

Billing and inventory system thesis proposal



Overview The computerized system has a big contribution in our society such as they can do very detailed work and follow precise instructions without error. In order to know the problem encountered by the staff, the researcher conducted an interview in the Rehabilitation Center located at Sto Nino, Magalang Pampanga. These are some problems in our chosen local like no proper record of the staffs, patients, billing, and retrieval of data is time consuming and more chances of human error. The basic advantages of the proposed system are to make the process efficient and fast which means they can process information much more quickly than humans.

The retrieval of data is very slow it has to be searched in lots of registers and these waste lots of time. In the existing system receipts are recorded manually that causes data is not always reliable as it is hand written and some human errors might have occurred. Mostly data is kept on registers and these are stored in filing cabinets and this consumes a lot of space. Inventory is the total amount of goods or materials contained in a store or factory at any given time. The staffs need to know the precise number of items on their shelves and storage areas in order to place orders or control losses.

They need also to know how many units of their products are available for patient's reservation. All of these businesses rely on an inventory system to provide answers. The billing system should provide service to the user, collect user usage records, and collect payments and adjust customers' balances. The patient account includes the patient contact profile information, account type, login information, and payment method. Each patient account is linked in the system with specific services offered to this

patient, and the patient will be billed depending on his usage of these services.

The propose system is a combination of Billing and Inventory system.

Generally, it will surely help the staffs to make works easier and faster using this very user-friendly system. Objectives of the Study General Objective The General objective of the study is to help the staffs to make a computerized system and to finish works at exactly given time and to make a system that is reliable to avoid some human errors which might have occurred for example, unsecured data stored anywhere and it can be steal and used against the Rehabilitation Center.

Specific Objective 1. To create secured billing and inventory system. 2. To avoid consuming a lot of time in recording information. 3. To make a printable receipt. Theoretical Framework Theoretical framework is use to limit the scope of the relevant data by focusing on specific variables and specifying the specific frame or viewpoint that the researcher will take in analysis, and interpreting the data that will be gathered, understanding concepts and variable according to the given definitions, and building knowledge by validating the theory.

Records management means the planning, controlling, directing, organizing, training, promoting, and other managerial activities involved with respect to records creation, maintenance, use, and disposition in order to achieve adequate and proper documentation of the policies and transactions of the Government and effective and economical management of agency operations. Payment included in the system, it is the process of collecting

money from the patient and adjusting their balances through adjusting the account debits and credits.

The patient receives receipts of their payments. The inventory system is updated each time you take an item, so you know what you have available for the following day or week. The Inventory System supports updating inventory information for all items, monitoring inventory depletion, and importing and exporting inventory information to and from external systems of record. Local Literature Foreign Literature Local Study Computer patient's records, checks patients in and out, generates day sheets and deposit slips and handles insurance billings.

All the information that drives your practice is organized and placed at your fingertips, where it is easily accessed by the stroke of a key. According to the authors of the said study, " its tangible value is just as great by making your office run faster and smoothly. " The system enhances the collections process by monitoring accounts and automatically identifying those which are delinquent. The main problem is, in the movement of every patient inside the Local Community Hospitals and how their bills can be monitored (Ong, Orido & Santibanes, 2005).

According to the study entitled " Automated Centralized Billing System for Morong Doctor's Local Community Hospitals", automated billing systems can decrease the waiting period of patients between 7 and 21 days. It also registers patients automatically when they are admitted in the Local Community Hospitals. Electronic record improves patient care by insuring that the correct information, such as the proper medication is retrievable. "

No matter what happens with the stock market; economy, people are going to be sick... ” (Automated Centralized Billing System for Morong Doctor’s Local Community Hospitals, 2003).

From the study, “ Jose P. Reyes Medical Center Billing System”, Local Community Hospitals is indispensable institution brought into existence in response into an environmental need. In India, the Escorts Heart Institute and Research Centre is one of the corporate Local Community Hospitals to fall in line with enthusiasm. It is one of the Local Community Hospitals which is using a computerized system in generating the bills of there patients. The complete automation exercise is aimed at supplementing its efficiency, in providing to the users what data do they need to have or to process.

In a Local Community Hospitals billing system, “ the financial information of a patient must be properly identified to him / her... ” (Del Moro, Manio & Pranada, March 2005). An information system which is primarily linked between a physician’s office and his Local Community Hospitals would be able to capture and store data from either location giving access to diagnostics from satellite locations. Added functionality could include ability to gather data in real time from a remote monitor or an inbound Emergency transport vehicle (Computer Information Systems Program College of Business Florida Gulf Coast University, 2002).

According from the study Peer-Based Recovery Strategy for Reliable Multicast Transport Protocol (RMTP), it is a study conducted for Multicasting; Multicasting is the transmission of data to a subset of hosts. It is a bandwidth conserving technology that reduces traffic by simultaneously transporting a

single stream of packets to multiple hosts. Video conferencing, software upgrade distribution, whiteboards and distributed interactive simulations are some examples of applications that can take advantage of multicasting technology.

Multicasting is still gaining interest and attention because of increasing demand for such group collaboration applications and for new paths for media distribution on the Internet. The more familiar cases of Unicasting and Broadcasting may be considered to be special cases of Multicasting¹.

Multicasting implements new services that are not possible in unicast transmission because unicast requires larger bandwidth than multicasting. Reducing network traffic and resource utilization are the main benefits of multicasting.

Under his adviser David Cheriton, Deering worked on a distributed operating system called Vsystem. The operating system allows a computer to send a message to a group of other computers on the local Ethernet segment using a MAC Layer 2 multicast addressing (Lu, 2003). From a study conducted from the Mapua Institute of Technology entitled, "User Interface Generation for Smartphones", the development of applications for mobile and other non desktop devices using established and traditional methods often require tremendous development effort in order to fit in with the limitations of the mobile devices.

A major challenge therefore is to find a way to generate interfaces, which usually take the bulk of a mobile application and essentially important to mobile devices like smart phones, and reduce the application size thus

allowing the device to allot the freed space for other processes. With this study, the proponent has designed a new approach for the new generation of technology (Abanacay, 2008). From a thesis dissertation from Ateneo De Manila University entitled, “ An Enhanced Lecture Viewer for eLearning”, Most distance education systems today provide students with a limited experience of the lecture they are viewing.

In this paper, we describe the features of the Enhanced Viewer Experience System (EVES), a distance education tool that enhances students’ learning experience by supporting the creation and playback of multiple synchronized time-indexed information streams, such as slide sequences, topic indices, transcripts, snapshots, and notes, together with the video of the lecture. These time-indexed streams move along with the lecture video as it plays. Furthermore, they are all synchronized with each other, such that clicking on any time indexed item causes the video and all the other streams to jump to the corresponding time in the lecture.

By providing access to such multiple time-indexed streams, we hope to enhance the experience of eLearning students and thus improve their learning and information retention (Mate, Velasquez & Sarmenta, 2005). From the study, “ BayanihanComputing. NET”, Bayanihan Computing. NET is a generic framework for volunteer computing, that allows you to quickly and easily tap the power of networked computers to perform complex calculations much faster than a single computer, or even a supercomputer, can. Bayanihan Computing.

NET is the first system in the world to allow programmers to write their own volunteer computing applications with the convenience, flexibility, and power of Microsoft's .NET technologies and tools. It is also the first system in the world to use XML web services to offer "computation web services" that allow programmers to easily tap the power of volunteer computing networks through simple method calls in their .NET programs. Bayanihan Computing. NET brings something that no one has offered before: supercomputing power that you can access anytime, anywhere, and on any device (Chua, Echevarria, Mendoza, Santos & Tan, 2001).

A thesis for networking is launched from Ateneo de Manila University, Developing a UTC-Synchronized University Network Time Service A network clock synchronization protocol is required which can read a server clock, transmit the reading to one or more clients and to adjust each client clock as required. Protocols that do this include the Network Time Protocol (NTP) and the Digital Time Synchronization Protocol (DTSS). These protocols provide accuracies typically within a millisecond on LANs and up to a few tens of milliseconds on WANs, relative to Coordinated Universal Time (UTC) via a GPS receiver.

Typical NTP configurations utilize multiple redundant servers and diverse network paths in order to achieve high accuracy and reliability. The Network Time Protocol (NTP) is a protocol used to synchronize the time of a computer client or server or some other network devices and appliances to another server or reference time source, such as a radio or satellite receiver or modem. It provides accuracies typically within a millisecond on LANs and up to a few tens of milliseconds on WANs relative to Coordinated Universal Time <https://assignbuster.com/billing-and-inventory-system-thesis-proposal/>

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Sullivan, MD, has announced that providers and insurers have agreed to work with HHS to develop a nationwide, computerized insurance billing system. The agreement is the product of a closed-door summit of Federal health

officials and health industry representatives. Under the system, every person publicly or privately insured would receive a computer-encoded card. The card would give providers access to a national database that contained the individual's complete medical history and insurance coverage information. The program's goal, Sullivan said, is "to slash the red tape Americans face in obtaining health care. Changes to the current billing system would save about \$8 billion per year, Sullivan said. He stressed that the new system doesn't mean that a lot of our healthcare problems are solved..... [I]t means that those of us in government and the private sector have taken an important step forward to improve the system." Several points were left unresolved in the announcement. For example, the summiteers set no deadline for implementation. Rather, Sullivan challenged participants to increase the number of electronically filed claims by 10 percent annually. At the same time, no mention was made of a payer for the program.

Another unresolved issue is how to ensure patients' privacy under the new system. Finally, providers raised the question of whether uniform billing also included uniform accounting methods. The announcement met with hostile fire from consumer groups, who were outraged about being excluded from the summit and who said that the measure did nothing about the urgent problem of 34 million uninsured Americans. Proponents of national health insurance also attacked the program, saying that the savings from this effort were just a drop in the bucket compared to the potential \$100 billion in savings that could be realized under a single-payer system..

The FY91 Federal budget deficit reached a record-high \$268.7 billion at fiscal year end, according to the OMB, The deficit accounted for 4.8 percent

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of the gross national product, up from 4. 1 in FY90. Delays in closing failed financial institutions pushed the year-end figures lower than original estimates, but the bank and savings and loan crises will boost the deficit in future years. The FY92 deficit is expected to reach \$348. 3 billion. . The American Medical Record Association has changed its name to the American Health Information Management Association. The association board ratified the name change during an October 1991 meeting.

The new name is more descriptive of the professions growing focus on information management, particularly computerization of health records, an association spokesman said. .. Data from an in-depth study of how Americans use and pay for healthcare services has been released the Agency for Health Care Policy and Research. The study contains key data from the household interview portion of the National Medical Expenditure Survey, conducted in 1987 and 1988. The survey, available as a report or on computer tape, includes data on health insurance coverage, employment, age, income, and other factors.

AHCPR conducted the survey to provide Congress with a comprehensive picture of how Americans use and pay for health services. For more information, contact National Technical Information Service at (703) 487-4650. .. Although Congressional Democrats have criticized President Bush for not developing a comprehensive healthcare reform proposal, they have yet to arrive at consensus within their own party about which solution to back. S. 1227, the “ play or pay” bill proposed by Senator Majority Leader George Mitchell (D-Maine), was expected to be reported out of the Labor and Human Resources Committee by Nov. 4, 1991. Mitchell postponed any action, <https://assignbuster.com/billing-and-inventory-system-thesis-proposal/>

however, until he can win the support of Finance Committee Chairman Lloyd Bentsen (D-Tex.), who is reluctant to endorse employer mandates. The vote now is scheduled for Jan- 22, the day the Senate is scheduled to convene for the second session of the 102d Congress. In the meantime, Mitchell and his co-sponsors held field hearings to “ look at the problems facing American families who cannot purchase health insurance policies. ” The hearings were held in Tampa, Fla. ; Atlanta, Ga. , Detroit, Mich. Cleveland, Ohio; and Denver, Colo. Admissions to medical schools increased in 1991, according to the Association of American Medical Colleges (AAMC). This is the largest entering class since 1985, with 16, 205 new students enrolled, up from 15, 998 students in 1990. Medical school applications also reflected that trend, rising almost 14 percent in 1991, the third year in a row that applicant numbers have climbed, following a decade of decline. With final data from the nation’s 126 accredited medical schools, the AAMC counted 33, 301 applicants, compared to 29, 243 in 1990.

The overall increase is attributed, in part, to a 26 percent increase in Asian-Pacific Islanders applying to medical school. The number of applicants from minority groups underrepresented in medicine also is up by almost 14 percent for 1991. Women continue to make gains, constituting 41 percent of the current applicant pool. http://findarticles.com/p/articles/mi_m3257/is_n1_v46/ai_11791899/

According to DIONYSIOS LOGARAS, the purpose of this report is to evaluate the importance of collecting site-specific data for the First Tier suppliers in Life Cycle Inventory (LCI) study as compared to use data from an LCI database and point out other highly polluting life-cycle stages where sitespecific data should be

collected. Data collection strategies will be analysed and recommendations will be given for future Life Cycle Assessment (LCA) studies in SKF. The case study of a specific bearing has been applied. The type of the product is manufactured at one of SKF's factory. As already mentioned, this report is focused on the suppliers of SKF that provide products directly to SKF's manufacturing facility, called First Tier suppliers.

Due to time and data quality limitations, site specific data were collected only for the main local First Tier suppliers with the use of a data collection form developed specially for the purpose. These data comprise information for the raw materials and energy inputs along with waste and emissions outputs. An analysis is performed to assess the qualitative and quantitative difference of using “ real” data collected from the First Tier suppliers in opposition to the LCI data of a database. For this purpose, two simplified LCI models are established by using the GaBi LCA software program.

The first models site-specific data for the processes of the First Tier suppliers and the second applies LCI data offered from the GaBi's database. Then, a thorough dominance analysis is conducted to indicate important life-cycle stages in the bearing's production that cause major environmental impact. The interpretation of the results, in both cases, has been done by comparing the LCI results. Finally, the benefits and drawbacks of the data collection strategy are realized after a comparison to the ISO standard guidelines, other LCA studies and personal reflections.

This report indicates that the two different data sources (site-specific and GaBi data), change evidently the LCI results for the total environmental load

generated by the bearing's production. These changes fluctuate up to 30 % between the two models. They are caused mainly by the quality and unavailability of inventory data in the database used. The steel production and more specifically the steel billet (used for steel bars, the raw material of rings) causes the highest environmental impact in the technical system of the analysed bearing.

Regarding the data collection strategy, it proved to be quite efficient, reliable and transparent for the purpose of this study, since the most important data for the First Tier suppliers have been collected and data gaps were of minor importance to the results of the study. Future LCA studies in SKF should focus on LCI data collection for processes that influence significantly the life cycle of a product. Database data may be used cautiously for products of minor importance to the environmental performance of the investigated technical system.

The data collection strategy should be based on a data questionnaire and good preparation for the site visits of the targeted companies. Features A. Record Management a. The system can record data of the patient including personal data, dental records and medical records. b. The user can create, edit, save and delete new record. c. The system can print the record data of the patient including personal data, dental records and medical records. d. Before the user can delete and edit a record, it will ask the password of the system for security purposes. B. Billing a. The user can print the receipt of a patient. . The user can easily see the history of the payment of the patient, and remaining balance. c. The user can see the balance and can access the bills of the patient. d. Before the user can delete and edit a record, it will ask <https://assignbuster.com/billing-and-inventory-system-thesis-proposal/>

the password of the system for security purposes. C. Inventory a. The user can print the receipt of the patient when getting some medicines in the infirmary. b. The user can easily see the history of all the medicines that the patient receives from the infirmary. c. The system can fasten and automate the sales order fulfillment process in infirmary. D. Time Management a.

In this feature, the system record data of all the visitors including time in, time out, purposes, name of patient and name of visitors. b. The user can print the record data of all the visitors. c. The user can create, edit, save and delete new record of visitors. Statement of the Problem 1. The staffs are recording manually. 2. They are consuming a lot of time in recording information. 3. Unorganized files. For example, if manual record book is lost data will be completely lost. 4. Unsecured data is stored in filing cabinets and can it can be steal and used against the Rehabilitation Center. . Data is not always reliable as it is hand written and some human errors might have occurred. 6. Receipts are made manually. Statement of the Objectives 1. To create a computerized system. 2. To create a system that can save time and fasten works. 3. To create a system that organized the data or files 4. To create a system that can secure all data or files using username and password for every user. 5. To create a system that is reliable. 6. To create a system that can save, view and print the patient's receipt. Conceptual Framework

The concept of the study is to make a faster yet a user friendly system that can help the users to operate faster. So less time will consume but more works can be done by the proposed system. The System is also easy to understand its features. It can make the all files and data organize. The <https://assignbuster.com/billing-and-inventory-system-thesis-proposal/>

system can also secure all your files and data by using username and password. In addition, the user can add, delete, edit and save records and it can print and store to a database. References <http://recordmgtsys.com/>
<http://www.wisegeek.com/what-is-inventory.htm> <http://www.timemanagementsystems.com/>