

Entering a Pending Pre-Authorization Number

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If you have been issued a preliminary pre-authorization number from a patient's insurance payer and it has not yet been officially approved, you can still enter the information you have into the patient's chart.

1. While in the patient's chart, select **Demographics > Authorizations** tab.

Demographics

✓ Sufficient patient demographics to bill insurance.

Demographics

Insurances

Authorizations

Patient Flags

Payments

2. Press **Add New Authorization**.

Insurance Authorizations

+ Add New Authorization

Authorization #	Status	Procedure Codes	Start Date	End Date	Specialty	Visits Approved	Visits Remaining	Notes	
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3. Fill in all of the information you have available, including the pending authorization number, and 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

4. To save the pending authorization, you will need to check the **Pending** box.

Once you receive the formal approval, you can add additional information by returning to the Authorizations section of the patient's chart and pressing on the **Edit** icon (blue pencil).

Insurance Authorizations

+ Add New Authorization

Authorization #	Status	Procedure Codes	Start Date	End Date	Specialty	Visits Approved	Visits Remaining	Notes	
123456	Active	00400	10/30/2024	10/31/2025		8.0	8.0		<div><div></div><div></div></div>

Please note, that any *pending* authorizations (where the pending box is checked) will not appear on the HCFA-1500 form, whereas any without the pending box marked, will.