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Everything you need in practice  
management – and more.

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**medisoft®**

**MCKESSON**

[www.MedicalCharting.com](http://www.MedicalCharting.com)

# At a value that respects your bottom line.

*The Medisoft® practice management system from McKesson has long been considered the best value on the market. With the addition of Medisoft Reports and Medisoft Clinical, Medisoft Version 15 (v15) gives you a new level of features, capabilities and greater value — the perfect money-saving solution for your practice in these challenging financial times.*

Until recently, software reviewers, medical software specialists and medical billing experts cited “reporting” as the primary difference between Medisoft software and other far more expensive systems. The new Medisoft Reports module (formerly Focus Reports Standard) offers extensive reporting capabilities – 228 reports in all.

Medisoft Reports is included in Medisoft Advanced and Medisoft Network Professional. That means existing Focus Reports users will have everything they enjoy today all in one program supported by McKesson, while all other Medisoft users will enjoy a whole new level of reporting.

## **Introducing Medisoft Clinical**

Adding more value to Medisoft v15, we’re also introducing Medisoft Clinical, a combined practice management/electronic medical record (PM/EMR) solution with affordability built in for small practices. Medisoft Clinical includes all of the practice management features of Medisoft v15 plus a proven EMR that has helped thousands of practices like yours provide exceptional quality of care while improving financial performance.

So whether your practice currently uses Medisoft and is considering an upgrade, or you are looking to replace your existing practice management system, you will not find a better value than Medisoft.

[www.MedicalCharting.com](http://www.MedicalCharting.com)

## KEY MEDISOFT FEATURES\*

## BASIC

## ADVANCED

## NETWORK PROFESSIONAL

Claim and statement management with Collections Worklist



Transaction entry



Customizable patient statement options



UB-04 paper and print image



Medisoft Reports (formerly Focus Reports)



Ability to use on a network for multiple users

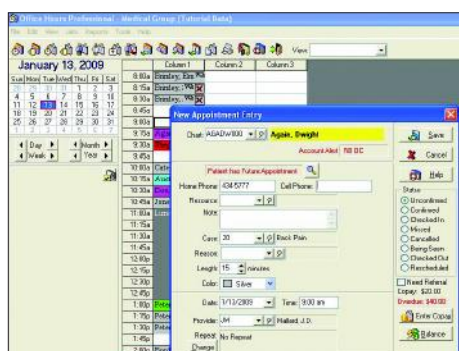


Ability to store multimedia images including audio



\*This is a subset of Medisoft features. For a complete list, refer to the Medisoft v15 features matrix.

Stmt #	Subscriber	Phone	Status	Initial Billing	Balance	Media
4	CATSAD00	227-7722	Ready To Send		0	
5	DODUA000		Ready To Send		0	
6	JONSDU00	(480)123-4444	Challenge		0	
9	AGADW000	434-5777	Ready To Send		0	
10	SIMTA000	(222)342-3444	Ready To Send		0	
11	SIMTA000	(480)555-5555	Hold		0	
12	YOUMI000	(602)222-3333	Ready To Send		0	
13	AGADW000	434-5777	Ready To Send		0	
14	BRIUA000	(222)342-3444	Ready To Send		0	
15	AGADW000	434-5777	Ready To Send		0	
1	DDEJ0000	(480)999-9999	Challenge	12/11/2002	1	Paper
2	DDEJ0000	(480)999-9999	Sent	12/11/2002	1	Paper
3	WAGSIE000	(121)419-7127	Sent	6/19/2002	1	Paper
7	WAGSIE000	(121)419-7127	Challenge	6/19/2002	2	Paper
8	ZIMAN000		Challenge	6/19/2002	2	Paper



Date	Charges	Payments	Adjustments	Working Days	Avg Bal Income	Ending All Balance
January 2002	0.00	41.00	0.00	0	0.00	-41.00
March 2002	95.00	10.00	0.00	1	10.00	-31.00
April 2002	335.00	162.00	0.00	1	162.00	202.00
May 2002	0.00	82.40	0.00	0	0.00	127.60
June 2002	105.00	194.20	-70.00	1	104.60	38.00
August 2002	35.00	22.00	0.00	1	22.00	121.00
September 2002	105.00	0.00	0.00	1	0.00	226.00
November 2002	150.00	0.00	0.00	1	0.00	376.00
December 2002	875.00	383.00	-15.00	3	121.67	533.00
December 2003	130.00	233.00	0.00	1	-233.00	740.00
February 2006	106.00	0.00	0.00	1	0.00	834.00
March 2007	35.00	0.00	0.00	1	0.00	929.00
January 2009	940.00	0.00	0.00	2	0.00	1,979.00
	\$3,011.00	-\$1,047.00	-\$85.00	13	-\$69.38	\$1,879.00

## Increase Cash Flow

With a range of smart features, Medisoft can help your practice maximize cash collections:

- Medisoft verifies insurance eligibility using the eligibility service from RelayHealth®, McKesson's connectivity services business.
- At check-in, Medisoft enables the receptionist to collect the patient's co-pay directly from the scheduling screen. A remainder statement shows any missed co-pays in the total amount due.
- Electronic claims and remittance services powered by RelayHealth streamline the billing process and reduce A/R days.
- Robust claim management and statement management features make managing collections in-house a breeze.
- Statement management is further enhanced with BillFlash patient statements from RelayHealth partner NexTrust.

## Streamline Appointments

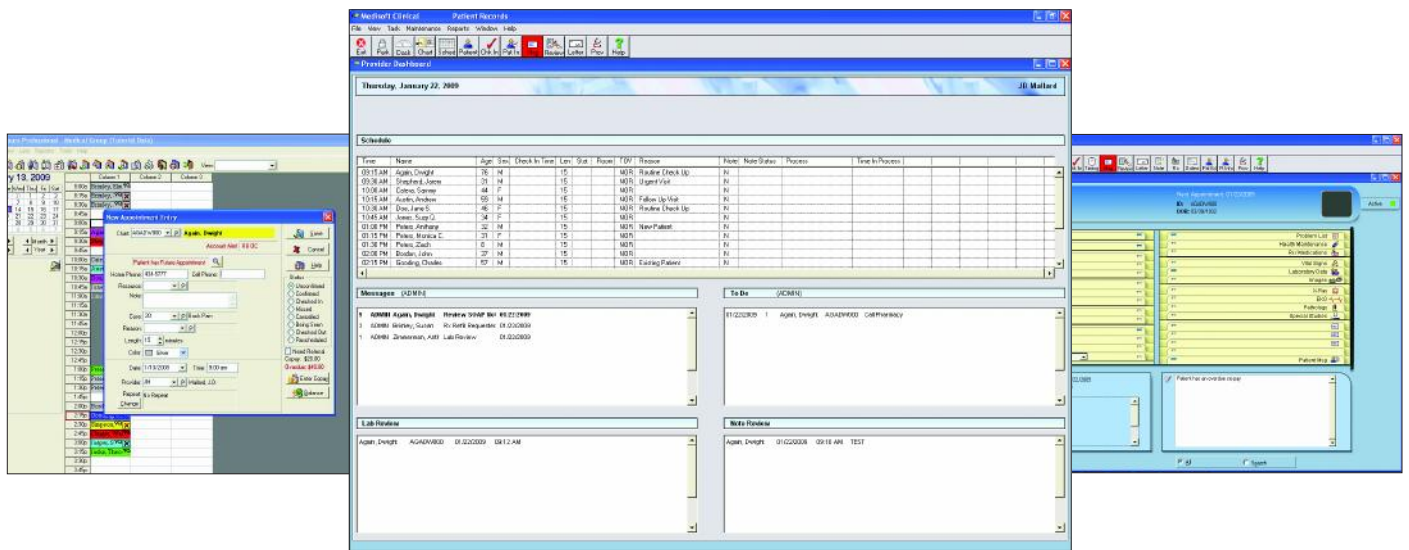
Medisoft comes standard with a scheduling engine that improves office workflow and simplifies the patient scheduling process. The add-on Office Hours Professional module makes scheduling, canceling and rescheduling appointments even easier. With Office Hours Professional:

- Instantly search all providers for the next available time slot.
- Use a color-coded appointment template to reserve time slots for certain types of appointments.
- Track the status of appointments and mark them as unconfirmed, confirmed, checked in, being seen, checked out, missed or cancelled.
- Display appointments based on office preference, such as: by day, week or month; by provider; or by equipment or treatment room.
- Print patient-specific superbills for all appointments scheduled and blank superbills for walk-in patients.

## Enhance Reporting

With 228 reports in Medisoft Reports, reporting in Medisoft Advanced and Medisoft Network Professional has never been better:

- Medisoft Reports includes a wide variety of reports that give unparalleled information on managed care plans, in-depth financial information, marketing statistics, service facility financial information, templates to export data for use in other software and the ability to run custom reports.
- Medisoft Reports Professional (available as an add-on module) offers 368 reports, charts and graphs. It also includes a report server that enables reports to run at scheduled times and be delivered via e-mail, as well as the ability to edit standard reports and create custom reports.



# Improve Performance with Medisoft Clinical

Most physician practices today want a practice management system and electronic medical record (PM/EMR) that work seamlessly together to minimize disruption. At McKesson, we believe a combined PM/EMR should be easy to buy, implement, use and maintain. With Medisoft Clinical, McKesson offers just that.

Medisoft Clinical combines the practice management features of Medisoft v15 with a fully functional electronic medical record at a price point geared to smaller physician practices like yours.

The seamless workflow between the PM and EMR in Medisoft Clinical enables practices to easily perform important tasks like:

- Share demographic information between the two systems to eliminate redundant data entry
- Automatically inform the nurse in the exam room area when a patient is ready for his/her appointment to save staff time
- Create an electronic superbill that is populated with ICD-9 and CPT-4 codes based on the provider's SOAP notes to ensure that codes are captured accurately for optimum reimbursement

The Medisoft Clinical EMR also drives down costs while improving care quality.

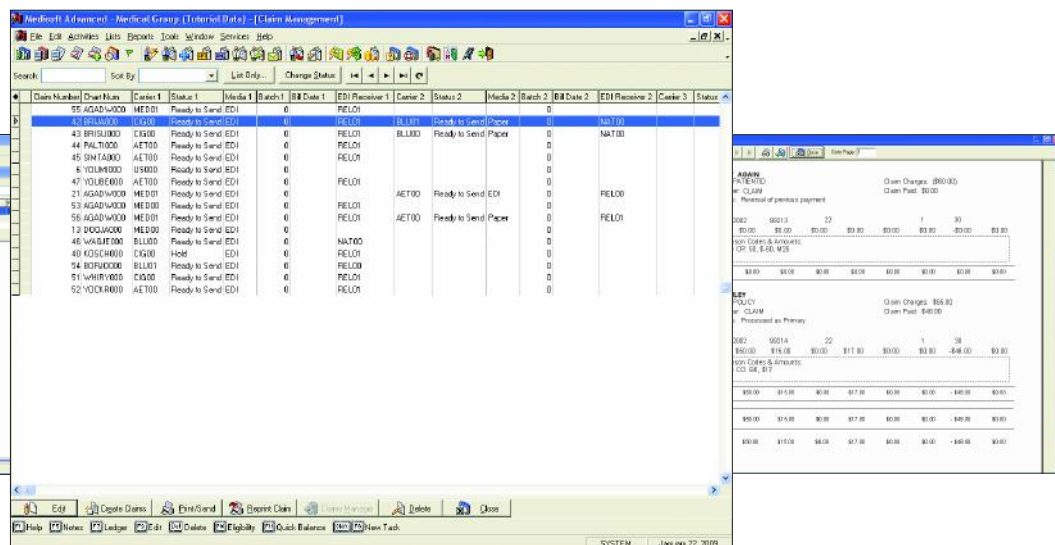
- Online records are immediately accessible, which eliminates time and resources dedicated to filing, locating and routing paper charts, as well as the cost of the paper itself.
- Patient data captured in an EMR allows more flexible, detailed clinical reporting required by Pay-for-Performance incentive programs.
- Comprehensive medication management and electronic prescribing capabilities allow practices to take advantage of government and private payor electronic prescribing incentives.
- Encounter documentation reduces transcription costs and improves coding accuracy to reduce denials, improve cash flow and mitigate write-offs.

**The electronic medical record (EMR) component of Medisoft Clinical is a fully functional EMR system. It is proven to reduce the time you spend on tasks not directly related to patient care.**

- **Unique note-centric design** automatically updates the entire chart from the progress note
- **Documentation tools** adapt to each provider's style and offer a choice of data entry methods
- **Health maintenance protocols** are based on age, sex, disease, medications or other conditions specific to the patient
- **Sophisticated coding advisor** for Evaluation and Management codes use both 1995 and 1997 CMS documentation guidelines to optimize coding based on documentation

**"It amazed us how much time we spent handling paper charts and looking for missing charts. Not having to hunt them down freed up so much time for everyone. The frustration level went down considerably."**

**— Bea McLain,  
Office Manager,  
Westshore Family Medicine**



# Improve the Revenue Cycle with RelayHealth

Collecting revenue in a timely manner is critical to financial performance. As the market leader in healthcare connectivity services, nobody understands this better than RelayHealth.

Which is why RelayHealth provides so many intelligent solutions to help maximize revenue. For example:

- Before a patient's visit, RelayHealth helps make sure a patient's insurance will pay for scheduled services with eligibility verification, an online service that provides quick confirmation of patient insurance and benefit coverage, reducing the likelihood of bad debt.
- After a patient's visit, the RelayHealth clearinghouse submits electronic claims to more than 1,800 payors, and returns an electronic remittance advice for most payors as well.

- The BillFlash patient statement service provided by RelayHealth partner, NexTrust, saves the billing staff from performing this time-consuming task.

With the click of a button, RelayHealth lets a practice transmit a full day's schedule to obtain eligibility information from most payors; responses retrieved directly from the payors offer accurate and up-to-date information. This not only saves time by eliminating lengthy phone calls to payors, but accelerates cash flow by enabling immediate patient collection payment for any treatment not covered by insurance.

Electronic claims and remittance processing enable accurate claims submissions and help reduce rejected claims. Filing electronic claims also ensures payment in half the time of paper claims. Once through the payor's system, the practice receives notification of what the payor will pay on the claim in an electronic format.

Connectivity services from RelayHealth help accelerate cash flow, reduce costs and improve office productivity.

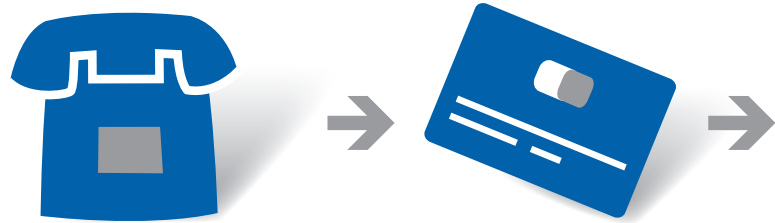
## RelayHealth:

- Operates the second-largest claims clearinghouse in the U.S.
- Processes 1.48 billion claims, remittances and eligibility transactions annually, valued at \$1 trillion
- Connects with more than 1,800 payors nationwide

Learn more about the new value of Medisoft – your practice management, electronic medical record and connectivity services solution.

[www.medisoft.com](http://www.medisoft.com)

# Optimize Value Through Complete Automation



*The suite of Medisoft solutions gives you everything you need to completely automate your practice. From scheduling to the electronic documentation of patient care to billing and account management, Medisoft helps make your practice more efficient and more profitable.*

*Medisoft is backed by McKesson, currently ranked 18th on the FORTUNE 500. McKesson is the longest-operating company in healthcare today, marking its 175th anniversary in 2008. The company is dedicated to helping its customers deliver high-quality healthcare by reducing costs, streamlining processes and improving the quality and safety of patient care.*

## **Patient schedules appointment**

The workflow process begins when a patient schedules an appointment. The scheduling coordinator uses Medisoft to quickly find the next available appointment.

Once the appointment is scheduled, Medisoft uses the RelayHealth online eligibility service to check with the patient's insurance company to be sure that the scheduled service will be covered. Medisoft also creates a daily calendar of scheduled appointments, showing which procedures are eligible for reimbursement.

Medisoft prints patient-specific superbills for all scheduled appointments, and allows blank superbills to be printed for walk-in appointments. If the Medisoft electronic medical record (EMR) is used, printed superbills are replaced by an electronic encounter form.

## **Patient checks in**

When a patient checks in, he or she completes paperwork with demographic, insurance and health history information that is stored in Medisoft for verification on subsequent visits. Medisoft also stores scanned images of insurance cards and patient identification.

Medisoft enables the receptionist to collect a patient's co-pay or other balances when the patient checks in. Payments are entered into the billing system directly from the scheduling screen. A "quick receipt" can be printed for payments collected up-front.



## Patient sees physician

The patient encounter begins. The nurse takes the patient's vitals and records them in the Medisoft Clinical EMR. The physician continues with the electronic encounter, adding the patient's chief complaints into the EMR's progress notes.

The physician also uses the EMR to submit electronic orders. If a prescription is necessary, the physician creates an electronic prescription using the ePrescribing functionality in the EMR.

When the physician makes a diagnosis and performs a procedure based on the diagnosis, the ICD-9 and CPT-4 codes are electronically transferred from the EMR to the practice management system to populate the electronic encounter form.

## Patient checks out

If the patient did not pay his or her co-pay when checking in, payment can be collected at check-out.

Follow-up appointments also can be scheduled. If an appointment is entered or edited for a patient who already has a future appointment scheduled, an indicative message on the appointment entry screen will warn the user of a prior scheduled appointment.

## Biller submits claim

With the EMR, the biller simply reviews the electronic encounter form for accuracy before running a report to generate the claim. If the EMR is not in use, the biller enters procedures from the superbill into the transaction portion of Medisoft and then generates the claim.

The claim is submitted via one of the following:

- The RelayHealth Clearinghouse
- Electronic direct to payor by sending ANSI files using Medisoft EDI modules
- Paper

## Claim is paid

When the insurance company pays a claim, the payor submits a paper Explanation of Benefits (EOB) or sends electronic remittance back to the practice through RelayHealth's Electronic Remittance Advice (ERA). The payor also sends an EOB to the patient.

The practice bills the patient for any outstanding balance by printing patient statements using Medisoft, or through the third-party patient statement service, BillFlash from RelayHealth partner, NexTrust.

Using Medisoft's robust claim and statement management features, which are integrated with the Collection Worklist, the practice handles collections in-house.

Finally, the practice uses more than 220 reports in Medisoft Reports to manage all financial aspects of the practice.

**medisoft**<sup>®</sup>  
clinical

**medisoft**<sup>®</sup>

 **RelayHealth**

**MCKESSON**

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