1. Go to invoice that contains credit

View/Pr	int Old Invo	ices Crea	ate New Invoid	e Tra	insaction History	Recall Link	Overall Bala	ance Patient	\$39.10
Patient: test rovider: Dr. " Staff:	, kraig Werchan, Kra	ig v	Date of Servic 09/27/2018 [-1 Invoice #:	:e: 00.00 / 200.00] 11534	Invoice Notes (Does Not Print on I	nvoice):	msurance	\$14,663.00
Diag Code A H04.513 B H25.12 C H10.413	Descrip Dacry Age-re Chroni	Location: iption alith of bilateral lacr lated nuclear catar ic giant papillary co	imal passages act, left eye njunctivitis, bila	teral 🗸	Invoice Footer Default footer No	(Prints on Invoice): ote	Edit Payment Detail	Edit Notes	Edit Footer
Bill Code rame 01/16/2019	CPT	Description frame sale UPC: Patient - Cash P	781741431765 i ayment	Emp Fe	Insurance	Amount 200.00 -300.00	Diag Disc 0.00	c Insur 0 0.00 0.00	Patient 200.00 -300.00

2. Click Edit Invoice, then Credit Transfer

Sill Code Proc Code	MC Description	Ont Emp Inst	irance	Amount A B	CDEFG
			^		
		0.	00		
Addit loca	Addition location	-1000			
Addit Loc	Addition Location - TX	-1000			
Combine Balances		Sh	ow Insurance Details Invoir	Patient:	\$-100.00
Import from R Slip	Check Invoice Credit Transfer	Update Invoice	Balan	ce Insurance:	\$0.00
	one of the other of the other of the other of the other othe				50.0

3. Click checkbox for "Display Linked Accounts"

1	🍲 Link Paym	ent to Other Inv	/oices					-		×
1	To Transfer Pa	ayments to of	her invoices, ty	pe amount to tr	ansfer in the "Tra	nsfer Amount" co	lumn.			
t	Date 🔺	Invoice	Patient		Ins Bal	Pt Bal	Loc ID	Transfer Amou	nt	
c	05/02/2016	4410	test, kraig		0.00	336.00	1		0.0	0
2	05/05/2016	4486	test, kraig		0.00	165.00	1		0.0	0
I	05/24/2017	8125	test, kraig		18.00	-1,020.00	1		0.0	0
I	08/02/2016	5266	test, kraig		0.00	5.00	1		0.0	0
I	08/02/2016	5267	test, kraig		0.00	199.00	1		0.0	0
I	09/27/2018	11533	test, kraig		0.00	15.00	1		0.0	0
I	10/01/2015	3553	test, kraig		500.00	-100.00	1		0.0	0
24	10/26/2016	6062	test, kraig		0.00	-1,082.50	1		0.0	0
I	11/18/2015	3653	test, kraig		2,750.00	1,200.00	1		0.0	0
1	11/27/2015	3657	test, kraig		150.00	24.95	1		0.0	0
1	12/19/2017	10729	test, kraig		0.00	90.00	1		0.0	0
1	12/19/2017	10730	test, kraig		0.00	145.00	1		0.0	0
ł	12/30/2015	3675	test, kraig		0.00	160.00	1		0.0	0
ł										
1	Initial Amo	ount	100.00	🗌 Display Li	inked Accounts	d Accounts Total Transfer			0.00	
l	Remaining	Amount	100.00			Auto Tra	nsfer	Cancel	Apply	

4. This will allow you to see all invoices for patients with linked accounts.

Date 🔺	Invoice	Patient	Ins Bal	Pt Bal	Loc ID	Transfer Amount	
05/02/2016	4410	test, kraig	0.00	336.00	1		0.00
05/05/2016	4486	test, kraig	0.00	165.00	1		0.00
05/24/2017	8125	test, kraig	18.00	-1,020.00	1		0.00
05/31/2018	11505	* Test, Amanda	0.00	-962.50	1		0.00
05/31/2018	11506	* Test, Amanda	0.00	1,045.50	1		0.00
06/01/2017	8204	* Richter, Jessica	0.00	5,912.50	1		0.00
07/06/2018	11513	* Test, Amanda	0.00	50.00	1		0.00
08/02/2016	5266	test, kraig	0.00	5.00	1		0.00
08/02/2016	5267	test, kraig	0.00	199.00	1		0.00
09/27/2018	11533	test, kraig	0.00	15.00	1		0.00
10/01/2015	3553	test, kraig	500.00	-100.00	1		0.00
10/03/2017	9664	* Test, Amanda	11.00	-41.00	1		0.00
10/26/2016	6062	test, kraig	0.00	-1,082.50	1		0.00
11/18/2015	3653	test, kraig	2,750.00	1,200.00	1		0.00

- 5. Under the Transfer Amount column for the invoice(s) with a balance, enter the amount you wish to transfer to the invoice. You can add amounts in multiple rows. When complete, simply click Apply.
 - a. Auto Transfer will simply add the credit to the invoice at the top of the list.