

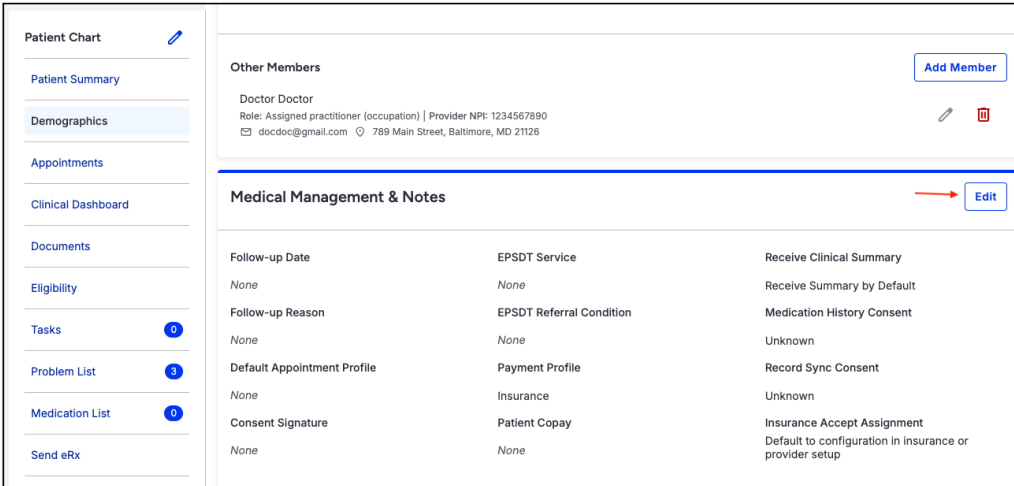
# Patient Level Override - Insurance Accept Assignment

Last modified on 03/16/2026 11:16 am EDT

A new **Insurance Accept Assignment** field can be configured at the patient level to override the default assignment settings defined in Insurance Setup or Doctor Settings. This option allows practices to control assignment behavior for individual patients when needed, while maintaining existing defaults for all others.

## Where to Find the Field

1. Navigate to the patient's chart > Demographics tab
2. Scroll down to the Medical Management & Notes section
3. Select Edit



The screenshot shows a patient chart interface. On the left is a sidebar with navigation tabs: Patient Chart, Patient Summary, Demographics (selected), Appointments, Clinical Dashboard, Documents, Eligibility, Tasks, Problem List, Medication List, and Send eRx. The main content area is divided into sections. The 'Other Members' section shows a doctor profile with an 'Add Member' button. Below it is the 'Medical Management & Notes' section, which contains a table of settings. An orange arrow points to an 'Edit' button in the top right corner of this section.

Follow-up Date	EPSTD Service	Receive Clinical Summary
None	None	Receive Summary by Default
Follow-up Reason	EPSTD Referral Condition	Medication History Consent
None	None	Unknown
Default Appointment Profile	Payment Profile	Record Sync Consent
None	Insurance	Unknown
Consent Signature	Patient Copay	Insurance Accept Assignment
None	None	Default to configuration in insurance or provider setup

4. Navigate to the Insurance Accept Assignment on the bottom left. This section is to be used when an override is required for a particular patient/payer.

- a. **Yes** - will set the assignment for the individual patient to accept the insurance assignment.
- b. **No** - will set the assignment for the individual patient to not accept the insurance assignment.
- c. **Default** - will default to the value set under the Insurance or Provider setup.

### Edit Medical Management & Notes ✕

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#### Medical Management

**Follow-up Date** ⓘ

**Follow-up Reason** ⓘ

**Default Appointment Profile**

**Consent Signature**

**EPSDT Service**

**EPSDT Referral Condition**

**Payment Profile** ⓘ

**Patient Copay**

**Medication History Consent**

Yes, patient has given consent to obtain medication history.

No, patient has not given consent to obtain medication history.

Unknown

**Record Unknown**

Patient receives clinical summary by default.

Patient declined to receive clinical summary.

**Insurance Accept Assignment** ⓘ

Yes

No

Default to configuration in insurance or provider setup

By default, the system uses the Accept Assignment setting configured in Insurance or Provider setup. Set this field at the patient level only if you need to override the default behavior.

## How Assignment Priority Works

The system determines the Accept Assignment value using the following priority order:

### 1. Patient-Level Override

If the field is set to **Yes** or **No**, that value overrides all other configurations.

### 2. Insurance Setup

If the patient-level field is **blank**, the system uses the **Accept Assignment** checkbox configured in **Billing > Insurance Setup**.

### 3. Doctor Settings

If the patient-level field is blank and no insurance record exists in Insurance Setup, the system falls back to **Doctor Settings > Insurance Assignment Not Accepted**

## Audit Logging

Any change to the **Insurance Accept Assignment** field is recorded in the **Audit Log**, including:

- Previous value, New value, the user who made the change, and the timestamp of the update.

## Claim Form and EDI Behavior

The assignment value determines how information is populated on claim forms and in EDI submissions.

### If Insurance Accept Assignment = Yes

- **HCFA Form**
  - Box 13: *Signature on File*
  - Box 27: Not selected
- **EDI 837 (CLM Segment)**
  - CLM06: A
  - CLM07: Y

### If Insurance Accept Assignment = No

- **HCFA Form**
  - Box 13: Blank
  - Box 27: Not selected
- **EDI 837 (CLM Segment)**
  - CLM06: C
  - CLM07: N

This enhancement ensures consistent claim behavior while giving practices the flexibility to override assignment settings for specific patients when necessary.

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