Entering an authorization number

07/24/2024 2:30 pm EDT

If you have been issued an authorization number from a payer for your services, you can enter the information into the patient's chart so it will automatically populate on the patient's claim form (either the HCFA-1500 or UB04).

• While in the patient's chart, click on the Authorizations tab.

Important	Demographi	cs Insurances	Author	rizations	Smoking	Status	Flags	Balance
Click o	n + Add New	Authorization						
Cherco		,						
Insurance	Authorizatic	ons						+ Add New
Authorization #	Status Pr	rocedure Codes	Start Date	End Date	Specialty	Visits App	proved	Visits Remaining

• Fill in all of the information you have available, including the authorization number, effective dates, as well as any notes that you may want to include.

New Authorization	×
Authorization number	<u> </u>
Start date	
End date	
	(End date and/or number of visits must be provided)
Number of visits	
	(End date and/or number of visits must be provided)
Specialty	(optional)
Notes	
Pending	(optional: Pending authorization will not be applied to claim)
Procedure codes	(optional)
	Create

You can add additional information by returning to the Authorizations section of the patient's chart and clicking on the **Edit** icon (blue pencil).

Insurance Authorizations + Add New Authorizations									tion		
	Authorization #	Status	Procedure Codes	Start Date	End Date	Visits Approved	Visits Rem	aining	Notes		
	583953892	Active	00400	10/27/2016	10/27/2017	8.0	8.0				×
	488385839	Active	2945	10/27/2016		5.0	5.0				×
	837458485	Pending	A4602	10/27/2016							×

Any authorizations entered and listed as active (and not checked as "pending") will automatically print on either the HCFA-1500 form or UB04 when the date of service on the claim matches the start/end date or procedure code listed.

If you are billing on a UB04, the authorization number can also be entered on the patient's claim by navigating to Billing > Live Claims Feed > Inside the patient's claim > right side of the screen > Insurance tab. Authorizations for the patient's primary payer (red box) and secondary payer (blue box) can be entered.

Info	Cond & Occ	Value Code	Insurance	Attend	ng
Primary Insurer			UB04	box 50a	
	Plan ID		UB04	box 51a	
	Release Info	VB04 bo	x 52a		
	AOB	VB04 bo	x 53a		
	Subscriber	_		UB04 b	oox 58a, 60a
	Ins Group				UB04 box 61a - 62a
Paye	er pre-auth #		IB04 box 63a		
Secor	ndary Insurer		UB04	box 50b	
	Plan ID		UB04	box 51b	
	Release Info	VB04 bo	x 52b		
	AOB	VB04 bo	x 53b		
	Subscriber			UB04 b	ox 58b, 60b
	Ins Group				UB04 box 61b - 62b