

How to Track Bulk Appointment Packages with Authorizations

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Appointment packages are used when patients buy a certain number of appointments to be used for a certain period. It is possible to track appointment packages purchased by patients in your DrChrono account.

1. Create a custom code for the package by navigating to **Billing > Coding > New Custom Procedure**.
2. Enter Quantity Units, Notes, Price, and Type of Product. You have the option to choose either Service or Product under Type of Product. As long as none of the parameters (# of visits, price) change, this custom procedure can be used with the entire patient population. Please note that only upper-case letters, a period, and/or numbers will be accepted for the code itself. It will not allow a space.

New Custom Procedure

Code	<input type="text" value="8APPOINTMENTPACK"/>	ID of procedure in system.
Quantity units	<input type="text" value="1"/>	
Description	<input type="text" value="8 prepaid appointments"/>	
Note	<div></div>	
Sales tax applicable	<input type="checkbox"/> Is sales tax applicable to this service/product?	
Price	<input type="text" value="1600"/>	
Price with tax	<input type="text" value="0.00"/>	
Allowed amount	<input type="text"/>	
Cost	<input type="text" value="1600"/>	Base cost for consumables.
Duration	<input type="text"/>	Length of a procedure in minutes.
Type of product	<div>Service</div>	
<div><div>Save</div><div>Cancel</div></div>		

3. Navigate to the patient's chart > **Demographics > Authorizations > + Add New Authorization**

Demographics

✓ Sufficient patient demographics to bill insurance.

Demographics

Insurances

Authorizations

Patient Flags

Payments

Insurance Authorizations

+ Add New Authorization

Authorization #	Status	Procedure Codes	Start Date	End Date	Specialty	Visits Approved	Visits Remaining	Notes	
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4. Enter an **authorization number**, end date, or number of visits. Press **Create** to add the authorization to a patient's account.

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

- The authorization, number of visits approved (total), and the number remaining will show in the patient's appointment.

Authorization #	Status	Procedure Codes	Start Date	End Date	Specialty	Visits Approved	Visits Remaining	Notes	
123456	Active		05/20/2025	06/30/2025		5.0	4.0		 
8APPOINTMENTPACK	Active		05/01/2025	06/30/2025		8.0	7.0		 

- The number of visits remaining will appear in the patient's account as the visits are used.

Authorization #	Status	Procedure Codes	Start Date	End Date	Specialty	Visits Approved	Visits Remaining	Notes	
123456	Active		05/20/2025	06/30/2025		5.0	4.0		 
8APPOINTMENTPACK	Active		05/01/2025	06/30/2025		8.0	7.0		 

- To view the visits that have been counted towards an authorization, press the blue Authorization # on the left.

Authorization #	Status	Procedure Codes	Start Date	End Date	Specialty	Visits Approved	Visits Remaining	Notes	
123456	Active	NEW.CUSTOM.CODE	05/17/2025	12/31/2025		8.0	6.0		 
Date of Service	Provider		Reason		Office		Status		
05/17/2025 10:05AM	Doctor Doctor				Primary Office				
06/02/2025 10:05AM	Doctor Doctor				Primary Office				

- As an authorization nears expiration—either due to the approved number of visits being used or the end date approaching—a warning label will appear on the patient's account to alert you in advance.

Demographics

BILLING WARNING: Authorization #NO.VISIT.LIMIT expires in 14 days.

BILLING WARNING: Authorization #123456 has 0 of 2 allowed visits scheduled.

9. The patient payment for the package, since it is collected before the services are rendered, will remain in unallocated payments until the service is complete. Review this [article](#) to see how to allocate the funds to each service.
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