HLP_CALLPG,C,	HLP_INPVAR,C	CHLP_SCREEN,C,128
		F1 = Help F9 = Diagnos Alt F3 = Lock Alt A = Aging
		F2 = Add $F10 = Chart$ Alt $F5 = Calender$ Alt $B = Balance$
ALINELP	ALINELP	Use the left and right arrow keys to highlight the main i
		program area to select OR press the first letter of that item. i
WINMENU	MAINSEL	
		Up Arrow = Up one line Home = To left column F4 = Select
		Dn Arrow = Dn one line End = To right column Esc = Exit
NAVIGATE	NAVIGATE	LLAI
PATIENT	PAT CAT	you to assign patients to various Categories. These Categories i
	—	Use this field to indicate the Doctor that this patient ì
		usually sees. This will then be automatically entered during ì
PATIENT	PAI_DOC	Ir Detionation Francisco Activity - Demoitted acides area
		Patient's Employment Status. Permitted codes are:
		Y or F = Full Time P = Part Time
PATIENT	PAT_ESTAT	blank or
		For practices with multiple offices (but just one billing i
PATIENT	PAT_LUC	This field is for the Dationt's Marital Status Allowable)
		codes are:
		S = Single M = Married
PATIENT	PAT_MSTAT	X = L
		This field fills one of the boxes in 10b or 10c on the red i
PATIENT	PAT_RELACC	Student Status Indicator The codes permitted are:
		Statent States indicator. The codes permitted are.
		F = Full Time
PATIENT	PAT_SSTAT	P = Part T
		I his field is used to indicate to the Statement Print I
PATIENT	PAT STMADR	stat
	—	Use the up and down arrows to highlight your selection and ì
		press Enter OR just press the first letter if it is unique. \hat{i}
WINMENU	SUBSEL	The Billing Type field is the most important field on the)
		transaction line in the WinMed system. This field determines i
TRNBROWUSR	TRN_BILTYP	
		Enter the fee for the service performed on this line. If ì
TRNBROWUSR	TRN_CHARGE	the fee is already filled in from having entered the procedure i
		I his is a free format entry field for your own use. How- i
TRNBROWUSR	TRN COMM	fi
	—	This is the DATE OF SERVICE 'From' date which will be ì
		printed in Item 24A on the HCFA 1500 form. The 'To' date is $\ensuremath{\hat{i}}$
TRNBROWUSR	TRN_DATE	enter This is the Discussion Indianter field. Has this field to ?
		This is the Diagnosis indicator field. Use this field to i show which of the four Diagnoses (from the Patient record) i
TRNBROWUSR	TRN_DIAIND	mat
	_	This Doctor field is needed to tell which provider in the ì
TRNENTRY	TRN_DOC	practice performed the particular procedure shown on THIS LINE.

TRNENTRY	TRN_LOC	Lc stands for Location and is used in multiple office i practices to indicate the office where the procedure was i performed
TRNBROWUSR	TRN MOD1	will be printed in Item 24D on the HCFA 1500 form. If you have i
TRNENTRY	TRN_MOD2	This is the second Procedure Modifier. Use this field ${\rm i}$ when there is more than one modifier for a procedure. This ${\rm i}$ will
TRNBROWUSR	TRN PAYMNT	The Transaction Entry Payment should only be used when the ì patient makes a payment along with a charge. Otherwise, you
TRNBROWUSR	TRN PMTTYP	Use this field to indicate the method or form of payment. ì The codes used are usually CA for Cash, CK for Check, and ì pos
TRNBROWUSR		Enter the procedure code to be printed in Item 24D of the ì HCFA 1500 form. You can enter any combination of letters and ì
TRINBROWOSK	IKN_FROC	The Responsibility Indicator is the most important field on i
TRNBROWUSR	TRN_RESIND	the transaction line in terms of the practice accounting. If The Type of Service can be a number or letter character. ì
TRNENTRY	TRN_TOS	This number is usually different for Insurance carriers, i BlueCr Besides printing on forms, the Units field acts as a i
TRNENTRY	TRN_UNITS	multiplier for the Charge field. Changing the number of Units ì will
TRNBROWUSR	TRN_RPTMTH	by WinMed as you post transactions. The only time YOU would i This field is where you would enter an Adjustment for the i
TRNBROWUSR	TRN_ADJUST	transaction line. An adjustment is usually entered as a posi- ì If you enter an Adjustment on a line, use this field to ì indicate the Type of Adjustment – For example, WQ might mean ì
TRNBROWUSR	TRN_ADJTYP	tha This field is provided for internal office use. Enter the i
TRNBROWUSR	TRN_RECPT	receipt number or super bill number from the forms you use with This field is for the Place of Service column 24B on the i
TRNBROWUSR	TRN_PLACE	HCFA 1500 form. Note that the codes are probably different for i
TRNBROWUSR	TRN_REF	UPIN number) on the HCFA 1500 form, you must have their record ì If the Patient has services done at some other location (or ì
TRNBROWUSR	TRN_FAC	a 'part' of your office is considered a seperate Facility) the This field will be filled in automatically by utilizing two ì
TRNBROWUSR	TRN_DIAG	other fields: the first digit of the Diagnosis Indicator field This is the Date of Service 'To' date. You do not normally ì
TRNBROWUSR	TRN_DATETO	need to fill in this field, particularly if there is only ONE This field is a copy of the Patient Category field from the ì
TRNBROWUSR	TRN_CAT	Patient File. It is placed on each transaction line in order This field is a copy of the Patient's Primary Insurance ì company at the time you entered this transaction line. It is ì
TRNBROWUSR	TRN_INS1	ut This is the Account Number for this transaction line. DO ì
TRNBROWUSR	TRN_ACCT	NOT change this number once it is assigned without advanced i kn

		Select your Transaction Entry operation from this Command ì
TRNENTRY	TRNMENU	Menu. Use the left and right arrows to scan the selections and
		Choose your Open Payment Entry operation from this Command ì
		Menu. Use the left and right arrows to highlight the i
OPNENTRY	OPNMENU	selecti
		This field will fill in one of the boxes in item 10a of the ì
PATBROWSE	PAT_RELEMP	new red HCFA 1500 form to answer whether the patient's condi-
		This Special Select field is an eight character field for i
		your own use. When converting from other systems or paper ì
PATBROWSE	PAT_SPEC	acc
		This is the Remarks Print field. Some printed forms have i
PATBROWSE	PAT_REMARK	an area set aside for you to enter Remarks or Comments relating
		Use this field to tell the Insurance Form Print program i
		what to print in Item 4 on the form: leaving this field blank i
PATBROWSE	PAT_BOX4	wi
	_	This field is printed on the HFCA 1500 form when printing ì
		Medicare claims, and also determines how the rest of the form i
PATBROWSE	PAT_BOX10D	
	_	This field fills in one of the boxes on the HCFA 1500 form ì
PATBROWSE	PAT BOX11D	in Item 11d. Refer to the Medicare instructions for your state
	—	The Medicare instructions for most states require that you i
		add a word such as MEDIGAP, MEDICAID, or SUPPLEMENTAL before i
PATBROWSE	PAT BOX9A	
	—	This program is the result of over 13 years experience i
		specializing in medical and dental billing. Also available are i
	ABOUT	W

HLP_COUNT,N,5,0

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