

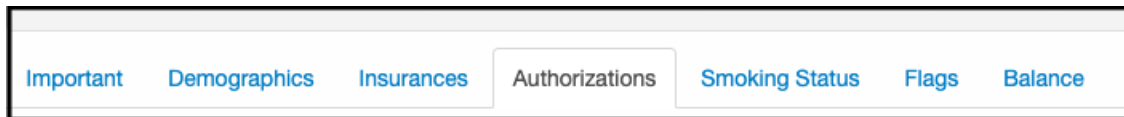
# Entering an authorization number

08/23/2024 12:01 pm EDT

## Authorization Numbers

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).

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



2. Click on + Add New Authorization



3. 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

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 Authorization

Authorization #	Status	Procedure Codes	Start Date	End Date	Visits Approved	Visits Remaining	Notes	
<a href="#">583953892</a>	Active	00400	10/27/2016	10/27/2017	8.0	8.0		<span style="border: 2px solid red; padding: 2px;">✎ ✖</span>
<a href="#">488385839</a>	Active	2945	10/27/2016		5.0	5.0		<span style="padding: 2px;">✎ ✖</span>
<a href="#">837458485</a>	Pending	A4602	10/27/2016					<span style="padding: 2px;">✎ ✖</span>

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	Attending
<b>Primary Insurer</b>	<input type="text"/>		UB04 box 50a	
<b>Plan ID</b>	<input type="text"/>		UB04 box 51a	
<b>Release Info</b>	<input type="text" value="v"/>		UB04 box 52a	
<b>AOB</b>	<input type="text" value="v"/>		UB04 box 53a	
<b>Subscriber</b>	<input type="text"/>	<input type="text"/>	UB04 box 58a, 60a	
<b>Ins Group</b>	<input type="text"/>	<input type="text"/>	UB04 box 61a - 62a	
<b>Payer pre-auth #</b>	<input type="text" value="v"/>		UB04 box 63a	
<b>Secondary Insurer</b>	<input type="text"/>		UB04 box 50b	
<b>Plan ID</b>	<input type="text"/>		UB04 box 51b	
<b>Release Info</b>	<input type="text" value="v"/>		UB04 box 52b	
<b>AOB</b>	<input type="text" value="v"/>		UB04 box 53b	
<b>Subscriber</b>	<input type="text"/>	<input type="text"/>	UB04 box 58b, 60b	
<b>Ins Group</b>	<input type="text"/>	<input type="text"/>	UB04 box 61b - 62b	
<b>Payer pre-auth #</b>	<input type="text" value="v"/>		UB04 box 63b	