td>18</td>
</tr>
<tr>
<td>10</td>
<td>Scale</td>
<td>21</td>
</tr>
<tr>
<td>14</td>
<td>Fills/Fissure Sealants</td>
<td>27</td>
</tr>
<tr>
<td>15</td>
<td>RCT</td>
<td>36</td>
</tr>
<tr>
<td>16</td>
<td>Veneers</td>
<td></td>
</tr>
</tbody>
</table>
6. **NHS charting pointers**

6.1 **Further treatment within 2 months (formerly continuation treatment)**

This option is found on the Exemption screen. This will be seen when opening an NHS course of treatment (if you do not select this option when you open the course you can always click on the exemptions button at the bottom of the chart screen and click in the box).

6.2 **Free replacement (formerly guaranteed repair)**

This is set on an item of treatment not on the course of treatment. Double click on the item that is to be repaired and click in the free replacement box, the fee will then be removed from that item.

6.3 **Incomplete treatment**

If a patient fails to return to complete their treatment you will need to TC the course of treatment to claim the UDA’s for the treatment you have carried out. To do this go to the patients chart tab and click onto the TC button at the bottom of the screen (do not tick the incomplete items). The system will ask you which charge band you would like to claim because it may be possible to claim a higher charge band if you have started the treatment. Click on the band you would like to claim and then on the Send Claim button on the FP17 form.

6.4 **Urgent treatment**

**EXACT** has used the old NHS occasional treatment codes as urgent treatment. Select the ‘Occasional Treatment’ or ‘Urgent’ category in the chart tab and select the item of treatment to be carried out and it will bring up the 1.2 UDA’s and the relevant patient charge (unless Issue a Prescription is selected which will attract 0.75 UDA’s and no charge). TC the course as normal and if the patient requires further treatment open a new course.
7. Rectifying charting errors

On occasions mistakes may be made when charting NHS treatment, with NHS treatment once the service has been charged it is then ‘locked’ and changes cannot be made without performing one of the processes described below. Whenever changes are made to a course of treatment, EXACT generates a record of the original treatment – it is never deleted, just ‘hidden’. The following chart will assist you when choosing the process to use when rectifying any mistakes that may occur:

- **Has the treatment been ticked?**
  - **No**: Either right click onto the treatment and select ‘Delete’, or drag the treatment to the dustbin.
  - **Yes**: Untick the item and then delete it, as described above.

- **Has the treatment been charged?**
  - **No**: Untick the item and then delete it, as described above.
  - **Yes**: Is the treatment still in the chart tab?
    - **No**: Has the treatment been TC’d?
      - **No**: The exemptions need re-enabling for this treatment – refer to Re-enabling Exemptions below.
      - **Yes**: This treatment needs to be resubmitted – refer to Resubmitting Treatment below.
    - **Yes**: The exemptions need re-enabling for this treatment – refer to Re-enabling Exemptions below.
7.1 Re-enabling exemptions

This process will allow you to remove any invoices that have been created for NHS treatment; this process only works prior to the treatment being TC’d, once the invoices have been removed the treatment can be amended.

a. With the incorrect, charged, treatment on the screen click onto the ‘Exemptions’ button.

b. An additional button appears on the exemptions screen, this button is only visible when treatment has been charged. This is the ‘Re-enable Exemptions’ button.

    ![Re-enable Exemptions button](image)

    Re-enable Exemptions button.

c. Click onto the ‘Re-enable Exemptions’ button. The following screen will then appear informing you of the process that is about to take occur:

    ![Enable Exemptions](image)

    Enable Exemptions

    Enabling exemptions reverses the effect of charges created on a COT, allowing the COT to be completely reversed. The following actions are taken:
    1) Copy charged treatment history as void.
    2) Create new treatment of treatment items in the treatment plan.
    3) Mark invoices for the COT as unallocated.
    4) Create credit adjustments to the patient’s account to reverse charges.

    Continue?

    ![Yes No](image)

    d. Select ‘Yes’.
e. This will return you to the treatment plan; all charges will have been reversed. Any incorrect treatment can now be un-ticked and amended.

7.2 Resubmitting treatment

If NHS treatment has been TC’d it is not possible to re-enable the exemptions, in this instance the resubmitting process needs to be implemented.

a. From the patients transaction screen (£) highlight the course of treatment that you wish to amend.
b. Click onto the ‘Resubmit’ button, at the bottom of the screen.
c. A screen will appear informing you of the process that is about to take place. Select ‘Yes’ to the prompt that appears on this screen.
d. This will then return you to the treatment plan; all charges will have been reversed. Any incorrect treatment can now be un-ticked, amended and TC’d.

Please refer to the Responses and Resubmissions tutorial for further information on resubmitting treatment.
8. Transmission set up

Carry this out on the pc that has the modem or broadband attached to it. Before you start this you will need your DPD site number, which the NHSBSADPD will have issued you with, and the current password (if you have not been told this contact the EDI support desk on 01323 433560). You will need to create a WEBEDI account on the internet, to do this go to:

https://ebusiness.dpb.nhs.uk/reginfo.asp

and follow the links from there. Remember to print out a copy of your account details for future reference.

   a. Go to the File menu.
   b. Select Payors.
   c. Enter NHS or PDS in the code field (Alternatively you may already have NHS set up on your workspace bar, if so click onto this).
   d. Click onto the Transmit set up button.
   e. Follow the wizard, in conjunction with the WEBEDI information that you have and the documentation supplied. Keep the WEBEDI details in a safe place; you may need to refer to them at a future date.

Transmission problems

Occasionally when transmitting problems may occur, you will be given a message informing you of some possible causes, below are listed some common problems:

   a. Ensure you can connect to the internet.
   b. Some WEBEDI information may be incorrect i.e. incorrect username or password, in which case refer to your printout to check that all information has been entered correctly.
9. Claims and transmitting

9.1 Claim bundles

Before completed work can be transmitted to the NHSBSADPD for processing and payment, they must first be placed into a claim bundle.

A claim bundle does not have to be of any particular size, it can contain only one claim if necessary. It is simply a way of EXACT preparing the files to be transmitted.

Consider it as all of the electronic FP17 forms being placed into an electronic envelope for posting.

To create a claim bundle, the user must enter the **NHS/PDS Payor** file. This is accessed by:-

- a. Select **File** then **Payors** and select **NHS or PDS** from the list.
- b. Setting up a shortcut on the **Workspace**.

You will see the following screen.

![Image of the EXACT interface]

- c. Click **Claim**. A window will appear prompting the user to enter which Provider(s) and up to what date would they like to claim.
d. Select either a single or multiple providers to be bundled into this claim. The date box defaults to today’s date but can be altered if required.

e. Click OK and the user will be prompted to enter each Provider’s six digit PIN number.

NB: It is possible to store PIN numbers against providers, to do this go to the Provider File and enter a PIN number within the NHS Details tab. If PIN numbers are stored the above screen will not appear when creating a claim bundle.

Once the PIN number is entered and you click OK, the bundle is created.

The option to print a claim summary is available if required. Otherwise, click Cancel.

If you have not printed a claim summary, it is possible to do this at a later date by viewing and printing the individual claim.

To do this, Click Administration then NHS and List Claim Bundles.

From here double click on the claim to view the names of the patients and the amounts being claimed. Alternatively use the print claim button at the bottom right hand side of the screen.

**9.2 Transmitting and receiving**

Now that you have created a claim bundle, the work is ready to be transmitted to the NHSBSADPD.

Once again you will need to be in the NHS or PDS Payor file.

Click Transmit Claims.
Your computer will connect to WebEDI and you will be logged into your mailbox and the transmitting of claim bundles will begin.

Once this has completed, any response files and payment schedules that are in your mailbox awaiting collection will automatically be downloaded.
10. Listing and interpreting responses

Listing NHS Responses

The List Responses window is used to view the messages received from the NHSBSA Dental Practice Division and to initiate the resubmission of a Claim. These can be found from the ‘Administration’ menu, select ‘NHS’ then ‘List Responses’ or if you have the NHS shortcut in your workspace click on the arrow to the right of it and select ‘Responses’.

Responses are either resolved if you are happy with the message or resubmitted if not. Resolved responses can be viewed at any time by clicking the ‘Show Resolved Responses’ box at the bottom of the screen. **We do not recommend deleting responses.**

Standard Response Messages

Claim Bundle Acknowledgement

<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
<th>No.</th>
<th>Status</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>20/04/05</td>
<td>18/04/05</td>
<td>2317</td>
<td>4</td>
<td>NS National Health Service</td>
</tr>
</tbody>
</table>

Transmission with sequential serial number 002837 acknowledged.

The NHSBSA Dental Practice Division will send confirmation for every claim bundle received successfully. These can be resolved with no further action required.

The List Claims window is used to ensure that all Claim Bundles transmitted have been received.

Broadcast Messages:

Response message updates have taken place. On most systems this will not be noticeable. If this causes you any problems, please contact your system supplier.

Messages from the NHSBSA Dental Practice Division range from detailing upcoming changes to wishes for a Merry Christmas. These can be marked as 'Resolved' once read by the appropriate staff.

Claim Problems

If a claim has been rejected, the response message will explain the reason for rejection and quite often explain how to correct this.

**NOTE:** If the response message contains text in UPPERCASE this is often where a NHSBSA Dental Practice Division staff member has hand typed the response message. Further clarification of a Response can be given by contacting their helpdesk.
EDIFACT Format Error

If one of these messages is received it relates to missing information, e.g. missing patient details or no observations written when required.

**NOTE:** EXACT where possible generates an error message to prevent claiming if key information is missing. If a message similar to this is received, check the patient's details screen. Look for: a missing title, a space before either the first or last name, or a space before the first line of the address. If any of these need amending do so and then retransmit. If the patient's details appear complete but the transmission still fails due incomplete information, please contact Software of Excellence for further assistance.

To Resubmit a COT from the List Responses Window

a. Highlight the response entry and click the Resubmit button. A dialog box will appear to confirm that the resubmission should occur, as shown below:

![Resubmit dialog box](image)

b. Click the 'Yes' button to continue.

c. From the 'File' menu or the Workspace Bar, click 'Patients'. EXACT will automatically open the patient record for the highlighted patient in the 'List Responses' window.

d. Click the 'Chart' tab and make the necessary changes to the COT; e.g. add/remove services, alter FP17 Details, etc.

**NOTE:** All Services that are ticked as completed will be given today's date. After ticking a service as completed, alter the date (both the planned and completed) to the actual date of treatment. Failing to change the dates back to the true date of treatment may cause a further rejection when resubmitting the claim. To amend the date, tick the item as complete, double click on the date, and enter the date treatment was completed in the 'Completion date' field.

e. TC the Course of Treatment.
f. Verify that the FP17 details are correct and enter observations if necessary.

g. Click 'OK' and the amended COT will be added to the Claims waiting for transmission.

**NOTE:** The resubmission process can be repeated if the amended Claim does not satisfy the NHSBSA Dental Practice Division. If the amendment has satisfied the NHSBSA Dental Practice Division, no further responses will be received, not even to acknowledge the amended Claim is accepted. The claim will appear in the 'Summary of Forms Processed' section of a schedule.

h. If a COT is resubmitted more than once, then the auto text for observations may be added again. Before moving on the duplicated text should be deleted.
11. NHS schedule reconciliation

NHS Schedules in England and Wales require little in the way of reconciliation as there are no real fees attached to these. However they do contain information which can affect your UDA totals and thus your financial situation.

UDA’s = INCOME.

There may also be some discrepancies in patient payments if practices have not applied charges correctly. If a patient has not been charged when they should have been the DSD will subtract this amount from the overall UDA value i.e. UDA value is £25 the patient should have paid £16.50 but didn’t the practice will still only get £8.50 from the board, therefore leaving the practice £16.50 out of pocket.

Therefore checking schedules and making adjustments to them is essential for accurate reporting.

To get into the electronic schedules you click on the side arrow on the NHS shortcut in your workspace or go in through Administration – NHS

Select Payment schedules this will then present you with an option to select a specific date range and provider (if you want to run for all providers leave the provider box blank).

A creating payment schedules box will appear and then the list of schedules for the given period will appear.
Double click on the selected schedule and this will then open up the electronic schedule for you.
The first page that appears is the page where any differences will show. These are differences between what the board (DSD) say and what EXACT says. This can be both UDA and monetary differences. These are the claims that need to be adjusted.

Check **each case** to see if you agree with the DSD or not. If you do not agree; click on the resubmit button to send the items back to the chart, make any adjustments and re TC the claim. If you do agree with the board, click the adjust button and this will bring up an adjust claim window.

![Adjust Payment Schedule](image)

Please note this shows only patient fee here but if there is a UDA difference it will show this and allow you to make the appropriate adjustments. Please note that you cannot make upward adjustments i.e. if EXACT says no UDA’s but the board says 1.00. However in V10 there is an overpaid UDA report which will show any instances of this. These can then be added to manually to any other UDA totals.

Once the adjustment is made it will change the total of UDA’s or the patient payment amount in the system accordingly.

This process will ensure that the UDA’s in the system will assimilate to the totals confirmed by the DSD on the paper schedules.
12. Tracking UDA’s in EXACT

When UDA totals look incorrect it must be established on what foundation this assumption is based.

Before starting a full investigation there are some steps which must be completed to eliminate common causes for discrepancies.

a. Contact the NHSBSA to establish the figure they hold for confirmed UDA’s. (If this differs significantly from the total in EXACT you should investigate the following) It is worth remembering that the board figure may be different because figures only become confirmed in EXACT once a month.

b. Check your claim bundles to ensure they have a telephone icon with a red tick next to each bundle. This means that the bundle has transmitted. The bundles should also have a separate black tick beside the telephone - this indicates the board have received and acknowledged the bundle. To check your bundles go to:

Administration > NHS > Claim Bundles.

If any of the bundles have red crosses or are missing black ticks check that the COT’s within the bundle have reached a schedule. To check go to the patients £ sign, highlight the COT and click on COT View. You will see if the COT has reached a schedule. If not you can undo bundles so they can be resent. To undo a bundle go to:

Administration > NHS > Claim Bundles. – highlight the affected bundle and click on the dustbin icon bottom right. When you next claim and transmit claims these will be rebundled and sent to the board. You may need to be logged on with a super user or administration password to delete a bundle.

c. Check responses. If any responses have a patient name within them they require action. If the response is for an incorrect PIN number the bundle can be deleted and resent. Please check you have the correct pin number in the dentists provider file before resending.

If the response is regarding an incorrect contract number this could mean:

I. The provider number is incorrect in EXACT
II. The provider has not been assigned to the contract at the NHSBSA.

Check with the board to ensure you have the correct provider details and that the provider is assigned to the contract.

EDIFACT FORMAT Errors usually indicate that only a non-banded treatment item has been transmitted, usually an Autonote.
NB: If the NHSBSA have passed a course of treatment back to you; and if you do nothing then the claim will not be processed, and that will result in UDA’s not being processed.

Check resolved responses as well to ensure they have been dealt with and not just accepted.

**Examples Of Responses That Require Action**

<table>
<thead>
<tr>
<th>Date</th>
<th>PIN</th>
<th>MAP</th>
<th>Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>21/09/08</td>
<td>65578</td>
<td>MAP</td>
<td>Miss Alexandra Cunningham</td>
</tr>
<tr>
<td>21/09/08</td>
<td>65866</td>
<td>MAP</td>
<td>Miss Brooke O’Donnell</td>
</tr>
<tr>
<td>21/09/08</td>
<td>65987</td>
<td>MAP</td>
<td>Miss Claire Brayshaw</td>
</tr>
<tr>
<td>21/09/08</td>
<td>65954</td>
<td>MAP</td>
<td>Mast Luke Shulfebottom</td>
</tr>
</tbody>
</table>

- **d.** Check the electronic schedules and ensure there are no discrepancies which should have been paid. **EXACT** now automatically reconciles the UDA values in the system but if you have claimed for a COT and the UDA’s have not been allocated by the board you will need to investigate this fully and either accept or resubmit the claim, amend and resend.

- **e.** Run the “list courses of treatment” report and look for COT’s which have been transmitted but are not on a schedule. To run this report go to:

  **Administration > NHS > Courses of Treatment.** Click on the printer icon, bottom right and run the report as shown in the diagram below.
COT’s in this report will include:

I. COT’s that have very recently been TC’d but not bundled or transmitted – no action required.

II. COT’s that are due to reach the next schedule – no action required.

For this reason it is best to run this report just after you have received your electronic schedules.

Please check this report carefully and see if there are any COT’s that do not apply to the above categories and that need to be followed up because they have not reached a schedule.

If you still have any problems with UDA/UOA totals after working through all of the above processes please contact the support team who will investigate further.
13. Working with converted data

Note: This section is only relevant if you have had your data converted from a previous computer system.

13.1 Inactive Courses of treatment

Some conversions may bring over open courses of treatment from your old software (these are marked as inactive in EXACT). These are for information purposes only and should not be used to claim from the NHS (the treatment codes will not attract any UDA’s and the course of treatment number may have already been used). You should create a new NHS course of treatment by using the ‘+1’ button on the chart tab for the patient and rechart the outstanding treatment using the treatment codes from EXACT. When this has been done you can reactivate the converted course of treatment (by clicking on the red cross) and delete the converted course of treatment.

13.2 Checking responses

You should check your responses as soon as you receive them (when you transmit EXACT will automatically check for any responses and payment schedules). You can find responses from the Administration menu, NHS and click on to Responses. If there are a lot of responses about individual claims (Duplicate claim received, EDIFACT format error etc) then please contact the helpdesk as soon as possible so that we can assess what needs to be done to rectify any issues.

13.3 Converted appointments

If you have appointments converted from your old system they will generally have the word ‘Other’ in the service box. This is because there is no correlation between the codes in the two systems. The ‘Notes about this appointment’ box will normally contain the information about the service (e.g. fills, xla etc). The appointments that have been converted will also have been created by the user ‘Conversions’ which can be useful when trying to see if the appointment appeared in your old system or has been created since you started using EXACT.
### 14. A guide to EXACT reporting

<table>
<thead>
<tr>
<th>Question</th>
<th>Allocated Payments</th>
<th>Receipt Analysis</th>
<th>Invoiced Work By Owning Dentist</th>
<th>Income Cycle Reconciliation</th>
<th>Invoiced Treatment</th>
<th>UDA/UOA Report</th>
<th>Debtors List</th>
</tr>
</thead>
<tbody>
<tr>
<td>How can I find out how much money I have taken divided into NHS &amp; Private?</td>
<td></td>
<td></td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Can I find out which payment methods this money was paid with?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>How can I find out how much treatment has been invoiced by each provider, both NHS &amp; Private?</td>
<td></td>
<td></td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Can I find out which treatments have been carried out the most?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Can I find out how many UDA’s I have carried out?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Can I produce a list of patients that owe money to the practice?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Question</td>
<td>Report to use</td>
<td>List Outstanding Treatment</td>
<td>Appointment Analysis</td>
<td>New Patients By Referral</td>
<td>Chair Time Analysis</td>
<td>Work in Progress</td>
<td>Stock Sales</td>
</tr>
<tr>
<td>-------------------------------------------------------------------------</td>
<td>---------------</td>
<td>----------------------------</td>
<td>----------------------</td>
<td>-------------------------</td>
<td>--------------------</td>
<td>------------------</td>
<td>-------------</td>
</tr>
<tr>
<td>Can I find patients with outstanding treatment?</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>How do I find the number of new patients to the practice within a given period?</td>
<td></td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Can I find out how many patients have failed/cancelled in a given period?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Can I find the value of income that was lost due to these patients failing/cancelling?</td>
<td></td>
<td></td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Can I find out how long a patient has spent in the chair?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Can I find out how much potential income is 'sitting' on the system?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Can I find out how much stock I have sold within a given period?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>
15. Creating queries

This document is to help you create some commonly used search queries in EXACT. These can be created and used from Administration > Contact Lists to enable you to contact a specific group of patients.

Method

Queries can be created from numerous places within EXACT but the preferred method is as below.

a. Go to Administration > Contact Lists.
b. Click on Create List and the following screen will appear:

c. Click in the select patients box and the lined menu button (Select a Query Template) will appear to right of that box
d. Click on the Select a Query Template button and this screen will appear:
15.1 Searching for patients with no appointments in the last 2 years

Follow the procedure above and then type in your description (e.g. Patients with no appts in last 2 years) and select the following search conditions:

a. **A check in ‘inactive’**, click on OK and select ‘Patients without’ from the drop down list (this means that your search will only pick up active patients). This should look like this.

b. Click on **OK**.

c. **Any Appointment**, click on OK and select ‘Patients without’ from the drop down list and then enter the date code of ‘D/M/Y-2’ in the **From Date** box and ‘D/M+3/Y’ in the **To Date** box (this means we are searching for patients with no appointments from 2 years ago up to 3 months into the future, this is done in case some of the patients realise they have not been in for some time and have booked an appointment). The screen should look like this:
d. Click on **OK**
e. The query template should look as below:

![Query Template](image)
f. Click on **‘OK’** and the query will now be saved into your list of available search queries and can be used at any time.

To run the list click ok to all screens and unless you are running a recall list say ‘no’ to the ‘is this a recall list’. Your patient search will now start to run. This may take a few minutes.

**N.B.** Date codes are used so that the query can be used at any time and the date options never need to be changed manually.

### 15.2 Searching for patients by ‘Type’

Follow the procedure above and then type in your description (e.g. Patients with a type of PVT) and select the following search conditions:

a. **A check in ‘inactive’,** click on OK and select ‘Patients without’ from the drop down list (this means that your search will only pick up active patients). This should look like this.
b. Click on **OK**

c. **Type 1**, click on OK and select the relevant type by clicking into the type box and either using the scroll box or by clicking on the lined menu button (Select a Query Template) and selecting from the list of types. The screen should look something like this:

![Edit Patient Selection](image)

b. Click on **OK**

c. **Type 1**, click on OK and select the relevant type by clicking into the type box and either using the scroll box or by clicking on the lined menu button (Select a Query Template) and selecting from the list of types. The screen should look something like this:

![Edit Patient Selection](image)

d. Click on **OK**

e. The query template should look as below

![Edit Query Template](image)

f. Click on ‘**OK**’ and the query will now be saved into your list of available search queries and can be used at any time.

To run the list click ok to all screens and unless you are running a recall list say ‘no’ to the ‘is this a recall list’. Your patient search will now start to run. This may take a few minutes.
15.3 Searching for patients by dentist

Follow the procedure above and then type in your description (e.g. Patients with a dentists of RGP) and select the following search conditions:

a. A check in ‘inactive’, click on OK and select ‘Patients without’ from the drop down list (this means that your search will only pick up active patients). This should look like this.

b. Click on OK

c. Dentist, click on OK and select the relevant dentist by clicking into the dentist box and either using the scroll box or by clicking on the lined menu button (Select a Query Template) and selecting from the list of dentists. The screen should look something like this:

d. Click on OK

e. The query template should look as below

f. Click on ‘OK’ and the query will now be saved into your list of available search queries and can be used at any time.
To run the list click OK to all screens and unless you are running a recall list say ‘no’ to the ‘is this a recall list’. Your patient search will now start to run. This may take a few minutes.

15.4 Searching for patients by age group

Follow the procedure above and then type in your description (e.g. Patients aged between 25 and 45) and select the following search conditions:

a. **A check in ‘inactive’,** click on OK and select ‘Patients without’ from the drop down list (this means that your search will only pick up active patients). This should look like this.

![Edit Patient Selection](image)

b. Click on **OK**

c. **Date of Birth,** click on OK. Type in the relevant date code (in this case D/M/Y-45 to D/M/Y-25, this will pick up all patients who were born from 45 years ago today to 25 years ago today). The screen should look like this:

![Edit Patient Selection](image)

d. Click on **OK**

e. The query template should look as below

![Add Query Template](image)
f. Click on ‘**OK**’ and the query will now be saved into your list of available search queries and can be used at any time.

To run the list click ok to all screens and unless you are running a recall list say ‘no’ to the ‘is this a recall list’. Your patient search will now start to run. This may take a few minutes.

**Useful Date codes for searching by age:**

<table>
<thead>
<tr>
<th></th>
<th>Date of birth from</th>
<th>Date of birth to</th>
</tr>
</thead>
<tbody>
<tr>
<td>All adult patients</td>
<td>D/M/Y-99</td>
<td>D/M/Y-18</td>
</tr>
<tr>
<td>All child patients</td>
<td>D+1/M/Y-18</td>
<td>D/M/Y</td>
</tr>
</tbody>
</table>
16. **Add user/provider wizard**

This wizard on the Configure menu is available to users with practice manager-level security (or above), and allows easy creation and set up of a new user/provider. The Wizard is also available using the "Edit Provider Wizard" button on the File > Providers window.

As the wizard screens themselves contain fairly explicit instructions, the following help provides only brief details for the user.

**NOTE:** The new user/provider record is not actually created until the very last screen of the wizard is completed. This will be either when the Finish button is clicked, or - if the last screen is a Contract screen - when the OK button is clicked.

Up until this point, if the Cancel button is clicked, the new user/provider has not actually been added to EXACT.

a. Select "Add User/Provider" from the Configure menu:
b. The first window of the Wizard will be displayed:

![Add User Wizard](image)

---

**People - Basic Details**

Please enter the initials of the provider that you wish to add

<table>
<thead>
<tr>
<th>New User</th>
<th>EBE</th>
</tr>
</thead>
</table>

Does this user require an appointment book?  
**Yes**
**No**

Click 'Next >' to start.
c. Enter the initials of the new provider; if these already exist, an error message will alert you to this (You must indicate whether the new user requires an appointment book before you can continue).

d. If you choose to answer 'No' to this prompt, then the button on the next screen of this wizard will change to a button.

e. The second window of the Wizard sets security for the new provider:

f. Enter (or select using the or buttons) the appropriate Security Group, and whether this user has admin privileges. You may set the password options according to your practice's security policy. Password security can range from light (password never needs changing) through to strict (forcing the user to change their password regularly).

At this point, you can set a password for the user if you wish, and if necessary force them to choose a new confidential one of their own the next time they log in to the system.

**NOTE:** If you answered 'No' to the "Does this user require an appointment book?" prompt on the previous screen, then the button will have been replaced by a button, and this will be the last screen of the wizard.
g. The next screen enables you to enter the new user's full name, qualifications, title and Provider Type. You may also choose to have one of your preset email message reminders sent to this provider's email address whenever an appointment is made with them.

![Add User - FDB](image)

h. If you require the provider's private address and contact details to be entered, you may do this on the next screen, or skip it by clicking the button to continue.
i. Use this screen to set colours used in the practice diary, making sure they are distinct from those for other providers by clicking the **Review Provider Colours** button:

![Review Provider Colours](image1)

j. Follow the instructions on the next screen to specify the appropriate rota type.

![Specify Rota Type](image2)
The button clicked on this screen will open the appropriate rota window to enable the provider's work/break hours to be set. Below is an example of the blocks set up on the Multi-week Rota screen:

k. Select the appointment book(s) the provider is to appear on. If the provider is already on a book or room, then the entries will be ticked by default:
**NOTE:** You will be required to select (or be on) at least one book or room before you are allowed to continue.

Select books or rooms by placing a tick in the box on the line describing the appointment book. At this stage you can only add the user to existing rooms or appointment books.

If the appropriate book or room is not present for some reason, you will have to complete adding the provider details, save the record, then create an appointment book.

The **button allows you to edit the details of the highlighted book or room.**

When you click the **Next >** button, if the newly created provider is not already present on each of the ticked books then (s)he will be added as a **wide** column to the end of each of the ticked books. If a narrow column is required, you will need to edit the book.

**1.** If you have NHS commitment the wizard will ask you to enter a performer number, PIN number and an activation date for the new provider. You will also be asked to select which contract to add them to (or if you would like to create a new contract for them):
m. When you have selected the contract you wish to add the new provider into ensure that there is a check in the ‘Configure Contract and Target’ check box and click on ‘Finish’. The ‘Edit PCT Contract’ screen will appear and you can allocate the UDA/UOA targets as appropriate.
17. Annual registration process

Every 12 months you will be expected to re-register EXACT. You will be warned about this 14 days before expiry so that you have plenty of time to deal with the situation.

**DO NOT LEAVE IT UNTIL THE LAST MINUTE OR YOU MAY NOT BE ABLE TO ACCESS YOUR SYSTEM.**

When you try to log into your system you will receive the following message:

![Registration message](image)

Click on the **Register Now** button. The following screen will appear:

![Registration options](image)

If you do not have an email account set up in EXACT click on the **Fax or Post** button and the re-registration form will be printed out on your default printer ready to fax or post.

If you do have an email account set up in EXACT click on the **Email** button and a copy of the re-registration document will be automatically sent (all emails in your outbox will be sent at the same time).

The registrations team will then contact you direct and talk you through the re-registration process.
18. Who should I contact for help?

General EXACT Queries

Contact the SOEUK Support Desk on 0845 345 5767

NHS Transmission Queries (PIN Numbers, Site Number, WEB EDI etc)

Contact the EDI Helpdesk on 01323 433560

General NHS Queries (Regulations, Price Bands etc)

Contact the NHS Dental Helpdesk on 01323 433550
or 0845 126 8000

PCT Contract Information (Provider/Performer numbers, UDA Targets etc)

Contact your local Primary Care Trust or Local Health Board.
19. Support escalation document

Objective:

The aim of this document is to ensure that you can contact senior members of staff if you feel you have an issue that has not been resolved to your satisfaction. Please make sure that relevant members of your staff have access to this information.

Contact details:

Standard support hours are Monday to Friday 8:00am to 6:00pm and Saturday 9:00am to 1.00pm, excluding English public holidays.

Emergency Support will be made available to Ireland when not coinciding with English public holidays.

The Support telephone number is 0845 345 5767, alternatively e-mail support@soeuk.com

Our aim is to answer all calls directly by a trained support technician. During busy times please hold to allow us to answer your call – our team will know you are waiting.

Please note:

If you feel that you have not received an acceptable level of service then please contact a member of the Software Support Management Team detailed below:

Nelson Cooper Support Team Leader Tel: 0845 345 5767 Ext: 1394
E-mail: Nelson.Cooper@henryschein.com

Malcolm Bennison Support Team Leader Tel: 0845 345 5767 Ext: 1354
E-mail: Malcolm.Bennison@henryschein.com

Richard Collins Support Team Leader Tel: 0845 345 5767 Ext: 1393
E-mail: Richard.Collins@henryschein.com

Simon Mills Support Team Leader Tel: 0845 345 5767 Ext: 1394
E-mail: Simon.Mills@henryschein.com

Lesley Naismith Support Manager Tel: 0845 345 5767 Ext: 1392
E-mail: Lesley.Naismith@henryschein.com

Ben Flewett Head of Support and Services Tel: 0845 345 5767 Ext: 1901
E-mail: Ben.Flewett@henryschein.com
If you have an issue that you feel is related to Administration, Conversions, Training or Project Management please contact:

Pat MacTaggart  Operations Manager  Tel: 0845 345 5767 Ext: 1905
Email: Pat.MacTaggart@henryschein.com
20. **Training school information**

20.1 **Course information**

Software of Excellence Classroom Training Courses are held regularly throughout the year. These courses are not only a good opportunity to learn more about EXACT, but are also an ideal opportunity for networking with other users and sharing ideas.

**Please contact the internal sales team on 0845 345 5767 if you would like information on a training school in your area.**