

# NEXT STEPS


## Add a New Authorization

Last Modified on 05/27/2025 3:52 pm EDT

### About

Some insurance payers require clients to receive Authorization prior to a Service or Services. To use the Authorization Tracker in NSS, agencies must mark the client insurance as requiring Prior Authorization. Agencies can do this from the **Billing Engine** or, if they do not have a Billing Engine, the **Face Sheet**.

### Mark Client Insurance as Requiring Prior Authorization (Billing Engine)

1. Within the Billing Engine, click the **Client Insurance** button.
2. Enter a **Case No.**, or click the **Search** button  to search for the client.
3. Select the insurance you want to edit and click the **Edit Insurance** button. Or, double-click the insurance to open the Client Insurance Form window.
4. Click **Page 2** if you are using the Virtual Front Office (VFO) or **Page 3** within the Virtual Private Office (VPO).



**Note:** You can check to see which version of the Billing Engine you are using by going to **Help > About Front Office** or **Help > About Private Office**.

5. Click the **Edit** button.
6. Select the **Prior Authorization Required?** checkbox.
7. Click the **Save** button.



**Note:** You can also set requiring Prior Authorization at the insurance payer level so that it auto-checks the box in the Client Insurance Form.

### Mark Client Insurance as Requiring Prior Authorization (No Billing Engine)

If your agency does not use the Billing Engine, you can mark Client Insurances as requiring Prior Authorizations from the client's **Face Sheet**.



**Warning:** The options below are only visible **when configured** if your agency does **NOT** have a Billing Engine. If your agency does not have a Billing Engine and you cannot see these options, contact NSS Support.

1. Within NSS, navigate to the **Face Sheet**.
2. Search for the client if the client is not already displayed.
3. Click **Edit**.
4. Scroll down to the **Client Insurance Plan** section.
5. Under the **Covered Benefits** section of the Insurance you want to mark as requiring prior Authorization, select one of the following options depending on the client's insurance:
  - Pre-authorization required for Mental health benefits?
  - Psych Testing?
  - Substance Abuse Benefits?
6. Click **Update**.

### Add a New Authorization for a Client

Once an insurance is marked as requiring Prior Authorization for a client, the Authorization Tracker will display within NSS. The



Authorization Tracker can be displayed on any kind of Note, Face Sheet, or within the Individualized Treatment Plan (ITP) Wizard.

1. Navigate to a **Note, Face Sheet**, or **ITP** from the Main Menu.
2. Search for the client if the client is not already displayed.
3. Click **Add a New Authorization**

## MISC NOTES

BEGIN ENTERING LAST NAME AND CLICK ON CLIENT TO SELECT:

+

SEARCH BY BIRTHDATE FORMAT: ☒ MM/DD/YY ☐ MM/DD/YYYY

LIST ☒ ACTIVE CLIENTS ☐ ALL CLIENTS

Name:	Harriet Spy	Date of Birth:	
Referral Source:		Age:	N/A
Admit Date:	5/5/2021	Gender:	
Programs:	Medication Management	Case No.:	1035053-1
Primary Clinician:	Knowledge Team SME	Self Pay Balance:	<button>Get Balance</button>

Authorizations are required by one or more insurances. There are no open authorizations.

Add a New Authorization
View Authorization History

4. Complete the following fields as necessary for the Authorization:

- **Insurance:** Select the insurance that the authorization is for.
- **Auth Units:** Enter the units of services approved by the insurance, if applicable.
- **Auth Visit:** Enter the number of visits approved by the insurance, if applicable. Visits are distinct days of service (e.g.: If the client is authorized for 5 visits, that means within the 5 day time frame they are authorized for as many services as needed).
- **Effective Date:** Enter the Authorization start date.
- **Expiration Date:** Enter the Authorization end date.
- **Procedure:** Select the procedure authorized by the insurance payer. If multiple procedures are authorized, you must select the group option for those codes from the drop-down.



**Note:** The Activity Codes that are displayed here come from the information added to the Activity Code field in Add Activity Codes to Clinical Billing Widget. For Authorization Groups to be displayed, see Set Up Authorization Groups

- **Authorization Number:** Enter the number provided by the payer.
- **(Optional) Notes:** Enter any notes as necessary.

NextStep

Search: Spy, Harriet The +

SEARCH BY BIRTHDATE FORMAT: ☒ MM/DD/YY ☐ MM/DD/YYYY

LIST ☐ ACTIVE CLIENTS ☒ ALL CLIENTS

Name: Harriet Spy  
 Age: N/A  
 Current Status: Admitted 5/5/2021  
 Case No.: 1035053-1  
 Self Pay Balance: [Get Balance](#)

Date of Birth:  
 Gender:  
 Programs: Medication Management  
 Primary Clinician: Knowledge Team SME

Authorizations are required by one or more insurances. There are no open authorizations.

Insurance: AETNA

Auth Units: Effective Date: 05/07/2021 Expire Date: 8/7/2021

Auth Visits: 12

Procedure: 90832,90834,90837,90846,90847 HALF INDIVIDUAL, INDIVIDUAL, INDIVIDUAL EXTENDED, FAMILY

Auth #: 123456789

Note: [Save Auth](#) [Cancel](#)

[Main Menu](#) [Edit](#) [Add New](#)

- Click **Save Auth**. The Authorization Tracker now displays the authorization information for the client on Notes, Face Sheet, and within the ITP.

Procedure	Authorized	Used	Remaining	Effective Date	Expire Date	Auth #
90832,90834,90837,90846,90847 HALF INDIVIDUAL, INDIVIDUAL, INDIVIDUAL EXTENDED, FAMILY WITHOUT CLIENT AND FAMILY	12 Visits/Days	0 Visits/Days	12 Visits/Days	5/7/2021	8/7/2021	123456789
<a href="#">Add a New Authorization</a> <a href="#">View Authorization History</a>						



**Warning:** If you do NOT have a Billing Engine, **stop here**. You have completed the steps to add client authorizations. If you DO have a Billing Engine, continue to the next section to send the Authorization information to your Billing Engine.

## Send Authorization Information to Billing Engine

- To send the Authorization details to the Billing Engine, click the **plus sign** to expand the Authorization. (If you do not see the plus sign, refresh your page.)

Procedure	Authorized	Used	Remaining	Effective Date	Expire Date	Auth #
90832,90834,90837,90846,90847 HALF INDIVIDUAL, INDIVIDUAL, INDIVIDUAL EXTENDED, FAMILY WITHOUT CLIENT AND FAMILY	12 Visits/Days	0 Visits/Days	12 Visits/Days	5/7/2021	8/7/2021	123456789
<a href="#">Add a New Authorization</a> <a href="#">View Authorization History</a>						

- Click **CONFIRM TO Billing**.



**Procedure** Authorized Used Remaining Effective Date Expire Date Auth #

90791 INITIAL 12 Visits/Days 0 Visits/Days 12 Visits/Days 5/7/2021 8/7/2021 123456789

Insurance: AETNA History: ☐

Auth Units:  Used Units:  Eff. Date: 5/7/2021 Expire Date: 8/7/2021

Auth Visits/Days: 12 Used Visits/Days: 0

Procedure: 90791 INITIAL Auth #: 123456789

Note:

CONFIRM ONLY CONFIRM TO Billing Save Only

[Add a New Authorization](#) [View Authorization History](#)



**Note:** If you do not see the CONFIRM TO Billing option when editing an Authorization, it is because you do not have the **Confirm Auths** user permission set in **Maintain Users > Process Permissions**

- Once you've confirmed the Authorization information to the Billing Engine, a **C** is displayed next to the Auth # within the Authorization Tracker. The information is displayed in the Caps section of the Client Insurance Details List in the Billing Engine.

**Client Insurance Details List - (CLINSL)**

Forms: Client Insurance List (F10)

Client: 1035053 Spy, Harriet The

Insurance: AETN AETNA

Effective Dates	Caps - Effective dates	Act. Code	Ability to Pay	Act. Code
	06/15/2021 To 06/30/2021	90840		
	05/07/2021 To 08/07/2021	90791		

Edit Effective Dates Edit Caps Edit ATP

Act. Code	Screen Amount	Copay/Deductible - Eff Dates	Act. Code	Act. Code	Diagnosis	Pl Of Cont
12345	0.00	05/03/2021 To / /	GLOBAL			

Activity Code Edit Copay / Deductible Activity Code Exclusion Diagnosis Billable Place Of Cont Exclusion

Cancel Insurance

