



### **Pre-Data Conversion Checklist**

Review and complete this entire document, then return it to your conversion specialist before the final conversion. If you have questions or need assistance, contact technical support.

General Information		
Practice Name:		
Phone Number(s):		
Staff Contact Name & Job Title:  (Designate a staff member who will oversee the conversion process and be the main point o		
(Designate a staff member who will oversee the conversion process and be the main point of	contact.)	
Do you have an IT Professional helping you with the conversion?	O Yes	O No
If yes, provide their name and phone number:		· · · · · · · · · · · · · · · · · · ·
What software are you converting from?(Include version number)		
Which installation of Open Dental will you be using? Open Dental will you be using?	ental office-hosted	d server
O Open De	ental Cloud	
(Open dental-hosted, cloud-based server. There will be add	ditional service fees a	nd steps required.
Would you like more information on Open Dental eServices or eRx?	O Yes	O No
Digital Imaging Software (X-Rays & Rac	liographs)	
What digital imaging software do you use with your current software	?	
What digital imaging software will you use with Open Dental?		
Will you bridge to the imaging software? O Yes	No	
Scanned Documents		
Would you like Open Dental to convert your scanned documents and/or patient pictures into Open Dental (if possible)?	O Yes	O No

Note: Scanned images may not retain category organization in Open Dental. After a conversion, you may need to re-organize images into the appropriate Imaging Module categories.



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Practice Ownership					
Select One:					
<ul> <li>I own (or will own) the practice and outstanding account balances. Please include the family account balances during the final conversion (when possible).</li> </ul>					
O I own (or will own) the practice and outstanding account balances. I do not want to convert the outstanding A/R during the final conversion, so please zero out all patient balances.					
O I own (or will own) the practice, but I do not (or will not) own the outstanding account balances. Please zero out all patient balances during the final conversion.					
O All patient balances are being set to zero because of limitations with the conversion.					
Test A/R Balances					
(You can find these values in the body of the email with the attached documents.)  In your current software, what is the total A/R balance at the time the data was collected for the test conversion? Include negative balances/credits.  In the test conversion, what is the beginning Total A/R balance?  \$					
(In Open Dental, click Reports, Monthly Aging of A/R Report, include negative balances.)					
Test Conversion Review					
Use this checklist to help you check and review test conversion data. Compare patient accounts in current software and test conversion. We recommend choosing ten patients who have a balance and insurance. Try to include two patients with negative balances.					
Check each item as it is completed:					
<ul> <li>Family Module:</li> <li>◆ Patient Information (name, position, birthdate, address)</li> <li>◆ Guarantor</li> <li>◆ Insurance Plan (employer, carrier information, group numbers, benefits)</li> </ul>					
<ul> <li>☐ Account Module:         <ul> <li>Payments (dates, amounts, notes)</li> <li>Adjustments (dates, amounts, notes)</li> <li>Completed procedures (dates, fees, notes)</li> </ul> </li> </ul>					
<ul> <li>□ Appointments Module:</li> <li>◆ Appointments (dates, times, length, notes, procedures, operatory)</li> </ul>					
<ul> <li>Chart Module:         <ul> <li>Procedures (correct procedure status, dates, fees, notes)</li> <li>Tooth graphics (accurate display, correct dentition)</li> <li>Clinical notes / progress notes</li> </ul> </li> <li>Note: Primary dentition is not converted. Temporary codes replace copyrighted codes (i.e., CDT codes) in the test conversion.</li> </ul>					
<ul> <li>■ Main Menu:</li> <li>■ Lists (insurance carriers, insurance plans, employers, problems, medications, referrals)</li> </ul>					

• If bridging to a third party, test the bridge.

☐ Imaging

• If using the Open Dental application to take and store radiographs, test your sensors to make sure they are using a compatible TWAIN driver.



### **Verify Test Conversion Data**

You are responsible for verifying the accuracy of the test conversion data. Confirm the following:

I have reviewed what converted, verified the test conversion data, and I am satisfied with the results. I understand that regardless of what I may have been told verbally, the final data conversion will not be materially different from the test conversion.

## Planning for the Final Conversion

#### Enter the date Open Dental ran the test conversion and installed it to your server: \_\_\_\_\_\_

Document your plan for handling insurance, insurance claims, and billing after the final conversion.

#### How will you enter and verify missing insurance benefit information?

- O Enter and verify a few patients at a time (e.g., as patients have upcoming appointments).
- O Enter and verify all patients within the first 30 days.

#### How will you enter outstanding claims?

- O Enter claims a few patients at a time (e.g., as claim payments come in).
- O Enter claims within 30 days using an outstanding insurance report from the old software.

#### How will you handle billing?

- O I will verify insurance and enter claims a few patients at a time, and only send individual statements to families who have claims created or received in Open Dental.
- O I will verify insurance for every patient and enter all outstanding claims within 30 days, then run the billing list.

### **Scheduling the Final Conversion**

Consider the following when scheduling the final conversion:

- Do you pay your providers by income?
   If yes, the best time to convert might be at the end of a pay period.
- Does your current software force you to close out at the end of a month?

  If yes, the best time to convert might be after you have run the end-of-month processes.



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# Acknowledgments

(	Check each box as you review and acknowledge each statement.
	I understand all conversion paperwork must be completed, signed, and sent back to the Conversion Department prior to scheduling a final conversion.
	I have received the Conversion Quote and agree to the fees. Any changes must be made in writing.
	I have reviewed the Open Dental <u>Computer Requirements</u> . I understand Open Dental can't be used with Windows XP, Windows Server 2003, Windows 8, or Windows Server 2008, and that Open Dental is operational on Windows 7, but not supported.
	I understand that I must contact Open Dental after I schedule the final conversion to update Open Dental to the latest full version.
	I understand that I must install the Open Dental application on all workstations prior to the final conversion.
	I have reviewed Open Dental <u>Training Resources</u> provided through Open Dental. My staff and I have been trained (or will be trained) on how to complete the daily processes in Open Dental.
	I understand that after the final conversion Open Dental will make no further enhancements to the conversion results.
	I understand that claims and assigned benefits will not convert and that I will need to enter claims and benefit information manually. (For Dentrix and EZ Dental primary claims are converted)
	I understand that reports in Open Dental must be run using the date after the final conversion and forward. Reports that need to be run prior to the conversion date must be run in the old software until no longer relevant. We may also print our old reports to have a hard copy for our records.
	For $1-2$ weeks following the final conversion, I understand we need to schedule fewer patients or staff more heavily to set up and clean up our data. See <u>Post-Data Conversion Checklist</u> .
	I am responsible for contacting third-party companies to notify them of our conversion to Open Dental (e.g., clearinghouses, electronic eligibility).
	I understand that the final conversion will be a new database. After the final conversion, I will only enter data in the new database. I will not enter new data in the test database or prior software.
	I understand that I am responsible for creating a suitable backup plan for my office. I understand that Open Dental does not backup or maintain my database. I understand that I am responsible for making backups of my production database immediately following my final conversion and thereafter.
	I understand that I am responsible for checking beginning account balances in the final conversion for accuracy.
	I understand that my aging report (0-30, 31-60, 61-90 day totals) will not be identical after my final conversion between Open Dental and my current software. This occurs because the two software applications are not identical, so there is no way to match the aging report precisely.
	I understand that individual family member balances may not be identical to my old software after the final conversion is complete (even though the total family balances may be accurate). Line-item accounting can be used in Open Dental, and a process called the Family Balancer Tool is run at the time of the conversion. The Family Balancer Tool attempts to clean up family accounts, and it associates payments and adjustments chronologically to the oldest owing procedures within each family.



Name, Job Title

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Date

Opt-Out (Optional - Not Recommended)			
□ I am opting out of completing the Pre-Data Conversion Checklist. I understand this checklist is used as a guide to verify the test conversion and ensure information has converted correctly. By checking this box, I am skipping the checklist and not verifying the Test Conversion. I understand that any errors or issues found in the Final Conversion will be my responsibility to fix manually.			
By signing below, I acknowledge that the information provided is accurate and complete, and that I am authorized to approve and proceed with the Final Conversion.			

Signature