Patient Insurance Authorization Report

Last modified on 11/06/2026 1:46 pm EST

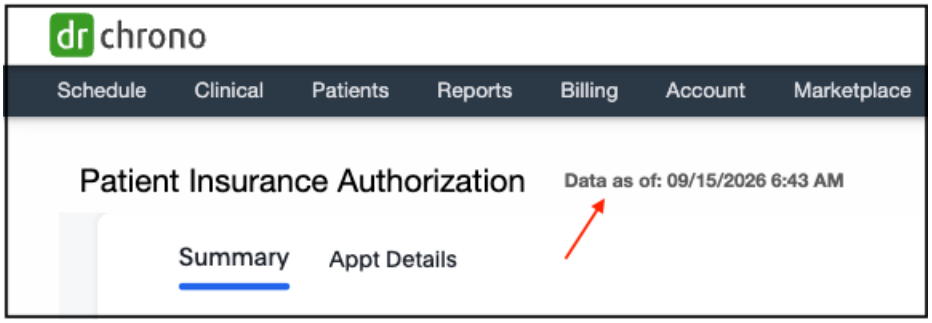
The Patient Insurance Authorization Report provides a quick way to track and manage authorizations in DrChrono. Use this report to easily access authorization details, monitor status, and streamline workflows.

Summary | Save View | Appt Details | Video Walkthrough

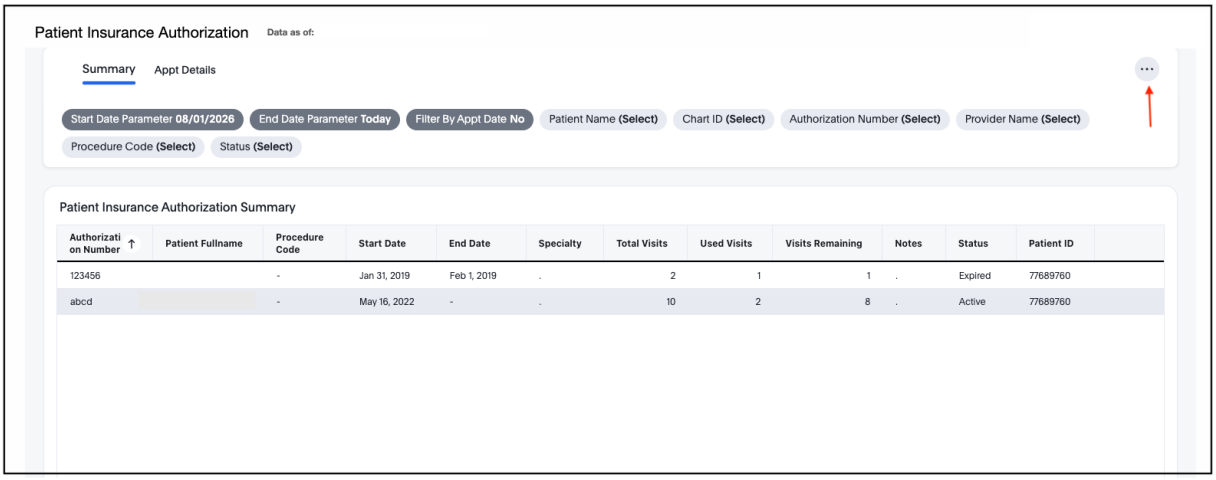
Summary

1. Navigate to **Reports > Patient Insurance Authorization.** Several options are available to customize the report, including:
    a. Start Date Parameter
    b. End Date Parameter
    c. Filter by Appt Date
    d. Patient Name
    e. Chart ID
    f. Authorization Number
    g. Provider Name
    h. Procedure Code
    i. Status: Active, Expired, or Both

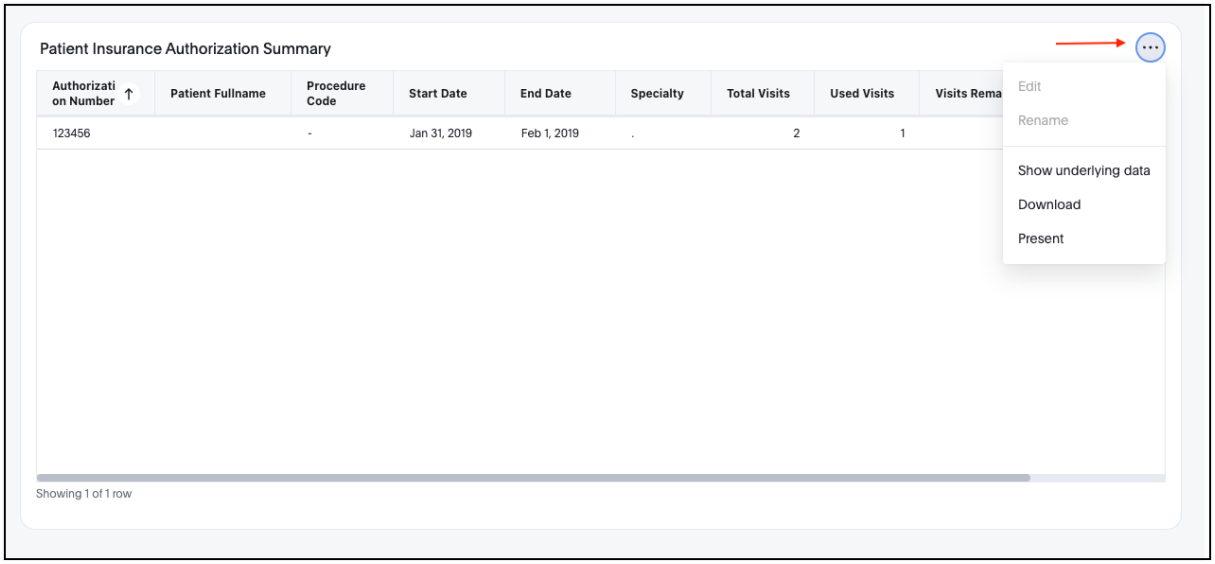
2. After the parameters are set, the information will populate. The Data Freshness date and time will display at the top of the screen.



3. Pressing the three horizontal dots on the right side of the screen of the top tile will expose additional options to schedule the running of the report, designate the email(s) to receive the report, and display the information in presentation mode.

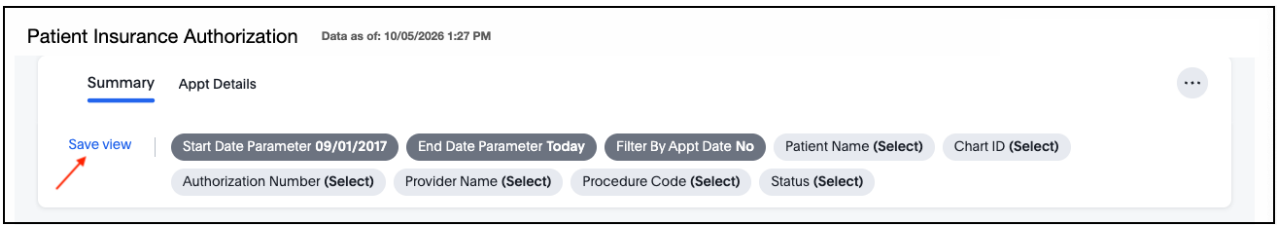


4. Pressing the three horizontal dots on the right side of the screen of the bottom tile will expose additional options to show the underlying data, download the report, and display the information in presentation mode.

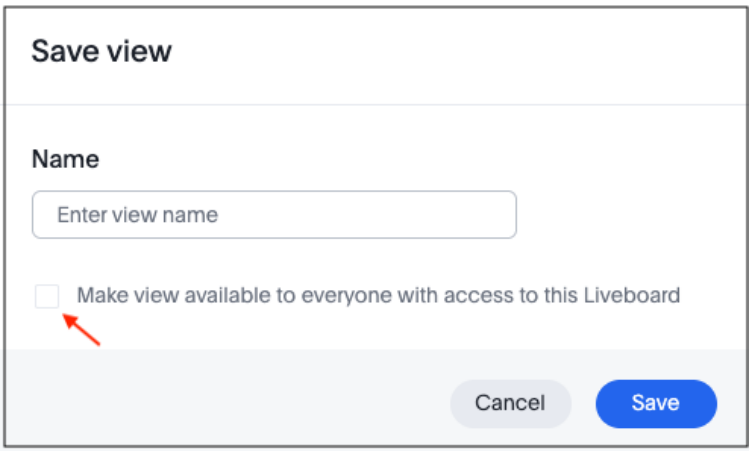


Save View

To save the filters set, press **Save View** on the left side of the screen.

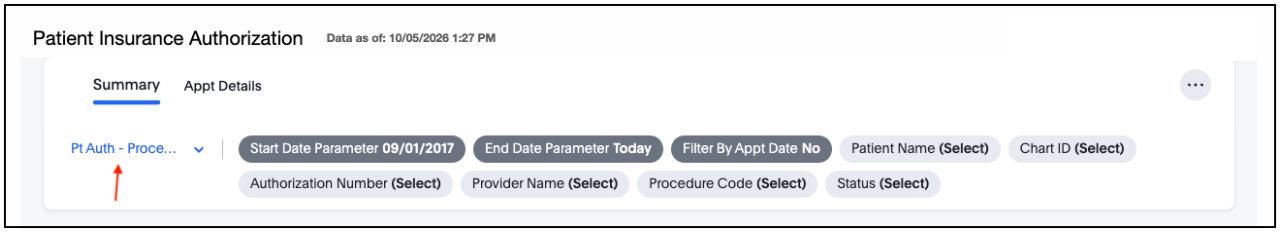


Enter a name for the view when prompted. To share the view with colleagues, check the box next to **Make view available to everyone with access to this Liveboard**.



Saved views preserve all filter selections, including date type and grouping. They do not save a specific date range.

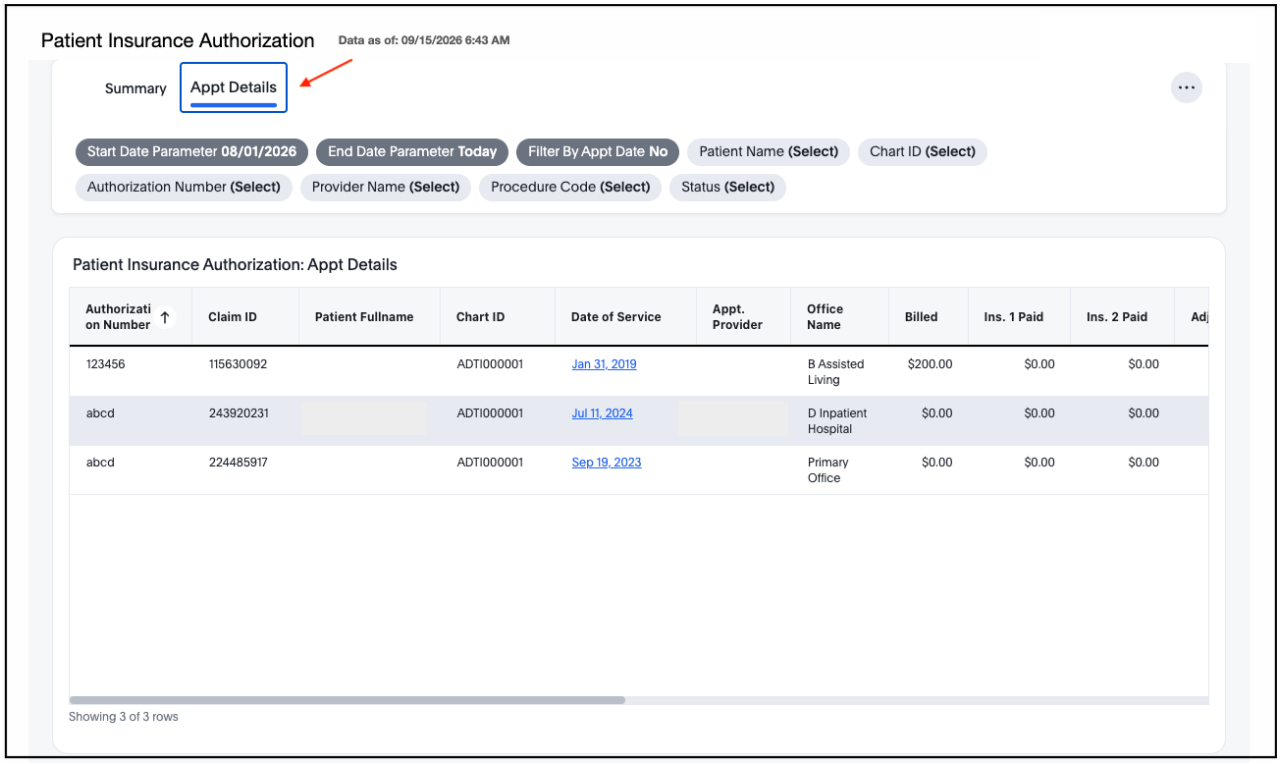
To rerun the report, select it from the left side of the screen. If it is not showing, press the down arrow for additional saved views.



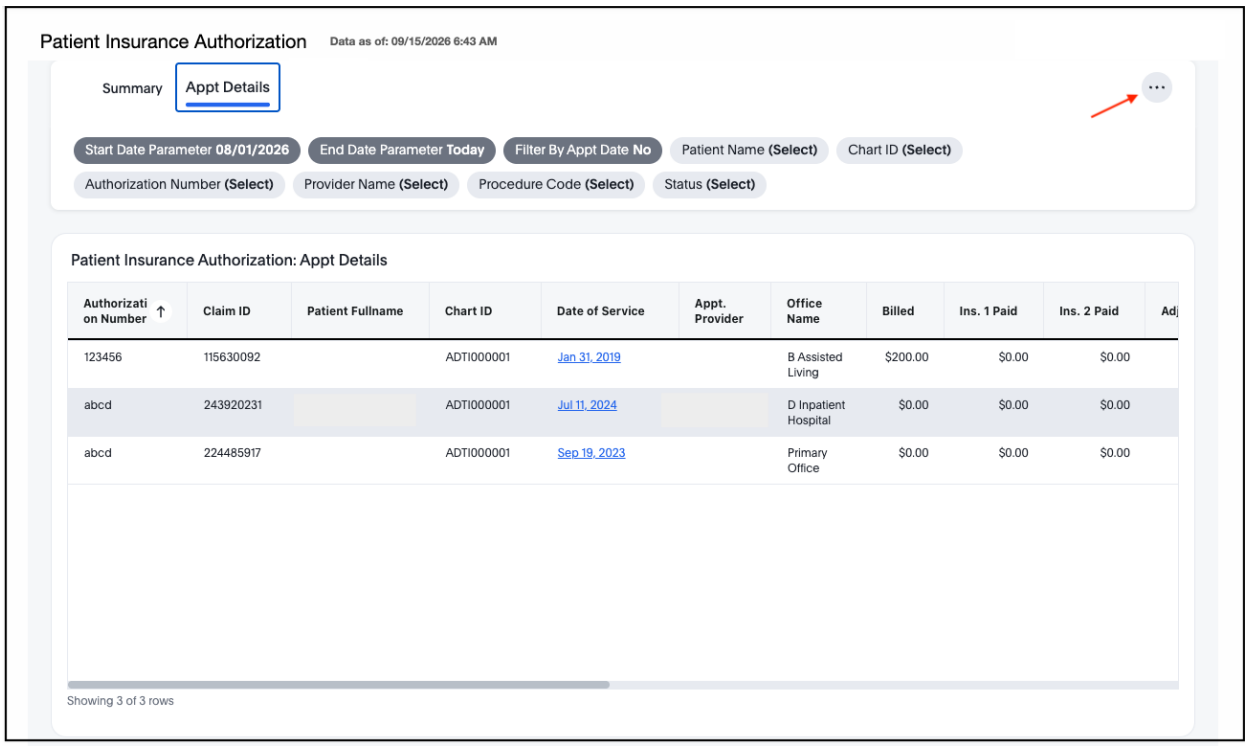
Appt Details

The **Appointment Details** tab provides detailed authorization and billing information based on the selected search criteria. It includes billed amounts, insurance and patient payments, adjustments, outstanding balances, billing status, EDI dates, primary and secondary insurers, and additional claim codes.

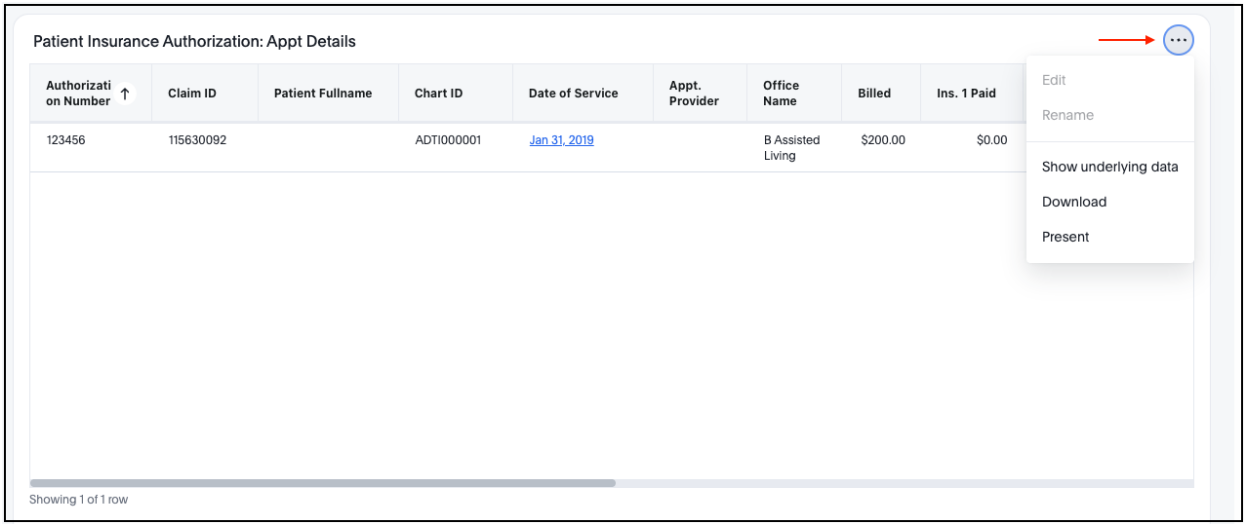
Use this information to quickly review claims, identify discrepancies, and follow up on outstanding issues.



Select the **three horizontal dots** on the right side of the screen on the top tile to access additional options, including scheduling the report to run, adding email recipients, and displaying the report in presentation mode.



Select the **three horizontal dots** on the right side of the screen on the bottom tile to access additional options, including viewing underlying data, downloading the report, and displaying the report in presentation mode.



Video Walkthrough