

Tokens - Documents & Letters

Token Name	Data	Notes
<<DocFullName>>	Doctor Full Name	eg. SMITH, John
<<DocFirstname>>	Doctor First Name	eg. John
<<DocSurname>>	Doctor Second Initial	eg. SMITH
<<DocTitle>>	Doctor Title	
<<DocID>>	Doctor ID	
<<DocAdd1>>	Doctor Address 1	
<<DocAdd2>>	If Address Line 2 is empty, this will show Suburb State Postcode	
<<DocAdd3>>	otherwise it will show Address Line 2	
<<DocSuburb>>	If Address Line 2 is empty, this will show nothing otherwise it will show Suburb State Postcode	
<<DocSuburb>>	Doctor Suburb	UPPERCASE
<<DocState>>	Doctor State	UPPERCASE
<<DocPC>>	Doctor Post Code	
<<DocMob>>	Doctor Mobile	9999 999 999
<<DocPh>>	Doctor Phone	99 9999 9999
<<DocFax>>	Doctor Fax	99 9999 9999
<<DocEmail>>	Doctor Email	
<<DocQualif>>	Doctor Qualification	
<<DocLoc>>	Doctor Location	
<<DocProv>>	Doctor Provider Number	
<<DocABN>>	Doctor ABN	
<<DocInvAs>>	Invoice As for Clinic	
<<DocAccName>>	Doctor Account Name	
<<DocBSB>>	Doctor BSB	
<<DocAccNum>>	Doctor Account Number	
<<DocBankAdd>>	Doctor Bank Address	
<<DocBank>>	Doctor Bank Name	
<<RefFullName>>	Referring Doctor Full Name	eg. SMITH, John
<<RefFirstName>>	Referring Doctor First Name	eg. John
<<RefSurname>>	Referring Doctor Surname	eg. SMITH
<<RefTitle>>	Referring Doctor Title	
<<RefID>>	Referring Doctor ID	
<<RefPractice>>	Referring Doctor Practice	

<<RefPracId>>	Referring Doctor Practice ID	
<<RefAdd1>>	Referring Doctor Address 1	
<<RefAdd2>>	If Address Line 2 is empty, this will show Suburb State Postcode otherwise it will show Address Line 2	
<<RefAdd3>>	If Address Line 2 is empty, this will show Suburb State Postcode otherwise it will show Address Line 2	
<<RefSuburb>>	Referring Doctor Suburb	UPPERCASE
<<RefState>>	Referring Doctor State	UPPERCASE
<<RefPC>>	Referring Doctor Postcode	
<<RefMob>>	Referring Doctor Mobile	9999 999 999
<<RefPh>>	Referring Doctor Phone	99 9999 9999
<<RefFax>>	Referring Doctor Fax	99 9999 9999
<<RefEmail>>	Referring Doctor Email	
<<RefQualif>>	Referring Doctor Qualification	
<<RefSpecID>>	Referring Dr Speciality ID	
<<RefSpec>>	Referring Dr Speciality Description	
<<RefLoc>>	Referring Doctor Location	
<<RefProv>>	Referring Doctor Provider Number	

[Manually Updating Clinic Health Fund Fees](#)

Whether it is Medicare, DVA, or Health Funds, FYDO keeps your item fees up to date, automatically.

Note: Your FYDO system maintains the latest Medicare/ DVA fees by default. To enable automatic fee updates for the Health Funds, click on the link below:

<https://wiki.fydo.cloud/Health-Fund-Fees>

Manually updating health fund fees

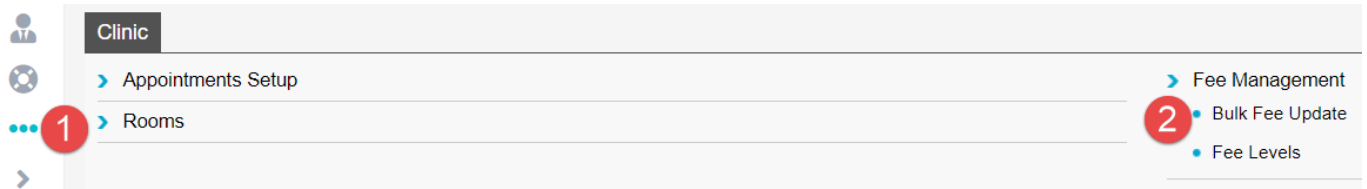
The manual procedure can only update fees for items that have already been added to your FYDO system. So, to prevent having to re-run the update for a given health fund, we recommend that you add all the items you need to bill *before* running the update.

Not sure how to add items? Click on the link below to learn how:

<https://wiki.fydo.cloud/adding-mbs-items/>

Ready to manually update your health funds fees? Let's get started!

First, go to **Settings > Bulk Fee Update**



You will now see the **Bulk Fee Update** screen where you will need to update *two* sets of fees for *each* health fund. The first set are the "Old fees/ codes" and the second set are the "Current fees/ code" (**To be updated in that order**).

1. The Old Fees are what will be charged for services where the *Date of Service* is prior to the introduction date of *new* fees for a given item.
2. The Current Fees are the **latest fees** and will be charged for services where the *Date of Service* is on or after when new fees were introduced for a given item.

SETTINGS > ITEMS > 110 - PROFESSIONAL ATTENDANCE AT CONSULT

Item Details

Number: 110
Procedure Name: Professional attendance at consult
Notes:
Link Procedures: ?

Category: 1
Item Type: [dropdown]
Modal: [dropdown]
Rule: Dummy [dropdown]
 Active
 100% rebate ?
 Stock Item
Group: A4
Sub: [dropdown]
Qty on Hand: 0

Classifications - Hospital

Theatre Band (National): [dropdown]
Theatre Band (State): [dropdown]
Day Type: [dropdown]
Patient Class: [dropdown]
DVA Accommodation: [dropdown]

Same Day Accom Band 1 Override
 Eclipse Code Mapping
 ADA Code
 Timebase ?
 Accom Item ?

Fees Schedules - Clinic

		Current		Threshold		Old	
Level	Level Name	Fee ex GST	GST	Date	Fee ex GST	Fee ex GST	Fee ex GST
0	DVA In-hospital	\$ 217.95	<input type="checkbox"/>	01/02/2021	\$ 217.95	\$ 217.95	\$ 217.95
1	MBS 100%	\$ 157.95	<input type="checkbox"/>	01/02/2021	\$ 157.95	\$ 157.95	\$ 157.95
2	Workers Comp	\$ 0.00	<input type="checkbox"/>	01/01/2020	\$ 0.00	\$ 0.00	\$ 0.00
3	Private Fee 3	\$ 0.00	<input type="checkbox"/>	01/01/2020	\$ 0.00	\$ 0.00	\$ 0.00
4	AHSA	\$ 185.70	<input type="checkbox"/>	01/11/2020	\$ 185.70	\$ 185.70	\$ 185.70
5	BUPA	\$ 189.60	<input type="checkbox"/>	01/11/2020	\$ 189.60	\$ 189.60	\$ 189.60
6	HCF	\$ 189.90	<input type="checkbox"/>	01/11/2020	\$ 189.90	\$ 189.90	\$ 189.90

Annotations:
- "Current fees" - Fee after threshold date of 01/02/2021 (points to the 'Current' column)
- "Old fees" - Fee prior to threshold date of 01/02/2021 (points to the 'Old' column)

In other words, every item has two fees - the current fee and the last fee before the current. Therefore, before we can update the current fees, we need to push them to the old fees.

Updating the old fees

There are a number of ways to update fees:

- Importing an Excel file - update fees from excel file

- Percentage - update fees as a percentage of the old or current fees
- Pricing - update fees by dollar amount

This blog post recommends using the percentage option. So, as shown in the screenshot below:

1. Set the *Update Fee Level* to: **the health fund** you wish to update fees for,
2. Set the *Codes* to: **Old Codes**,
3. Set the *Change Fee By*: to **Percentage**
4. Set the *Base Fee Level* to: **the same health fund** chosen in **step 1**
5. Set the *Percentage* to: **100.00**

FEES SETUP > BULK FEE UPDATE

Bulk Fee Update

Update Fee Level 5 - BUPA	Change Fee By Percentage
Codes Old Codes	Base Fee Level 5 - BUPA
	Codes Old Codes
	Percentage (%) 100.00

Then, click the **Save** button



This will replace the Old fees of all items for the selected health fund with the current value of the current fees.

Updating the current fees

Next, we must update the current fees; and we do this on the same screen as above. We will be updating the health funds fees by importing an Excel sheet.

As shown in the screenshot below:

1. Set the *Update Fee level* to: **the health fund** you wish to update fees for,
2. Set the *Codes* to: **Current Codes**,
3. Set the *Change Fee By* to: **Importing an excel file**

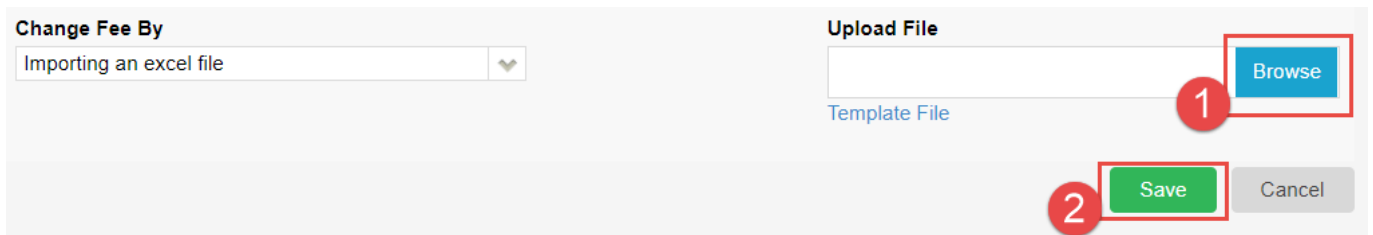
Next, you'll need to download the excel file containing the fees for that health fund from our website at the link below:

<https://au.acsshealth.com/healthfundfees/>

Note: Be sure to download the appropriate file based on your state (if applicable) and Gap or No

Gap (if applicable).

Once downloaded, browse for the file using the **Browse** button, select the file, and hit **Save**.



The screenshot shows a form with two main sections: 'Change Fee By' and 'Upload File'. The 'Change Fee By' section has a dropdown menu currently showing 'Importing an excel file'. The 'Upload File' section has a text input field labeled 'Template File' and a blue 'Browse' button. A red box highlights the 'Browse' button, with a red circle containing the number '1' next to it. Below the 'Upload File' section, there are two buttons: a green 'Save' button and a grey 'Cancel' button. A red box highlights the 'Save' button, with a red circle containing the number '2' next to it.

This will replace the Current fees of all items for the selected health fund with the latest fees released by the health fund, from the Excel sheet uploaded.

That's it! You have successfully updated the fees for the health fund. Repeat the process for as many funds as necessary.

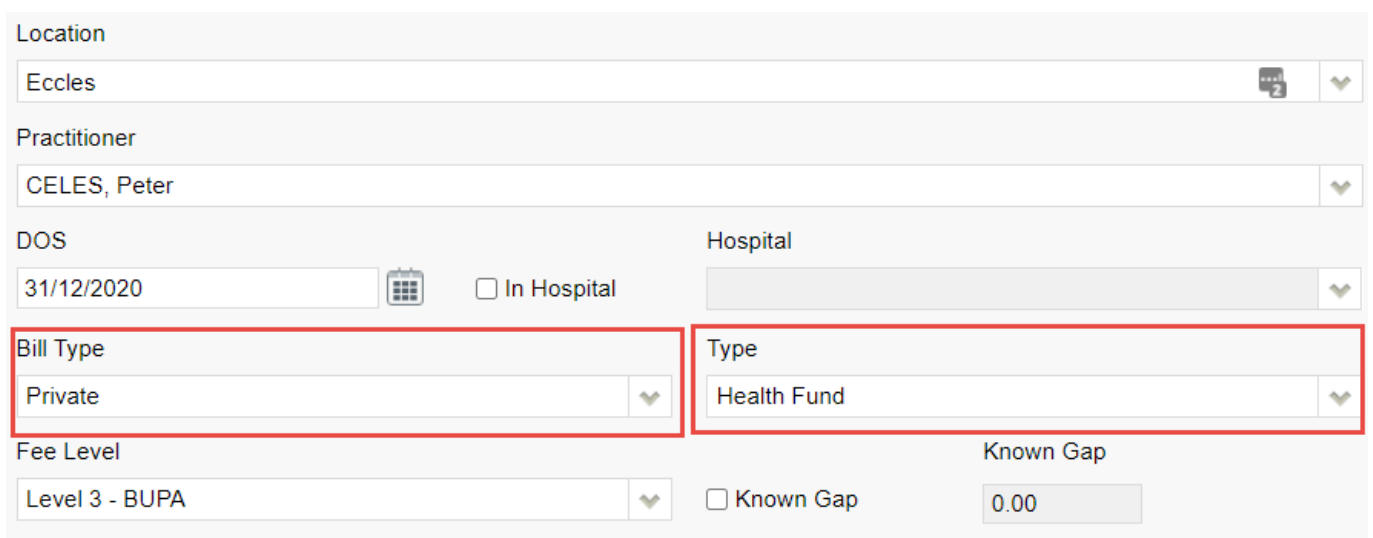
[Clinic Billing - Overseas Patients](#)

Need to bill an overseas patient? Read on to learn how.

Step 1: Bill manual invoice

Overseas claims are received and processed manually. This means you cannot bill such claims through eclipse for electronic lodgement. Therefore, you'll need to create and send a manual invoice.

Note: Ensure the **Bill Type** is set to: *Private* and the **Type** is set to: *Health Fund*



The screenshot shows a billing form with the following fields and values:

- Location:** Eccles
- Practitioner:** CELES, Peter
- DOS:** 31/12/2020
- Hospital:** (empty)
- Bill Type:** Private (highlighted with a red box)
- Type:** Health Fund (highlighted with a red box)
- Fee Level:** Level 3 - BUPA
- Known Gap:** 0.00

There are also checkboxes for 'In Hospital' and 'Known Gap', both of which are currently unchecked.

Step 2: Print manual invoice to PDF

Note sure how to print invoices? [Click here to learn how](#)

Step 3: (Conditional - If claim is for Medibank or AHM) complete the corresponding claim form and save it to your computer

- Medibank - [click here](#) to download claim form
- AHM - [click here](#) to download claim form

Step 3: (Conditional - If claim is for BUPA,) complete BUPA batch header form and save it to your computer

- [Click here](#) to download batch header form
- Enter the practice name as the location of the service and the **practice id** as the doctor's BUPA **FundPayeeId**

If you have previously entered the doctor's FundPayeeId into FYDO, you may find it by going to **Settings > Doctors**:

- > Appointment Types
- > Area Codes
- > Booking Codes
- > Cancelled Reasons
- > Checkers - Letters
- > Departments
- > Deposit Types
- 2** > Doctors
- > Doctor Specialities
- > Document Types
- > ECLIPSE Mapping
- > End of Day Banking
- > Health Funds
- > Health Fund Participants
- > Hospitals
- > Invoice Messages
- > Items
- > Item Types

Clinic

- > Appointments Setup
- > Rooms

1 Settings

Location	Eccles	▼	Clinic
Department	▼		
Provider	<input type="text"/>	Date of Birth	<input type="text"/>
		Age	<input type="text"/>
Payee Provider	<input type="text"/>	Fund Payee ID	<input type="text" value="12345"/>
Dr ABN	<input type="text" value="- - -"/>		

Step 4: Send off the documents

- Once you are ready to send off the invoice, contact the health fund and ask what email address they would like the manual claim sent to, as well as whether they require any other supporting documents
- Need their contact details? Follow the link below:

<https://wiki.fydo.cloud/medicare-and-fund-contacts-dealing-with-rejections/>

Step 5: Follow up & pay off the invoice

- We'd recommend you call the health fund a couple of business days after you email them to ensure your email has been received and will be looked at in the coming days
- After this point, you may wish to follow up every couple of weeks, inquiring whether or not your invoice has been paid
- Once the invoice has been confirmed to be paid, pay it off on FYDO

That's it! That's how to do overseas billing for patients.

How to Resend a "Sent" Clinic Batch

From time to time, you may need to resend an already sent batch. But before we discuss how you'd do this, let's first discuss why you may need to resend a batch.

In almost all cases, you'd need to resend a batch if it either:

- Has not yet been paid / rejected within the expected period (up to 2 business days for Medicare/ DVA claims and up to 4 weeks for health fund claims). You've then called the health fund, Medicare, or DVA, and found out they have not received the claim. Thus, they've asked you to resend it
- Has been partially or fully rejected and you can rectify the cause of rejection without rebilling

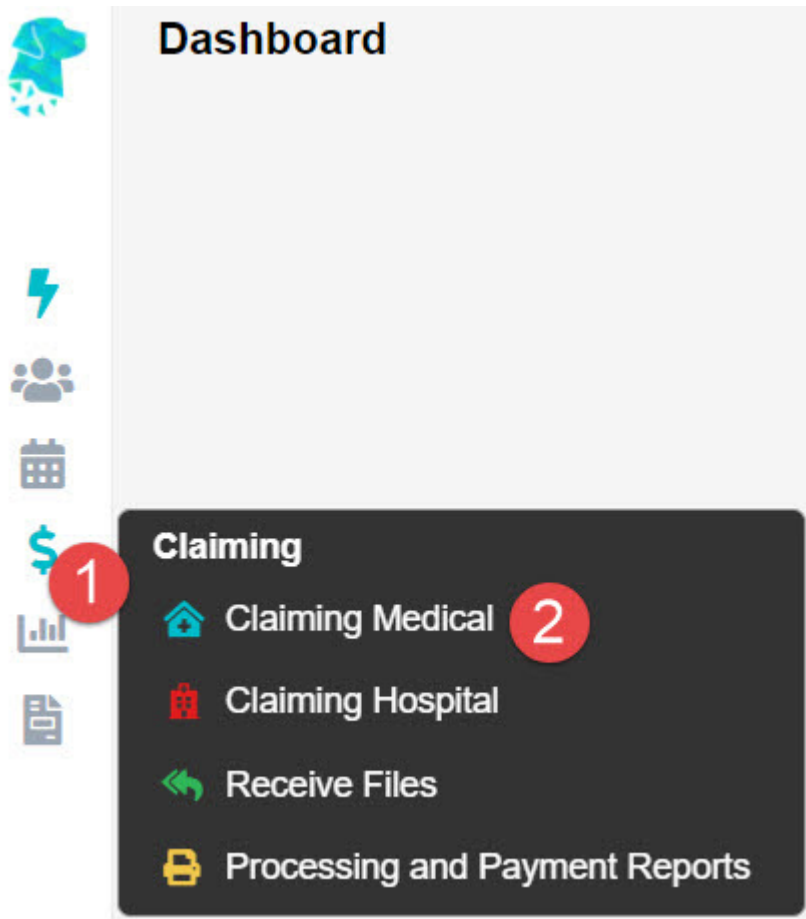
You do not want to resend a batch if:

- It is rejected and you wish to resend it as it is, without making any changes to the original claim. Since, if nothing changes about the claim, it will likely be rejected again
- If you have not first spoken with the body receiving the claim. It is always recommended that you first contact the organisation receiving the claim and inquire. This is because you do not

want to send a duplicate claim if you do not need to. In most cases, this is not a major concern. However, it could cause problems such as a rejection of both claims (the original and the duplicate) or increased processing time if a duplicate claim is received

With that addressed, if you still need to resend an already sent claim, read on.

Start off by going to **Claiming Medical**.

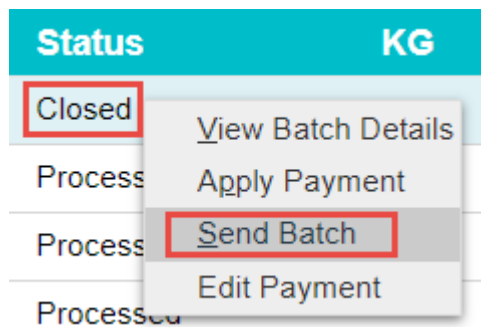


If the batch **Status** is *Sent* or *Processed*, you may right-click on the batch and select **Reset Batch Status**.

Status	KG	Paid
Closed		0.00
Processed		361.85
Processed		800.50
Processed		747.25
Processed		829.75
Processed		931.25

A context menu is overlaid on the table, showing two options: 'Apply Payment' and 'Reset Batch Status'. The 'Reset Batch Status' option is highlighted with a red border.

This will make the batch status revert to *Closed*, allowing you to resend the batch with the **Send Batch** button.



Otherwise, if the batch **Status** is *Payment Received* with a partial or full rejection, double click on the batch to open it up, revealing the invoice(s) inside.

If you wish to resend the invoice in its entirety (with all items inside), simply right-click on the desired invoice and click on **Move Invoice Out**.

CLAIM DETAILS > BATCH DETAILS

Location	Eccles (ID: 1)
Practitioner	CELES, Peter (ID: 24)
Provider	
Type	Medicare
Category	Specialist

Patient Name ↓	MRN	DOS ↓	Inv
BURDETTE, Pamela	117	30/12/2020	25
JACKSON, Jade	109	06/11/2020	19
PAM, Cara	116	05/11/2020	20

A context menu is open over the 'PAM, Cara' row, with the following items: 'Delete Invoice', 'Edit Invoice', 'Move Invoice Out' (highlighted with a red box), 'Patient Screen', and 'View Items'.

Otherwise, if you wish to resend only a part of the invoice (1 or more items but not all), double click on the invoice, revealing the items inside.

Location **Eccles (ID: 1)**
 Practitioner **MERION UNIT, Nursing (ID: 22)**
 Provider **0**
 Type **Veterans**
 Category **Community Nursing**

Batch ID **4**
 Batch Number
 Date Closed **30/12/2020**
 Batch Status **Closed**
 Transaction ID

Referring Dr **SMITH, John - 0653147B**
 Referral Date **01/09/2020 - 99 months**

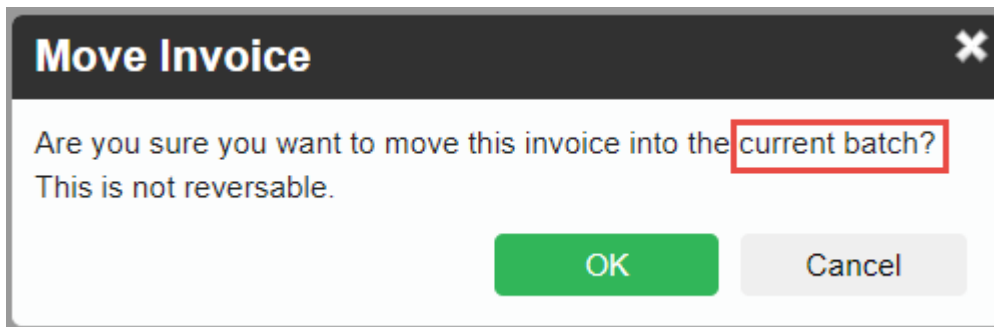
Invoice Text
 Referral Flag

ID	Code	DOS	Description	Rule	Claimed	GST
1	NP01	29/09/2020	Personal Care Core Schedule - Short, Medium or Long 1 to 5		171.49	15.59
2	NL01	29/09/2020	Clinical Care Core Schedule - term support 1 to 2		107.53	9.78

Context menu for item 2:
 Edit Item
 Move Item

Then, right-click on the item you wish to resent and select **Move Item**.

This will present you with the below pop-up window; and as you can see, it will move the invoice/item to the current batch.



Current batch:

- If it is a **Medicare** or **DVA** invoice: it will be moved into the *Open* batch for that provider. If no open batch is present, a new one will be created
- If it is a **Health Fund** invoice: it will be moved into a new *Closed* batch.

From here, you may close the batch if it is not yet closed and send it by right-clicking the batch and selecting **Send Batch**.

Move Invoice ✕

Are you sure you want to move this invoice into the current batch?

This is not reversible.

OK
Cancel

Deceased Patient Clinic Billing

Need to bill Medicare, DVA, or a health fund for a patient that is now deceased?

You can always attempt to send the claim electronically. However, in most cases, you will need to create a manual invoice and send it manually, for manual review.

So, here's one thing you can do before you decide whether or not to send the claim electronically. Run the *Online Patient Verification check* with the **As At** field date set to the latest *Date of Service* you wish to bill the deceased patient for.

Eligibility Screen

Type

Health Fund ▼

As at

19/02/2021 📅

Last Medicare Check -

Last Health Fund Check -

Check

If the check returns an eligible patient (noted with a green box around the Medicare and health fund card numbers), you may consider sending the claim electronically, as you're used to. However, this does not guarantee the claim will be paid.

Medicare/DVA Details

Medicare Number	2111-1111-1
Eligibility	Eligible - Australian Resident
Veterans No.	
DVA Auth.No	
Entitlement Card	▼

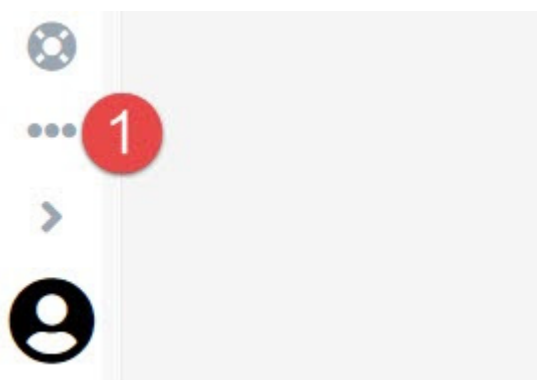
To learn how to create a manual invoice, click on the link below:

<https://wiki.fydo.cloud/How-to-create-a-manual-invoice>

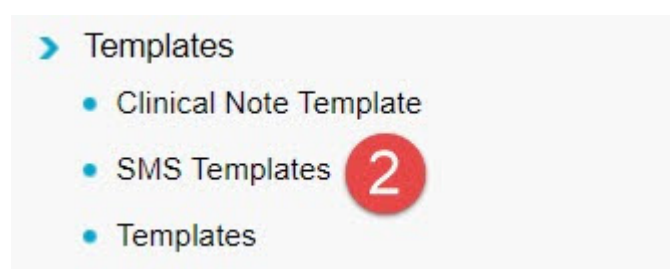
[Adding SMS templates](#)

Do you regularly SMS patients? If so, you can create custom SMS templates to save time typing up the message every time and to send tailored messages, complete with the patient's name, appointment time, serving doctor, and more.

To begin, first go to **Settings**.



Then click on **SMS Templates** under the templates menu.



This reveals the SMS templates currently available. By default, an **Appointment Reminder** template will be available to you.

Adding a new SMS template

To add a new SMS template, click on the **Add SMS Template** button.

Add SMS Template

Then, select the SMS **Type**, enter the template **Name**, and type out the SMS content in the **Description** field.

ID	4
Type	Appointments
Name	Appointment Reminder
Description	Hi <<patfirstn>>, this is a reminder of your appointment at the <<ListLocName>> breast screening clinic on <<listdate>> at <<listtime12h>>.

SMS Tokens

You can use 'SMS tokens' which are commands that look like: <<patfirstn>> to send tailored SMS messages. The aforementioned token for instance dynamically pulls the patient's first name.

There are SMS tokens for patient details, appointment details, doctor/ practice details, referral details, and more.

For a full list of tokens, click the link below:

<https://wiki.fydo.cloud/?s=tokens>

Once you're happy with the contents of your SMS template, click **Save** and you're done! Your new SMS template will be available next time you wish to send a custom SMS message.

Save

For some SMS Template ideas see our helpful wiki page

<https://wiki.fydo.cloud/sms-template-examples/>

[Tokens - Informed Financial Consent \(IFC Clinic\)](#)

Template Tokens

Token Name	Data as set in the IFC Screen	Notes
<<IFCPatFullName>>	Patient name	

<<IFCMRN>>	Patient MRN	
<<IFCDOB>>	Patient date of birth	
<<IFCSexID>>	Patient gender	e.g. M, F
<<IFCSex>>	Patient gender	e.g. Male, Female
<<IFCAdd1>>	Patient Address Line 1	
<<IFCAdd2>>	Patient Address Line 2	
<<IFCSuburb>>	Patient Address Suburb	
<<IFCState>>	Patient Address State	
<<IFCPC>>	Patient Address Postcode	
<<IFCMobile>>	Patient Mobile	Format 0415 999 999
<<IFCPhoneH>>	Patient Home Phone	Format 99 9999 9999
<<IFCPhoneW>>	Patient Work Phone	Format 99 9999 9999
<<IFCMed>>	Patient Medicare Number	
<<IFCMedRef>>	Patient Medicare Reference Number	
<<IFCLocId>>	Location	
<<IFCLoc>>	Location	
<<IFCLocAdd1>>	Location address 1	
<<IFCLocAdd2>>	Location address 2	
<<IFCLocSuburb>>	Location suburb	
<<IFCLocState>>	Location state	

<<IFCLocPostcode>>	Location postcode	
<<IFCLocPhone>>	Location phone	Format 99 9999 9999
<<IFCLocFax>>	Location fax	Format 99 9999 9999
<<IFCLocABN>>	Location ABN	
<<IFCDocID>>	Doctor/Surgeon	
<<IFCDoc>>	Doctor full name	e.g Michelle ROMERO
<<IFCDocFirstN>>	Doctor first name	
<<IFCDocLastN>>	Doctor last name	
<<IFCDocTitle>>	Doctor title	
<<IFCDocProvNo>>	Doctor provider number	
<<IFCDocQualif>>	Doctor Qualification	
<<IFCDocSpec>>	Doctor speciality	
<<IFCDocSpecID>>	Doctor speciality	
<<IFCDocAdd1>>	Doctor address 1	
<<IFCDocAdd2>>	Doctor address 2	
<<IFCDocSuburb>>	Doctor suburb	
<<IFCDocState>>	Doctor state	
<<IFCDocPostcode>>	Doctor postcode	
<<IFCDocABN>>	Doctor ABN	Format 99 999 999 999
<<IFCDocPhone>>	Doctor phone	Format 99 9999 9999
<<IFCDocFax>>	Doctor fax	Format 99 9999 9999

<<IFCDocMob>>	Doctor Mobile	Format 9999-999-999
<<IFCDocAccName>>	Doctor Account Name	
<<IFCDocBSB>>	Doctor BSB	
<<IFCDocAccNum>>	Doctor Account Number	
<<IFCDocBank>>	Doctor Bank Name	
<<IFCDocBankAdd>>	Doctor Bank Address	
<<IFCFundId>>	Fund	
<<IFCFund>>	Fund	e.g. MBP
<<IFCFundName>>	Fund	e.g. Medibank
<<IFCFundNo>>	Membership number	
<<IFCNotes>>	Notes from review screen	
<<IFCUser>>	Name of person printing the IFC	
<<IFCTotalC>>	Sums all charges	
<<IFCTotalR>>	Sums all rebates	
<<IFCTotGap1>>	Sums all charges - sums all Rebates	
<<IFCTotGap2>>	Sums all charges - sums all Fee Level Amount	
<<KnownGap>>	This is the Known Gap amount set by the user	

For the grid that will repeat (for the items)

Token Name	Data to Insert	More Info
<<ICT>>	Transaction Type	I - Invoice J - Adjustment P - Payment
<<ICode>>	Item	If in hospital, the code will show with an asterisk after the code
<<IDesc>>	Item Description	
<<Iid>>	Item Id/Sequence	
<<IDOS>>	Date of Service	dd/mm/yyyy

<<IQty>>	Quantity	
<<Itype>>	Invoice Type	e.g. M - Medicare V - Veterans
<<IUnit>>	Unit Price	
<<ICharge>>	Charge Amount	
<<iGST>>	GST Amount	
<<iRebate>>	Rebate Amount	
<<iFLAmt>>	Fee Level Amount	
<<IFLvl>>	Fee Level	
<<iGap1>>	Charge Amount - Rebate Amount	
<<iGap2>>	Charge Amount - Fee Level Amount	
<<IIH>>	In hospital flag	Shows an asterisk when in hospital
<iStext>>	Service text	

Patient Transfer (non API option)

As of September 2021 we do not have any inbound webhooks/APIs, meaning FYDO can not receive new patients via an API. FYDO can send webhooks/apis for new patients but not inbound as of this writing.

We do have a patient transfer option whereby you can send us a file via FTP and it can be loaded into FYDO. Currently this occurs at 3 scheduled intervals a day. 8am, midday and 4pm (SYD time).

We have a few formats we can accept the data in

- XML
- .txt

Option: XML

This format has been adopted as it is the format created by Genie.

[Download Sample File](#)

XML Tag Name	Details
Id	This is the MRN from the incoming system
ChartOrNHS	This could be another additional ID you have for the patient
Title	e.g Miss, Mrs

FirstName	
Surname	
MiddleName	
HealthFundAliasFirstName	Only required if the patent is known by another name with their health fund
HealthFundAliasFamilyName	Only required if the patent is known by another name with their health fund
AddressLine1	
AddressLine2	
Suburb	
State	
Postcode	
DOB	Format yyyy-mm-dd
Sex	e.g M, F or 1 - for Male 2 - Female 3 - Undertermined
HomePhone	Format 0299999999
MobilePhone	Format 0415999999
EmailAddress	
HccPensionNum	
MaritalStatus	Married De facto Same sex partner Single Widowed Divorced Separated 1 - Aboriginal 2 - Torres Strait Islander 3 - Both Aboriginal / Torres Strait Islander 4 - Neither 9 - Not Stated
CultureCode	
MedicareNum	
MedicareRefNum	
MedicareExpiry	Format yyyy-mm-dd
DvaNum	
HealthFundName	e,g MBP, HCF needs to be the fund code not the fund name. Or at the least the first 3 characters need to be the fund code.
HealthFundNum	
NokName	Format FirstName Surname
NokPhone	
Memo	

Option: Text File

This format was created by FYDO and has more fields than the XML option, referred to internally as AV2.

[Download Sample File](#)

Field Name	Start Length Details		
PatExtId	1	10	This could be another additional ID you have for the patient, the main MRN is the PatType field
Title	11	5	e.g Miss, Mrs
Last Name	16	30	
First Name	46	30	
Address 1	76	40	
Suburb	116	25	
Postcode	141	4	
DOB	145	10	Format dd/mmy/yyyy
Medicare Number	155	12	Format 2111-11111-1
Medicare Reference	167	1	
Entitlement Number	168	14	e.g. concession number or pension number
DVA Number	182	14	
Phone Home	196	14	Format (02)9999-9999
Phone Work	210	14	Format (02)9999-9999
Misc1	224	1	Field now defunct, pls ignore
Gender	225	1	e.g M, F
State	226	3	
Medicare Expiry	229	5	Format mm/yy
Misc2	234	6	Field now defunct, pls ignore
PatType	240	10	This is the MRN from the incoming system
Misc3	250	9	Field now defunct, pls ignore
Misc4	259	1	Field now defunct, pls ignore
SiteId	260	4	Field now defunct, pls ignore
Referring Dr Title	264	6	
Referring Dr First Name	270	25	
Referring Dr Last Name	295	25	

Referring Dr Suburb	320	20	
Referring Dr Provider Number	340	8	
Referral Date	348	10	Format dd/mmy/yyyy
Referral Period	358	2	99 for indefinite, other 3, 12 for example
Health Fund Membership Number	360	20	
Health Fund Code	380	3	e.g MBP, should be the eclipse code, that we can look up in FYDO
Health Fund Name	383	37	e.g Medibank
Misc5	420	25	Field now defunct, pls ignore
Email	445	50	
Notes	495	50	
Mobile Number	545	12	
NOK Last Name	557	25	
NOK First Name	582	25	
NOK Relationship	607	10	e.g Brother, Father, Wife
NOK Phone Home	617	13	Format (02)9999-9999
Patient Middle Initial	630	1	
DVA Card Type	631	1	
Indigenous	632	1	1 - Aboriginal 2 - Torres Strait Islander 3 - Both Aboriginal and Torres Strait Islander 4 - Neither Aboriginal or Torres Strait Islander 9 - Not Stated
Referring Dr Practice Name	633	50	
Referring Dr Address 1	683	50	
Referring Dr Address 2	733	50	
Deceased Date	783	10	Format dd/mmy/yyyy
Health Fund Alias First Name	793	25	
Health Fund Alias Last Name	818	25	
Referring Dr Phone	843	14	Format (02)9999-9999
Referring Dr Fax	857	14	Format (02)9999-9999
Referring Dr State	871	3	
Referring Dr Postcode	874	4	
Eligibility	878	1	1 - Eligible - Australian Resident 2 - Eligible - Overseas Visitor 3 - Ineligible 9 - Not Known/Not Stated

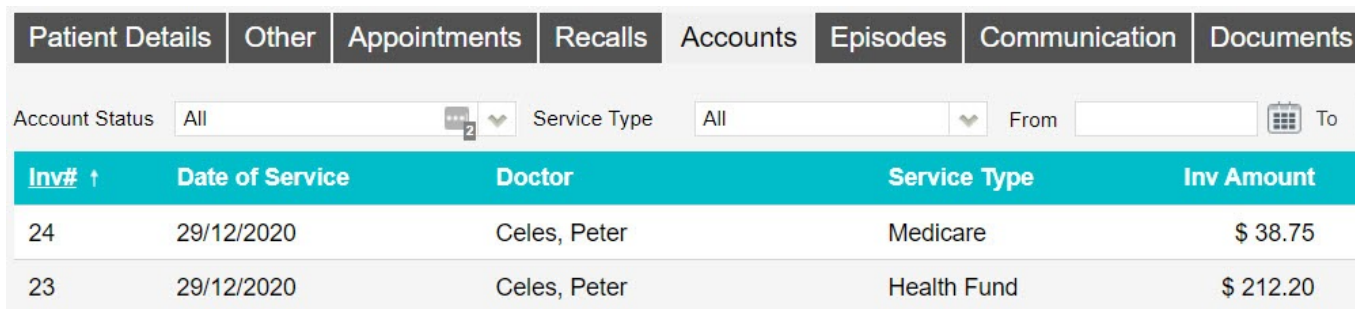
Insurance Status	879	1	1 - Basic Cover 2 - Full Cover
Other Card Id	880	1	
Other Card Number	881	10	
Allergy	891	70	
Marital Status	961	1	1 - Married (including de facto) 2 - Never married (Single) 3 - Widowed 4 - Divorced 5 - Permanently Separated 6 - Not stated/inadequately described
Employment Status	962	2	1 - Child not at school 2 - Student 3 - Employed 4 - Unemployed 5 - Home Duties 6 - Retired 7 - Pensioner 8 - Other
Language	964	2	Download List
Country	966	4	Download List
Mailing Address Line 1	970	40	
Mailing Address Line 2	1010	40	
Mailing Address Suburb	1050	25	
Mailing Address State	1075	3	
Mailing Address Postcode	1078	4	
Mailing Address Country	1082	30	
NOK Title	1112	10	
NOK Address 1	1122	40	
NOK Suburb	1162	25	
NOK State	1187	3	
NOK Postcode	1190	4	
NOK Phone Work	1194	13	Format (02)9999-9999
NOK Mobile	1207	13	Format 9999-999-999

Applying Manual Clinic Payments

Start off by opening the patient's record and click on the **Accounts** tab to view their treatment/ billing history.



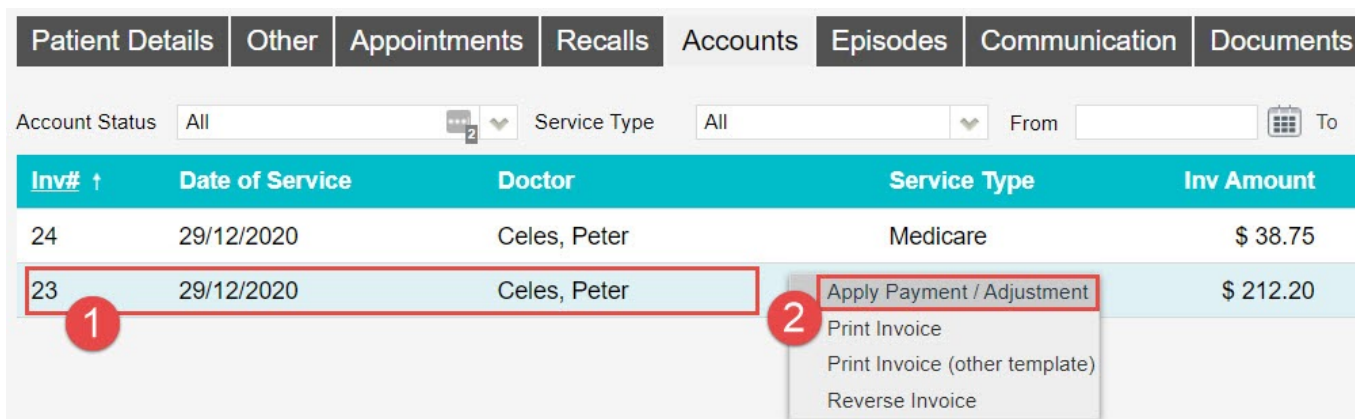
This button reveals a patient's billing/ treatment history where **each line is an invoice**:



A screenshot of the Accounts tab interface. It shows a table with columns: Inv# ↑, Date of Service, Doctor, Service Type, and Inv Amount. The table contains two rows of data.

Inv# ↑	Date of Service	Doctor	Service Type	Inv Amount
24	29/12/2020	Celes, Peter	Medicare	\$ 38.75
23	29/12/2020	Celes, Peter	Health Fund	\$ 212.20

From here, **right click** on the manual invoice to be paid off manually and click on **Apply Payment**.



Then, click on the **Add Payment** button



Enter the payment **Type**, payment **Amount**, click **Save**, and **Save** again.

Payment

Accounting Period 17/08/2020

Type

Amount 196.70 [Apply Gap](#)

Drawer BAKERR, Maryrosee

Reference

Bank

Branch

Save Cancel

That's it! You've paid off the manual invoice.

[How to Delete Clinic Invoices](#)

Needing to remove an invoice? There are two places where you could do so:

1. Via the **Patient's Record**, or
2. Via the **Batch** in **Claiming Medical**

Additionally, there are two use cases for deleting invoices:

1. Deleting the entire invoice (all items held)
2. Deleting a part of the invoice (1 or some items deleted, but not all)

Let's take a closer look at both options and use cases.

Deleting through the Patient's Record

Begin by opening the patient record of the patient in question and click on the **Accounts** button.

- Patient Details
- Other
- Appointments
- Recalls
- Accounts
- Episodes
- Communication
- Documents

This button reveals a patient's billing/ treatment history where **each line is an invoice**:

Inv# ↑	Date of Service	Doctor	Service Type	Inv Amount
4	25/08/2020	Chandra, Pete	Medicare	\$ 134.30
3	25/08/2020	Chandra, Pete	Medicare	\$ 38.75

So from here, simply double click on the invoice you wish to delete.



This will open up the invoice, revealing the item numbers inside.

From here, you may simply right click on the desired item and select **delete**, enter a reason, and hit **OK** to delete the item.

You may repeat this step for as many items as you need to delete.

Note: Deleting the final item in the invoice will effectively delete the entire invoice.

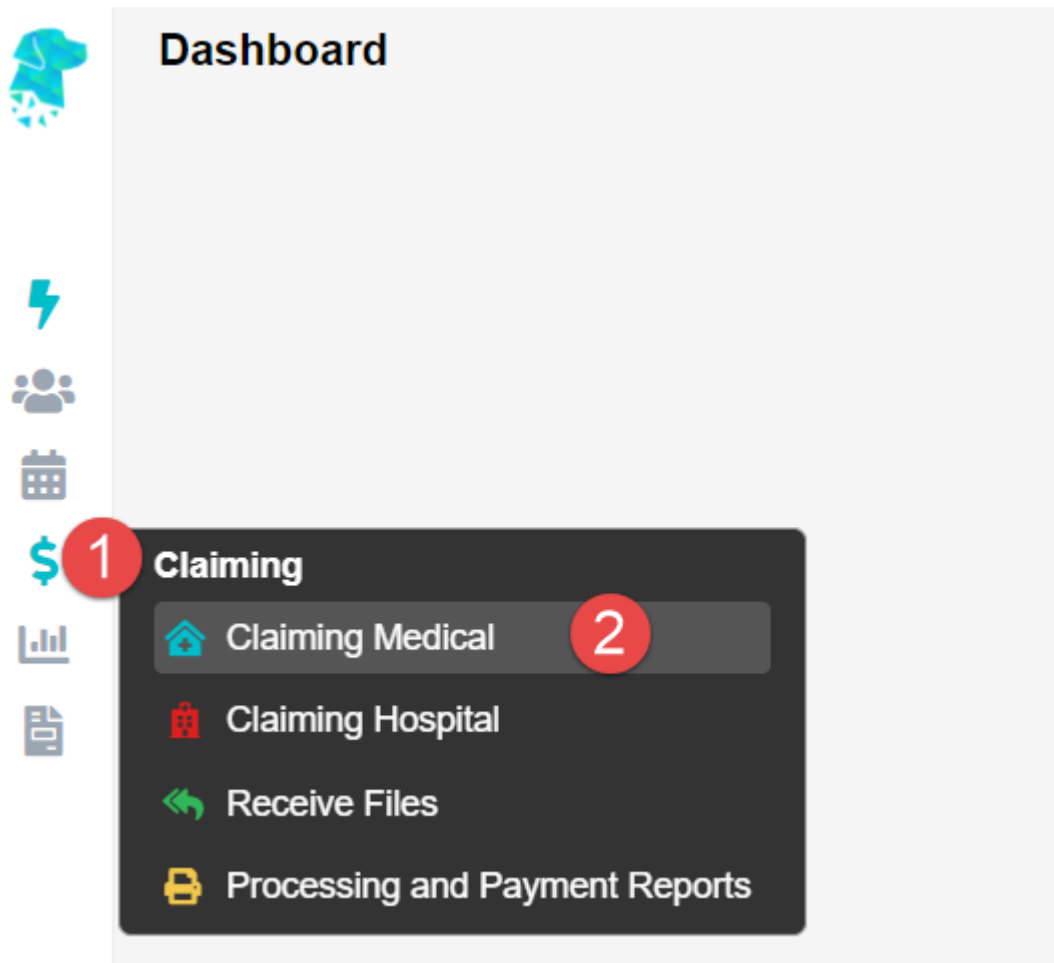
Invoice Details											
Invoice Number	3			Location	Eccles (ID:1)						
Service Type	Medicare - Outpatient			Servicing Doctor	Chandra, Pete (ID: 3)						
Payor	Medicare			Billing Notes	-						
Status	Awaiting Payment (\$38.75)			Referring Doctor	-						
Invoiced	\$38.75			Batch ID	0	Batch #		Batch Status	Open		
											Show voided transactions Print Invoice
Date of Service	Acc Period	Item Code	Item Description	Unit Price	QTY	GST	Charge inc GST	Audit Date	User	Status	
25/08/2020	25/08/2020	23	Professional attendance by a general practitioner at consult...	\$ 38.75	1	\$ 0.00	\$ 38.75	25/08/2020 02:02 PM	Amir Balouchi (ACSS)		

Alternatively, you can delete invoices from the **Claiming Medical** section of FYDO, found under the **Claiming** tab.

Deleting through the Claiming Medical

Place your mouse over the **Medical** tab (\$ Sign) and select **Claiming Medical**.

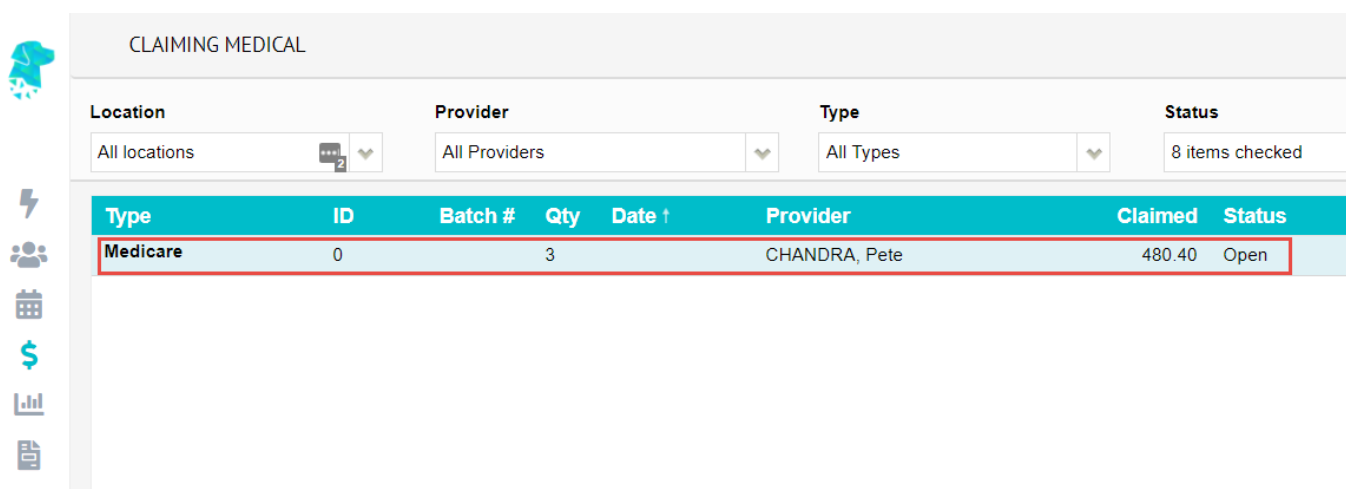
You will now see all your batches. So select the batch holding the invoice(s) you wish to delete.



This screen is where **invoices** created go. They go inside a batch that is then **sent** from this screen.

Note: this does not apply to **Private** invoices. These are invoices with the *Bill Type* set to *Private* in the billing screen.

So you may double click on the batch holding the desired invoice to be deleted.



CLAIMING MEDICAL

Location: All locations (dropdown) | Provider: All Providers (dropdown) | Type: All Types (dropdown) | Status: 8 items checked

Type	ID	Batch #	Qty	Date ↑	Provider	Claimed	Status
Medicare	0	3			CHANDRA, Pete	480.40	Open

You will now see the invoice(s) inside the batch.



Import note: Pay attention to the number of items in the invoice in question.

- If you wish to delete all of the items within the invoice, simply right click on the invoice here, and select **Delete Invoice**

CLAIM DETAILS > BATCH DETAILS

Location **Eccles (ID: 1)**
 Practitioner **CHANDRA, Pete (ID: 3)**
 Provider
 Type **Medicare**
 Category **Specialist**

Batch ID **0**
 Batch Number
 Date Closed
 Batch Status **Open**

Patient Name ↓	MRN	DOS ↓	Inv	KG	Claimed	Items
BOLD, Katie	118	25/08/2020	6		173.05	2
BOLD, Katie		28/08/2020	7		173.05	2

- Delete Invoice
- Edit Invoice
- Move Invoice Out
- Patient Screen
- View Items

- Otherwise, if you wish to only delete a portion of the invoice (some items, but not all), simply double click on the invoice to open it up. Then right click on the items to be deleted and select **Move Item**

CLAIM DETAILS > BATCH DETAILS > ITEM DETAILS

Location **Eccles (ID: 1)**
 Practitioner **CHANDRA, Pete (ID: 3)**
 Provider
 Type **Medicare**
 Category **Specialist**

Batch ID **0**
 Batch Number
 Date Closed
 Batch Status **Open**
 Transaction ID

MRN **118**
 Patient **BOLD, Katie**
 DOB **29/05/1939**
 Gender **Female**

Referring Dr
 Referral Date

Invoice Text
 Referral Flag **N - Not required (non referred)**

ID	Code	DOS	Description	Rule	Claimed	GST	Payable	MedExc
1	23	28/08/2020	Professional attendance by a general practitioner at consult		20.75	0.00	0.00	
2	110	28/08/2020	Professional attendance at consulting rooms or hospital, by	W		0.00	0.00	

- Edit Item
- Move Item