Authorization Auto Link Logic (BETA)

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Authorization Auto Link Logic

When Authorization auto link is enabled, OfficeEMR automatically links an existing authorization to an appointment or claim based on the logic below. See Authorization Setup.
An authorization must be Active to be eligible for auto-linking (see the definition at the end of this section).

Appointment Auto-Link

Condition	Result
An active authorization exists for the primary payer on the appointment	Link the authorization to the appointment
Multiple active authorizations exist for the primary payer	Do not link
The authorization specifies a rendering provider and it matches the appointment's resource	Link the authorization
The authorization specifies a rendering provider and it does not match the appointment's resource	Do not link

Claim Auto-Link (Primary, Secondary, and Tertiary Payer)

Claims are evaluated independently for the primary, secondary, and tertiary payer. For the primary payer, this check runs only if an authorization was not already linked from the appointment.

Condition	Result
An active authorization exists for the payer level on the claim	Link the authorization, subject to the procedure and rendering provider checks below
The authorization specifies a procedure and that procedure is on the claim	Link the authorization
The authorization specifies a procedure and that procedure is not on the claim	Do not link
The authorization specifies a rendering provider and that provider is on the claim	Link the authorization
The authorization specifies a rendering provider and that provider is not on the claim	Do not link
Multiple active authorizations exist for the payer level and at least one has a matching procedure code	Link based on the procedure code match
Multiple active authorizations exist for the payer level and none has a matching procedure code	Do not link
Multiple active authorizations exist for the payer level and at least one has a matching rendering provider	Link based on the rendering provider match
Multiple active authorizations exist for the payer level and none has a matching rendering provider	Do not link

Authorization "Active" Definition

An authorization must be Active — based on its effective dates and remaining visit count — to be eligible for auto-linking.

Criteria	Requirement
Effective Dates	The appointment date (or claim date of service) must fall between the authorization's start and end date
Visit Counts	Visits utilized must be less than the total number of authorized visits
Amounts	Dollar amount utilized must be less than the total dollar amount.