



Accelerating
Better Outcomes

ATREZZO USER GUIDE

Assessment Module



Table of Contents

Introduction	4
Security	4
Getting Started	5
System Navigation	6
General System Features	7
Home Screen View	8
Cases	9
Searching By Case	9
Searching by Consumer	10
Search by Case ID	11
Change Context	11
Case Overview	12
Letters/Reports	12
Adding Notes	12
Messages	13
Submitting a New Request	13
Adding a Temporary Consumer	14
Uploading Documents	18
Consumers	20
Reports	21
Setup	23
Add New User	23
Manage Users	25
Add New Provider Group	27
Message Center	28
Troubleshooting Tips and Tricks	29
Inactivity Warning	29
Appendices	30
How to Add Google Chrome to Computer	30
How to set Chrome as Default Browser	32
How to Set Atrezzo Bookmark in Chrome	33
Updating User Profile	34



Change Password	35
Informational Error/Warning Messages	36
How to Access Technical Assistance	37



Introduction

The Atrezzo system is a person-centered, web-based solution that transforms traditional, episodic-based care management into proactive and collaborative population healthcare management.

The purpose of this user guide is to provide an overview of the Assessment Module functionality within Atrezzo. This manual will identify the steps and highlight the processes to complete Assessments and/or Questionnaires and provide troubleshooting tips and tricks. Access, views, and options will vary based on contractual requirements and assigned user roles. It is meant to be utilized as a resource in addition to system training. This user guide was designed to be easy-to-use for users familiar with a basic PC and internet environment.

Security

The Atrezzo portal is designed to support specific roles. Prior to accessing the system, you will be assigned a specific user role with pre-defined system permission. Access, functionality, and system activities will be based on the assigned user role.

The system will automatically terminate an active session after 30-minute of consecutive inactivity. A pop-up will appear with a 2-minute countdown to logging out. If you are actively working within the system, you will not receive this pop-up warning.

To continue working, click **Continue**. If you do not select continue before the countdown reaches 0, you will be required to login again to continue utilizing the system. The system AutoSaves as you navigate and complete fields. Completed work will not be lost; however, any unsaved work will be lost if the system times out due to inactivity.

Application Warning

Your session is about to expire due to a prolonged period of inactivity. If you do not respond to this message, you will lose any unsaved work and will be required to log into the application again.

You will automatically be logged off in 01:51.

Please press **Continue** to keep working.

CONTINUE

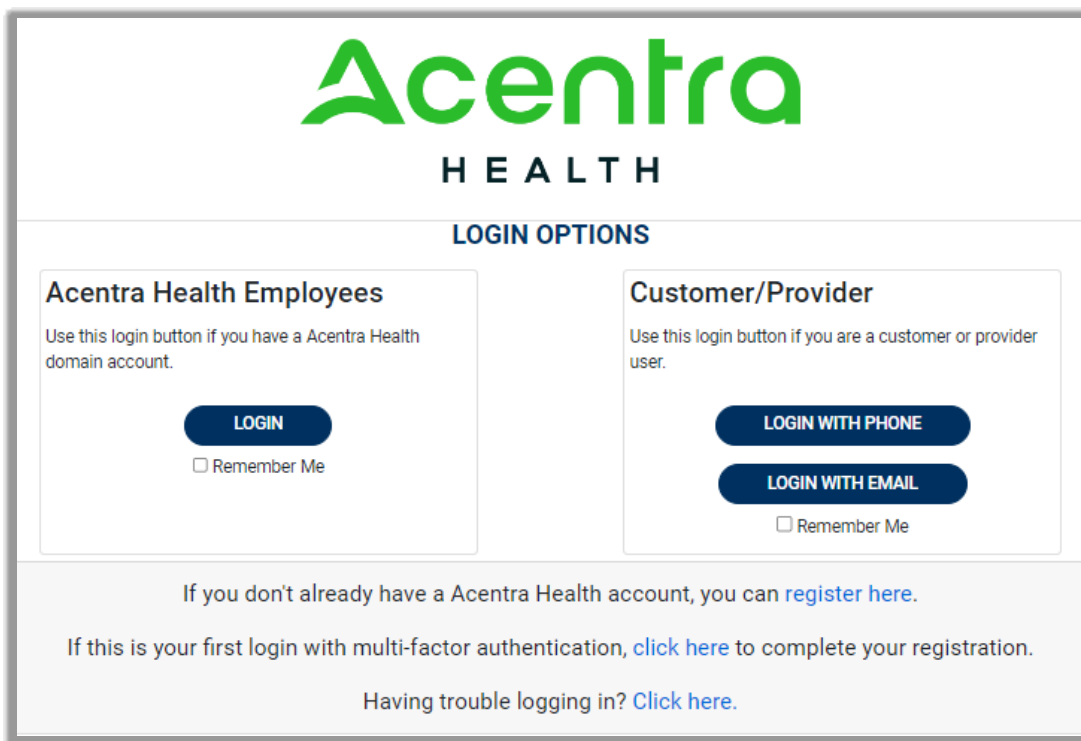


Getting Started

You will receive access to the system by a Provider Administrator. You will receive a system generated email containing a link to complete Account Registration. The link will expire after 2 days if account registration is not complete.



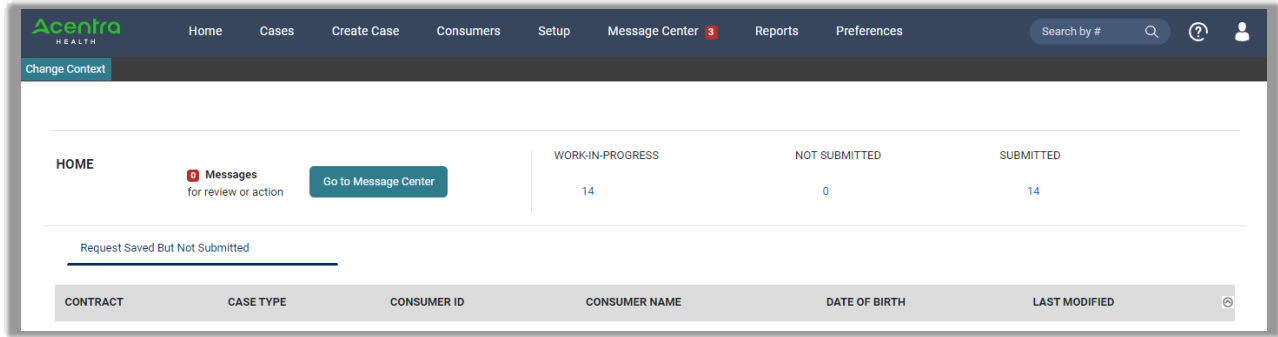
You will be required to complete Multi-Factor Authentication (MFA) during registration. This is a one time process. Future login will be under the Customer/Provider side of the login screen.





System Navigation

Upon successful login, you will be taken to the Atrezzo Provider Portal Home Page. The navigation bar will remain in place regardless of location and user role, which allows for quick and easy navigation from any screen.



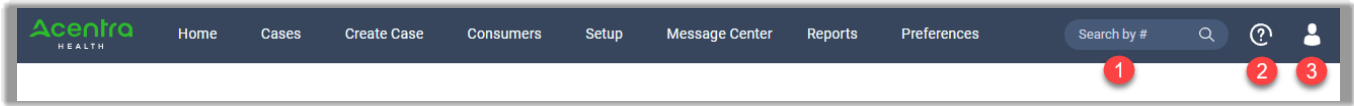
The legend below gives a brief overview of each area within Atrezzo. For a more detailed description, and for all available workflows, click the hyperlink.

<u>Home</u>	This is the default page upon successful login and will enable you to view submitted cases and any pending submissions.
<u>Cases</u>	This section will enable you to search cases based on specific parameters. To ensure efficient search results, try selecting specific information in each drop down to narrow search results.
<u>Create Case</u>	This section will enable you to create a new request using the Create Case Wizard.
<u>Consumers</u>	This section will enable you to search for Consumer, Member, or Beneficiary specific information utilizing the Consumer ID or last name and date of birth. Consumer specific data will be rendered based on information entered.
<u>Setup</u>	Visible to Provider Administrator users only This section will enable Provider Administrators to manage, edit, and add provider users for the facility and add additional provider groups.
<u>Message Center</u>	This section will enable you to view messages from the clinical review team regarding specific consumers and/or cases.
<u>Reports</u>	This section will display all available reports for those who have access. User specific reports will be listed on this page, no search required.
<u>Preferences</u>	Visible to Provider Administrator users only This section will enable you to set preferred diagnosis, procedure codes or preferred servicing providers. This will allow for quicker request submission.

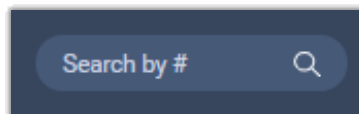


General System Features

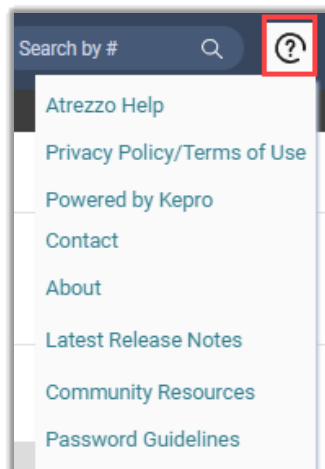
This section highlights the features found on all screens throughout the system and provides information on how to utilize these features for optimal navigation.



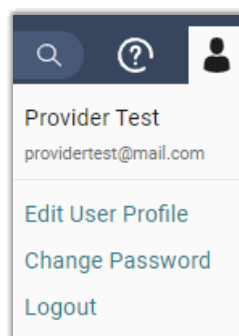
1. The **Search by #** field allows you to quickly search for a Case ID or Authorization Number. Enter the Case ID or authorization number, then hit enter on your keyboard or click outside the search field to be taken to the specified case. (See [Searching by Case ID](#) for step-by-step instructions).



2. The **Help** menu will provide access to [Atrezzo Help](#) (user guides, FAQ), Community Resources, and Password Guidelines.



3. The **Profile** section will identify the user logged in. Click on the person icon in the upper right corner to open menu options where you can [Edit User Profile](#), [Change Password](#), or Logout.





Home Screen View

Once successfully logged in, you will be taken to the Acentra Home Screen which defaults to display available **Request Saved but Not Submitted**. This will provide a list of Consumers with cases that have been started but are incomplete and have not been submitted for clinical review.

CONTRACT	CASE TYPE	CONSUMER ID	CONSUMER NAME	DATE OF BIRTH	LAST MODIFIED
----------	-----------	-------------	---------------	---------------	---------------

To complete the saved case, you can click the edit icon that will appear when hovering over the specified Consumer line.

CONTRACT	CASE TYPE	CONSUMER ID	CONSUMER NAME	DATE OF BIRTH	LAST MODIFIED
CO UM	UM-OUTPATIENT	0933446	SARA ALOBAIDI	04/10/2006	10/1/2021 8:39:46 AM
CO UM	UM-OUTPATIENT	0933446	SARA ALOBAIDI	04/10/2006	10/1/2021 8:30:09 AM
CO UM	UM-OUTPATIENT	0933446	SARA ALOBAIDI	04/10/2006	9/30/2021 9:02:42 AM

The numbers below Work-In-Process, Not Submitted, and Submitted are a total of your organization's cases in that status. Clicking the hyperlinked numbers will bring you to the case search page.

HOME	0 NEW MESSAGES Go to Message Center	38	10	28
------	--	--------------------	--------------------	--------------------



Cases

This section is searchable by Case or Consumer. Select the desired search option at the top.

The screenshot shows the Acentra Health user interface. At the top, there is a navigation bar with 'Home', 'Cases', 'Create Case', 'Consumers', 'Setup', 'Message Center', 'Reports', and 'Preferences'. A search bar is on the right. Below the navigation bar, there is a 'Change Context' button. The main content area is titled 'CASES' and features two buttons: 'BY CASE' (highlighted with a red box) and 'BY CONSUMER'. Below these buttons is a 'CASE TYPE' dropdown menu with 'Select One' as the current selection.

Searching By Case

To search By Case, select **Case Type** UM from the drop down. Once the Case Type is specified, additional search parameters will appear. To identify specific cases and ensure efficient search results, try selecting specific information in each drop down to narrow search results.

Note: You must enter a submitted or 30-day service date span for search results to render.

This screenshot shows the search filters for the 'BY CASE' search. The 'BY CASE' button is highlighted with a red box and a red arrow. Below it, the 'CASE TYPE' dropdown is set to 'Assessment' and is also highlighted with a red box. There are four more dropdown menus: 'CASE STATUS', 'REASON', 'ASSESSMENT TYPE', and 'REQUEST TYPE', all set to 'Select One'. Below these are two date range fields: 'SUBMITTED FROM DATE' and 'SUBMITTED TO DATE', both with 'MM/DD/YYYY' placeholders and calendar icons, highlighted with a red box. A red arrow points to the 'SEARCH' button at the bottom right.

Search results will populate below.

CASE ID	SUBMITTED ON	CASE STATUS	REASON	ASSESSMENT TYPE	REQUEST TYPE
233380002	12/4/2023 11:31:36 AM	Submitted	Re-determination Review	CCC Plus	Initial
DIAGNOSIS			OUTCOME:		



Searching by Consumer

To search By Consumer, you must enter Last Name and DOB or Member ID and click **Search**.

Note: Some contracts will require additional information.

CASE / SEARCH - BY CONSUMER

CASES

BY CASE | **BY CONSUMER**

CONSUMER ID: LAST NAME: DATE OF BIRTH: MM/DD/YYYY SEARCH CONTEXT: All Related Submitting Providers

*Combination of DOB and Last Name or Consumer ID is required

SEARCH

Search results will render below.

NAME	DATE OF BIRTH	ADDRESS	CONSUMER ID	CONTRACT	CASE COUNT
ANG Test	12/15/1960	1111 33rd Somewhere,IA	TEMP001982021011200000	Colorado	0

Displaying records 1 to 1 of 1 records

Previous 1 Next

Show 10 Entries

The Consumer Name is a hyperlink which will populate all Submitted and Servicing Request for that consumer. Clicking the Case ID hyperlink will bring you into the case where you will have limited functionality.

Cases (1)

Case ID	Diagnosis	Case Status	Reason	Outcome	Assessment Type	Request Type	Letters	Messages	Attending Physician
233380002		Submitted	Re-determination Review		CCC Plus	Initial	0	0	

The Consumer Name is a hyperlink that will bring you to the consumer's information page and the status of the case will be visible in the top left corner of the page.

ATREZZO - CASE DASHBOARD

CONSUMER NAME	GENDER	DATE OF BIRTH	LOCATION
Patient Test	Female	12/01/1976 (47 Yrs)	

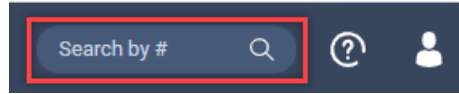
CASE ID	CASE CONTRACT	SUBMITTED ON
240040016		1/4/2024 12:16:08 PM

Submitted

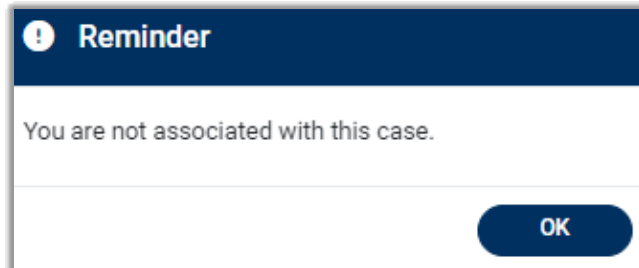


Search by Case ID

To search directly for a case, enter the Case ID in the search by # box on the top right of any page, then hit enter on your keyboard or click anywhere outside of the search box.

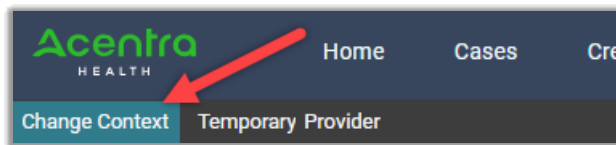


If a message is received indicating you are not associated with the case, be sure you are logged in under the appropriate provider.



Change Context

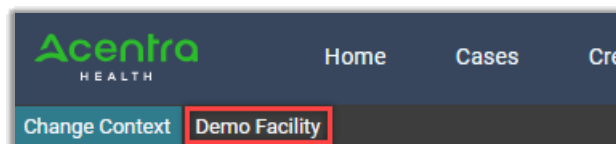
To update which provider/location you are logged in under, click **Change Context** in the upper left corner.



To select a different provider, click the arrow icon to the far right of the preferred selection.

CHANGE PROVIDER CONTEXT			
Name	NPI	Type	Address
Provider Demo	9999999999	0 - Provider	222 Main St Indianapolis IN 46077
NAME	NPI	TYPE	ADDRESS
Demo Facility	9999999999	0 - Acute Hospital	111 Main St Indianapolis IN 46077

The selected provider will be displayed in the banner at the top left of the screen.





Case Overview




The Case Overview will provide the current case including the Submitting Provider, Facility (if applicable), Attending Physician, Request Detail, and Diagnosis. In most cases, only the Submitting Provider and Request Detail will be completed.

Note: Completed information is indicated with a green check and will also be displayed on the info bar on the right side.

Case Overview	Letters/Reports(1)	Notes(0)	Messages(0)
EXPAND ALL ▾			
● Contacts / Legal Representative			▾
● Submitting Provider	Temporary DMAS Provider / 9999999999 / / VA		▾
● Facility			▾
● Attending Physician			▾
● Request Detail	Intervention Assessment		▾
● Diagnosis			▾
● Documents(0)			▾
● Questionnaires(0 of 0)			▾

Letters/Reports

Letters/Reports will display any applicable letters or reports that have been uploaded specific to this case. Clicking on the hyperlink to view the letter/report will open item outside the internet browser.

Case Overview	Letters/Reports(1)	Notes(0)	Messages(0)				
<table border="1"><thead><tr><th>File Name</th><th>File Size</th></tr></thead><tbody><tr><td> General-240040016.pdf</td><td>160.21 KB</td></tr></tbody></table>				File Name	File Size	 General-240040016.pdf	160.21 KB
File Name	File Size						
 General-240040016.pdf	160.21 KB						

Adding Notes

This section will display any notes pertaining to the specified case. This will include notes from Acentra Health or entered by the Provider. To enter a note, click **Notes**, type your message within the text field, and click **Add Note**.

Case Overview	Letters/Reports(0)	Notes(0)	Messages(0)
<p>ADD NEW NOTE</p> <div style="border: 1px solid #ccc; height: 20px; width: 100%;"></div> <p>Notes cannot be modified or deleted after being saved</p> <div style="text-align: right;">ADD NOTE +</div>			



Messages

In Messages you will see any messages to or from Acentra Health or the Provider.

FROM	SUBJECT	TO	SENT ON
Provider Test	Example	Acentra Health	1/4/2024 12:49:42 PM

To enter a new message, click **New Message** in the upper right corner. Message fields will populate. Complete the required fields, then select **Send**.

FROM: [Redacted] TO: [Redacted]

SUBJECT: [Redacted]

MESSAGE: [Redacted]

Please do not send additional clinical information through these messages. Additional clinical information should be added to the clinical information section of the request.

SEND

Submitting a New Request

The Create Case Wizard will walk you through the steps to create a new inpatient or outpatient request. In the navigation pane:

- 1) Click **Create Case**
- 2) Select **Case Type: Assessment**; then select **Case Contract** and **Assessment Case Type** in the Case Parameters section.



Once all required fields are complete, click 3) **Go to Consumer Information**.

Note: Some fields will prepopulate based on user role permissions and contract access.

The screenshot shows the 'Create Case' form in the Acentra Health system. The 'Create Case' menu item is highlighted with a red box and a red circle with the number 1. The 'Assessment' radio button is selected, also highlighted with a red box and a red circle with the number 2. The 'Go To Consumer Information' button is highlighted with a red box and a red circle with the number 3. The form includes fields for Case Type, Case Contract, and Assessment Case Type.

Enter at least one field for **Search Consumer** and click **Search**. Click the **Choose** button associated with the appropriate consumer and their information will populate.

The screenshot shows the 'Search Consumer' results page in the Acentra Health system. The 'Search' button is highlighted with a red arrow. The 'Choose' button for the first result is highlighted with a red box. The table shows search results for 'Patient Test' with a 'Choose' button.

Name	DOB	Address	Consumer ID	Contract	Case Count	Action
Patient Test	12/01/1976	,	TEMP000052024010400000	Virginia Medicaid	1	Choose

Adding a Temporary Consumer

If you cannot find the correct consumer after a thorough search, you can click **Add Temporary Consumer**. (Please make sure the search is exhaustive before using this option.) This creates a temporary consumer profile that will be merged with the permanent profile with a subsequent data load.



Note: Availability of this option will vary depending on contractual requirements.

New UM Case | Denver Provider | CO UM | -
Requesting Provider | Inpatient | -

Step 1 | Step 2 (checked) | Step 3
Case Parameters | Consumer Information | Create Case

Consumer Information/ Search Consumer/ Results

CONSUMER ID | LAST NAME | FIRST NAME (MIN 1ST LETTER) | DATE OF BIRTH

| test | | 12/15/1960

*Combination of DOB and Last Name or Member ID

Cancel | Search

Name	DOB	Address	Consumer ID	Contract
ANG Test	12/15/1960	1111 33rd Somewhere,IA	TEMP001982021011200000	Colorado

Showing 10 of 1

Not finding what you're looking for | **Add temporary consumer** | Back

The Contract Information will autopopulate. Enter at least the required fields for Consumer Details, Contact Information, and Other Information. Then Click **Create Temporary Consumer** to be taken to the Create Case confirmation page.

CONTRACT INFORMATION

CONTRACT * | PLAN *
Colorado | Colorado

CONSUMER DETAILS

PREFIX | FIRST NAME * | MIDDLE NAME | LAST NAME * | SUFFIX
Select One | | | test | Select One

GENDER *
 Male Female

DATE OF BIRTH * | LANGUAGE
12/15/1960 | Select One

CONTACT INFORMATION

Use Facility Address

ADDRESS LINE 1 * | ADDRESS LINE 2 | CITY * | COUNTRY *
 | | | Canada United States

STATE/PROVINCE * | COUNTY * | POSTAL CODE *
Select One | Select One |

PHONE NUMBER
|

OTHER INFORMATION

SSN (XXX-XX-XXXX)
|

SELF PAY | MEDICAID ID/SUBSCRIBER ID
| |

PRIVATE INSURANCE | OTHER ID
| |

MEDICARE HICN | MEDICARE MBI
| |

Cancel | **Create Temporary Consumer**



The system will create a new consumer profile and issue a temporary consumer ID. You can see in the example below that a temporary consumer ID will always start with TEMP, followed by numbers.

Consumer Information								test Person
CONSUMER NAME	DATE OF BIRTH	SSN	CONSUMER MEMBER ID	CITY	STATE	COUNTRY	COUNTY	
test Person	04/15/1965		TEMP002172022120600000					

Note that once you click Create Case, your changes will be saved, and the case will be created but not submitted. To move forward, click **Create Case**.

Step 1 Case Parameters Step 2 Consumer Information

CONSUMER NAME	ADDRESS	DATE OF BIRTH	SSN	CONSUMER MEMBER ID	CITY	STATE	COUNTRY	COUNTY
Patient Test		12/01/1976		TEMP000052024010400000				

Once you click **Create Case**, your changes will be saved and the case will be created but not submitted.

The submitting provider section will auto populate based on the provider creating the case. Complete required **Request Detail Section** to have appropriate Questionnaire added to the case.

Request Detail Intervention Assessment

* fields are mandatory

ASSESSMENT TYPE: Intervention Assessment REQUEST TYPE: Initial INTAKE METHOD: Web CURRENT LOCATION: Select One

Notification Date: MM/DD/YYYY Notification Time: HH:MM:SS AM/PM

- Diagnosis
- Documents(0)
- Questionnaires(0 of 3) Initial Contact Summary / Depression Anxiety and Stress Scale 21 Items (DASS-21) / Social Determinants of Health
- Notes



Once populated, click the arrow to open the Questionnaire section, then click the blue hyperlink to complete the questionnaire. The appropriate questionnaire will open in another tab within the browser. All questions will auto save throughout. Once all questions and all sections are complete, click **Mark as Complete**.

Questionnaire Name	Required	Internal	Created By	Created On	Score	Offline Mode	Checked Out By	Status	Action
Social Determinants of Health*	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Rules Engine	12/14/2023 10:46:01 AM	0	Checked In		Not Started	Actions
Depression Anxiety and Stress Scale 21 Items (DASS-21)*	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Rules Engine	12/14/2023 10:45:59 AM	0	Checked In		Not Started	Actions
Initial Contact Summary*	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Rules Engine	12/14/2023 10:45:58 AM	0	Checked In		Not Started	Actions

The questionnaire tab will automatically close, and you will return to the Create Case page. All required sections will be indicated complete with a green checkmark. To submit the request to Acentra Health, click **Submit**.

<input type="radio"/> Contacts / Legal Representative		▼
<input checked="" type="radio"/> Submitting Provider	Virginia Demo Facility / 9999999999 // VA	▼
<input type="radio"/> Facility		▼
<input type="radio"/> Attending Physician		▼
<input checked="" type="radio"/> Request Detail	Intervention Assessment	▼
<input type="radio"/> Diagnosis		▼
<input type="radio"/> Documents(0)		▼
<input checked="" type="radio"/> Questionnaires(3 of 3)	Initial Contact Summary / Depression Anxiety and Stress Scale 21 Items (DASS-21) / Social Determinants of Health	▼
<input type="radio"/> Notes		▼

AutoSaved



Once submitted, the case status will display.

ATREZZO - CASE DASHBOARD									
CONSUMER NAME	GENDER	DATE OF BIRTH	LOCATION	COUNTY	CONSUMER ID	MEMBER ID/PLAN	CASE TYPE	CONSUMER CONTRACT	
Patient Test	Female	12/01/1976 (47 Yrs)			TEMP000052024010400000		Incident Report	Virginia Medicaid	
Submitted									
CASE ID	CASE CONTRACT	SUBMITTED ON	COMPLETED ON	REASON	OUTCOME				
240040016	DMAS	1/4/2024 12:16:08 PM							

Once the review has been complete, the status will change from In Review to Completed. When a case review is complete, the Reason will indicate the outcome.

CONSUMER NAME	GENDER	DATE OF BIRTH	LOCATION	COUNTY	CONSUMER ID				
Completed									
CASE ID	CASE CONTRACT	SUBMITTED ON	COMPLETED ON	REASON	OUTCOME				
233480003		12/14/2023 10:56:42 AM	12/14/2023 9:59:15 AM	Complete	Completed				

Uploading Documents

Supporting clinical documentation can be added to cases at any point in the process. Follow the instructions below to add documentation.

In the case, click **Review**, then click expand **Documents**, and **Click Here to Upload File**.

The screenshot shows a case overview with tabs for Case Overview, Letters/Reports(1), Notes(0), and Messages(1). A list of categories is shown with expand/collapse arrows:

- Contacts / Legal Representative
- Submitting Provider (checked) - Temporary DMAS Provider / 9999999999 / / VA
- Facility
- Attending Physician
- Request Detail (checked) - Intervention Assessment
- Diagnosis
- Documents(0) (checked) - **Red arrow points to this section**

At the bottom right, a button labeled "CLICK HERE TO UPLOAD FILE" with a plus sign is highlighted with a red box.



To find the designated files, click Browse.

FILE UPLOAD

* fields are mandatory

SELECT FILE *

BROWSE MAX FILE SIZE: 4 MB

Acceptable File Types: doc, docx, jpg, jpeg, mdi, pdf, tif, tiff, xls, xlsx, xps .

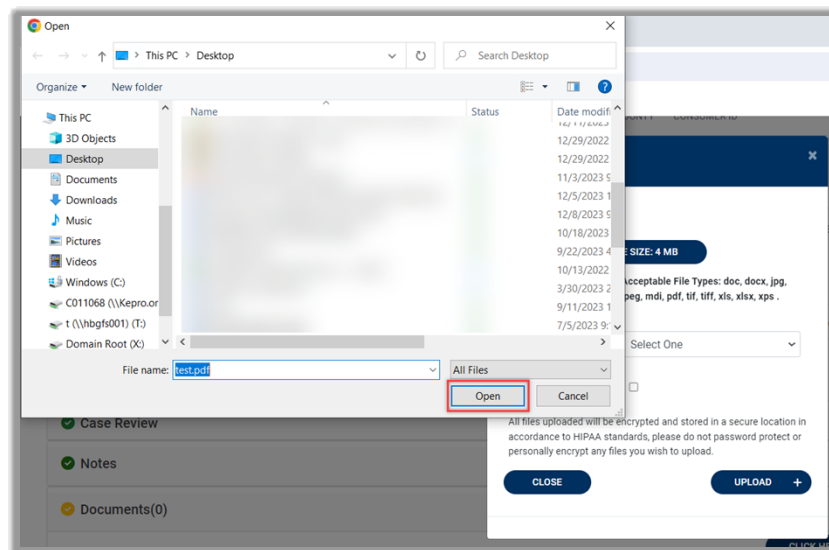
DOCUMENT TYPE * Select One

INTERNAL DISPLAY ONLY

All files uploaded will be encrypted and stored in a secure location in accordance to HIPAA standards, please do not password protect or personally encrypt any files you wish to upload.

CLOSE UPLOAD +

Select the necessary file and click Open.





Select the **Document Type** and click **Upload**.

FILE UPLOAD

* fields are mandatory

SELECT FILE *

BROWSE MAX FILE SIZE: 4 MB

test.pdf
Acceptable File Types: doc, docx, jpg, jpeg, mdi, pdf, tif, tiff, xls, xlsx, xps .

Please select Document Type

DOCUMENT TYPE * Select One

INTERNAL DISPLAY ONLY

All files uploaded will be encrypted and stored in a secure location in accordance to HIPAA standards, please do not password protect or personally encrypt any files you wish to upload.

CLOSE **UPLOAD +**

Once uploaded, documentation can be viewed by clicking the hyperlink. To upload additional documentation, follow the [above steps](#).

Documents(1) ADDITIONAL INFORMATION

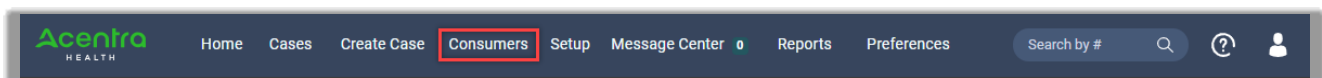
CLICK HERE TO UPLOAD FILE + CLICK HERE TO UPLOAD FAX +

Uploaded Successfully!

File Name	Document Type	Uploaded On	Modified By	Modified On	Request	Action
test.pdf External	Additional Information	12/14/2023 11:11:40 AM	sierra.hall	12/14/2023 11:11:40 AM		

Consumers

To search by Consumer (Member/Beneficiary), click **Consumers** on the navigation pane.



The Consumer default screen will appear providing options to search for a Consumer. This process is the same as searching the Consumer when creating a case. You must enter a Consumer ID or last name and date of birth. **Note:** Required fields will vary by contract and user permissions.



Search results will render below. To view the requests for this consumer, click on the Consumer Name hyperlink.

CONSUMERS RESET

CONSUMER ID: LAST NAME: FIRST NAME (MIN 1ST LETTER): DATE OF BIRTH: SEARCH

*Combination of DOB and Last Name or Member ID

NAME	DATE OF BIRTH	ADDRESS	CONSUMER ID	CONTRACT	CASE COUNT
Patient Test	12/01/1976	,	TEMP000052024010400000	Virginia Medicaid	1

Reports

Not all users will have access to reports and availability will vary by user role and contract requirements. To view available reports, click **Reports**. The report name will be a hyperlink and open the desired report in a new tab within the internet browser.

Acentra HEALTH | Home | Cases | Create Case | Consumers | Setup | Message Center | **Reports** | Preferences | Search by # | ? | User Icon

REPORTS

CONTRACT NAME	REPORT NAME	REPORT CATEGORY	REPORT DESCRIPTION
Colorado	CO Fax Activity	Administrative	CO Fax Activity
Colorado	CO ReviewerProductivity Clinical Review History	Operational Productivity	CO ReviewerProductivity Clinical Review History

Some reports will require additional information before they are populated. In the image below, we need to provide the Start Date, Status, Time period, and End Date before clicking **View Report**.

1=Weekly; 2=Monthly; 3=Quarterly; 4=Yearly; 5 Daily | <Select a Value>

Start Date: ← | End Date: ←

Status: ← | View Report



Click the **Printer** icon to bring up the Page size and Page orientation options.

1=Weekly; 2=Monthly; 3=Quarterly; 4=Yearly; 5 Daily 1

Start Date: 2/27/2023 End Date: 3/5/2023 11:59:59 PM

Status: Approved

Page Width

CO HCPF Provider Report

Requests submitted or certified between 02/27/2023 and 03/05/2023
or appeals completed between 02/27/2023 and 03/05/2023
NP: 999999999

Total records: 1

KI PRO Case ID	Submit Date	Member First Name	Member Last Name	Member ID	Request Type	Service Type	Procedure Code	Procedure Name	Reason	Modifier	Date of Determination
23060003	3/1/2023	ANG	Test	TEMP00198202 1011200000	Prior Auth	Physical Therapy	97110	THERAPEUTIC EXERCISES	Approved - Meets Criteria	96	3/1/2023

Select appropriate options and click **Print** to print the report.

Print

We'll create a printer-friendly PDF version of your report.

Page size:

Letter (8.5" x 11")

Page orientation:

Portrait

Print Cancel

To export and/or download, select the **Disk** icon, choose preferred format. The document will then open in the selected format which can be saved, distributed, or printed.

Page Width

Disk

Word

Excel

PowerPoint

PDF

TIFF file

MHTML (web archive)

CSV (comma delimited)

XML file with report data

Data Feed

TXT (Pipe delimited)

CSV No Header

Report ID: AT_OP_CO_

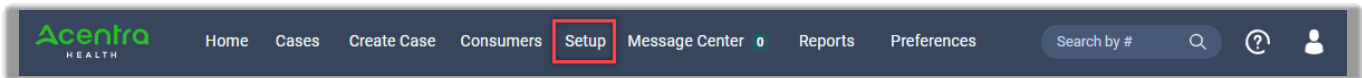


Setup

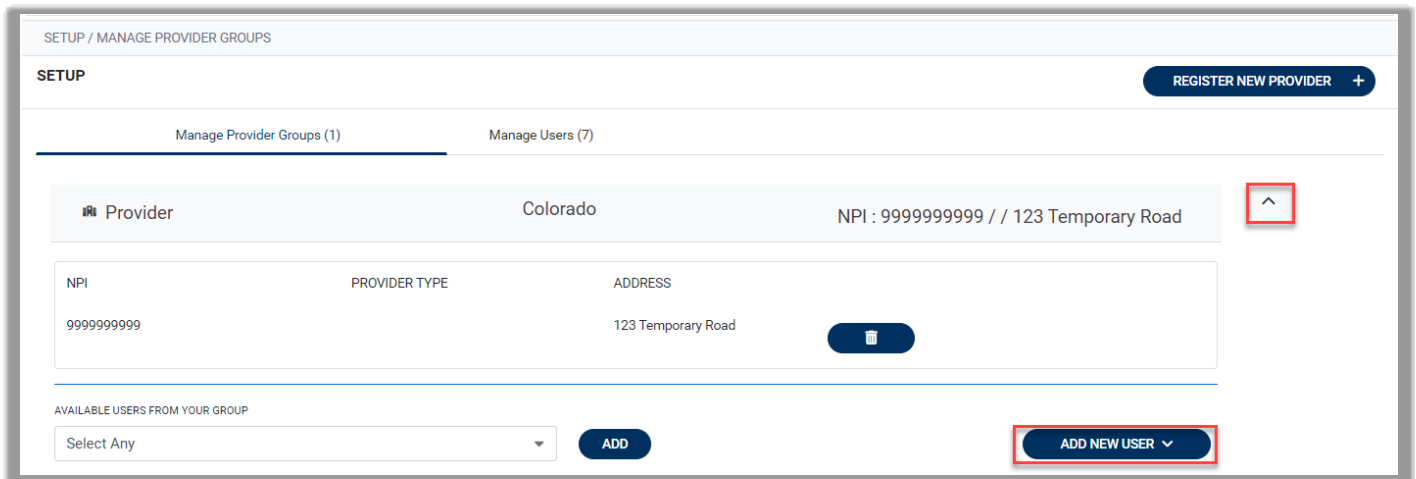
Setup is only visible to the Provider Group Administrator and Provider Administrator user roles. Setup will be used to add new users, edit users, add additional provider groups, and manage provider group assignments.

Add New User

As a Provider Group Administrator, users within your facility can be added and managed locally once the group account has been registered. To begin, click **Setup** in the navigation pane.



Always stay within the Manage Provider Groups tab/section to add users. Click the caret on the far right to expand the group section. Then click **Add New User**.



Create username and complete the contact information, click **Create**.

ACCOUNT INFORMATION

USER NAME *

CONTACT INFORMATION

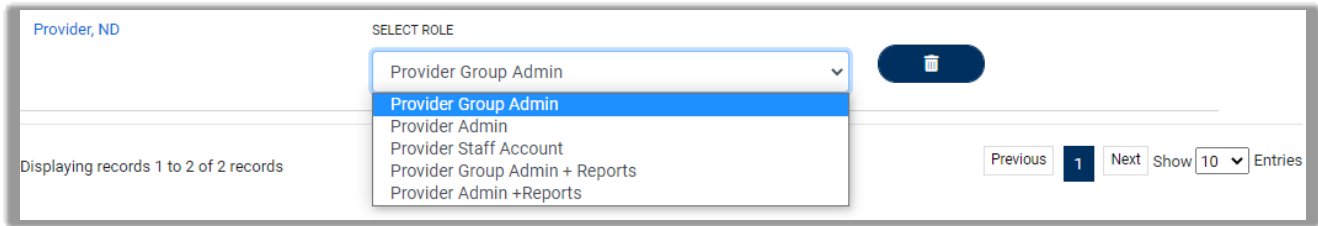
FIRST NAME *	LAST NAME *	EMAIL *	CONFIRM EMAIL *
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
ADDRESS LINE 1	ADDRESS LINE 2	CITY	STATE/PROVINCE
<input type="text"/>	<input type="text"/>	<input type="text"/>	Select One ▾
POSTAL CODE	PHONE	FAX *	
<input type="text"/>	<input type="text"/>	<input type="text"/>	

Note: Providers in receipt of Faxed Determination Letters: Official Communication of service authorization will be sent to the fax number entered above.

CREATE >



The user role will default to **Provider Staff Account**. This is the general account user. To change the user role, under Mange Provider Groups, select the Role the user should have. All accesses with Admin listed will have the ability to add and manage user roles for the assigned provider group.



Provider Staff Account	This general user role can enter prior authorization requests into the portal and view determination letter, obtain status updates, and messages within the UM review team as needed.
Provider Group Admin	This administrator role can add and manage users for all the providers in the group. Includes Provider Staff Account access.
Provider Admin	This role can add and manage users but only for the provider they are associated with. Includes Provider Staff Account access.
Provider Group Admin + Reports	This role can add and manage users for all the providers in the group and will have access to reports. Includes Provider Staff Account access.
Provider Admin + Reports	This role can add and manage users but only for the one provider they are associated with and will have access to reports. Includes Provider Staff Account access.

The new user will receive an email with a link to complete the MFA registration process. The user must click the link in the email within 2 days, then follow the MFA registration process to complete the access request.





Manage Users

The Manage Users tab allows you to update a user's contact information, reset multifactor authentication registration, deactivate, and delete users.

Click the **caret** associated with the appropriate user to expand available options.

The screenshot shows the 'Manage Users' tab selected. At the top, there are two tabs: 'Manage Provider Groups (1)' and 'Manage Users (7)'. Below the tabs, the user profile for 'Daffy Duck (trainer1)' is displayed, including the email 'email@yahoo.com' and phone number '(555) 123-9875'. A small caret icon is visible in the top right corner of the profile header. Below the profile, there is a table of associated providers. The table has columns for 'ASSOCIATED PROVIDER', 'PROVIDER TYPE', 'CONTRACT', 'ADDRESS', and 'SELECT ROLE'. Two providers are listed: 'Aurora Provider' and 'Denver Provider', both with 'None Listed' as the provider type and 'Colorado' as the contract. The address for both is '123 Temporary Road'. The 'SELECT ROLE' column shows a dropdown menu set to 'Provider Admin' and a trash can icon for each provider.

ASSOCIATED PROVIDER	PROVIDER TYPE	CONTRACT	ADDRESS	SELECT ROLE
Aurora Provider	None Listed	Colorado	123 Temporary Road Aurora CO 99999	Provider Admin
Denver Provider	None Listed	Colorado	123 Temporary Road Denver CO 99999	Provider Admin

To delete a user, you can click the Trashcan Icon and confirm the deletion in the pop-up window. This will completely remove this user from the system.

This screenshot is similar to the previous one, but the 'Manage Users (7)' tab is now active. The user profile for 'Daffy Duck (trainer1)' is shown. In this view, the trash can icon in the bottom right corner of the user profile card is highlighted with a red box, indicating it is the button to click for deleting the user.



Click the Pencil Icon to edit the user's information. All your changes will be autosaved unless you click **Cancel**. Notice that you can deactivate a user without deleting them by unchecking the **Active User** box.

SETUP / MANAGE USERS / Daffy Duck

Daffy Duck

ACCOUNT INFORMATION

USER NAME * AZURE USERNAME:

ACTIVE USER

RESET REGISTRATION

CONTACT INFORMATION

FIRST NAME * LAST NAME * EMAIL * CONFIRM EMAIL *

ADDRESS LINE 1 ADDRESS LINE 2 CITY STATE/PROVINCE

POSTAL CODE PHONE FAX *

Note: Providers in receipt of Faxed Determination Letters: Official Communication of service authorization will be sent to the fax number entered above.

CANCEL

Clicking **Reset Registration** will require you to confirm that you want to remove all associations with the multi-factor authentication account. Note that this cannot be undone.

portal-uat.kepro.com says

This will remove all associations with the multi-factor authentication account and cannot be undone. Are you sure?

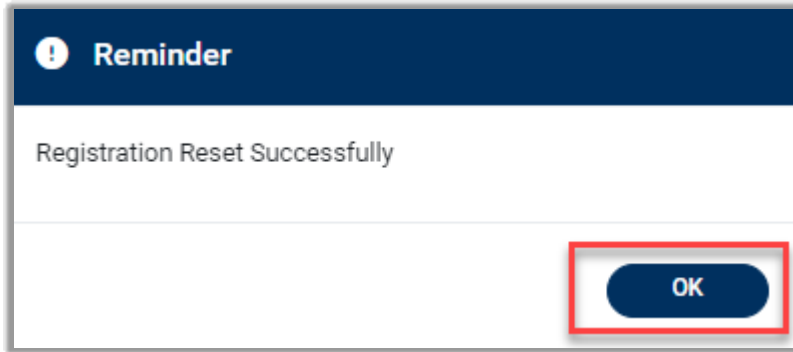
OK Cancel

RESET REGISTRATION

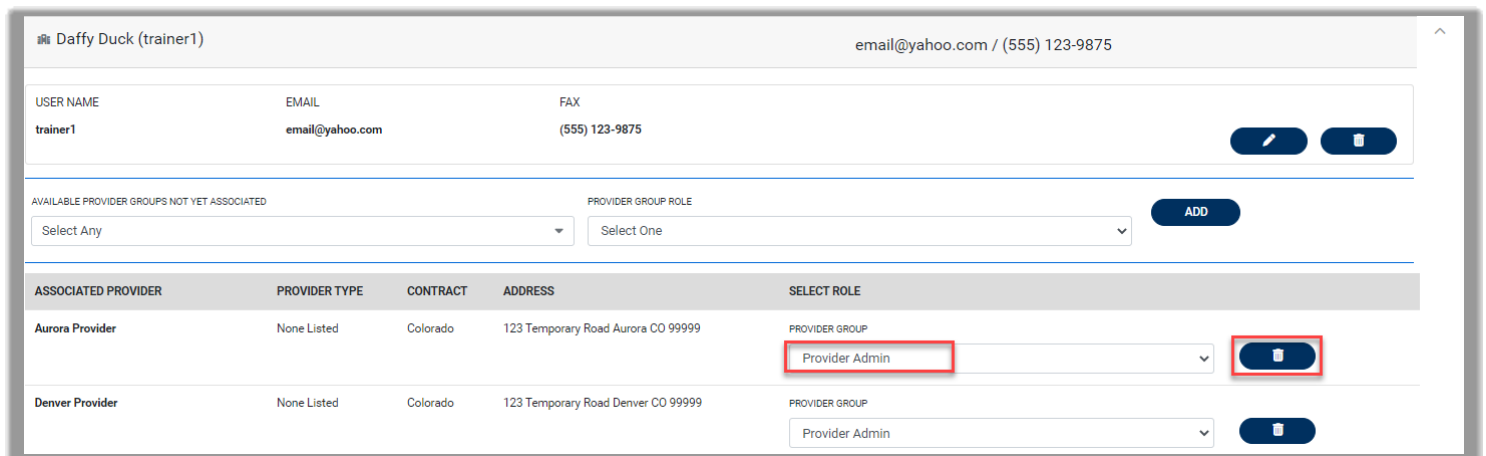


The user will receive a system generated email with a new link to complete the MFA registration process. Click **Ok** to close the pop-up window confirming the reset.

Note: This option is often used for users who do not click the link in the initial email within the 2 days prior to expiration, or for users with a non-personal email address (i.e., casemgmt@facility.com) who need to create new login credentials and complete the MFA process.

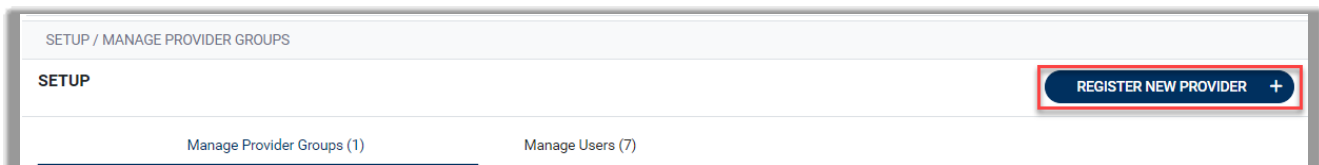


From the Manage Users tab, you can remove an associated provider from a user by clicking the trashcan icon and change their user role by selecting a new option from the Provider Group dropdown. All changes are autosaved.



Add New Provider Group

Provider Group Administrators can manage multiple facilities or locations under the same login credentials. After the original account has been created, click **Register New Provider** in the Setup menu.





Enter the NPI and Provider Registration Code. Click **Find Provider**. Select the provider to confirm and click **Select**. **Note:** Please contact the dedicated contract support center for the registration code.

The provider will then be added to the list of providers under Manage Provider Groups. To add additional users to this Provider Group, expand the desired Provider Group and follow the steps to Add New User.

Message Center

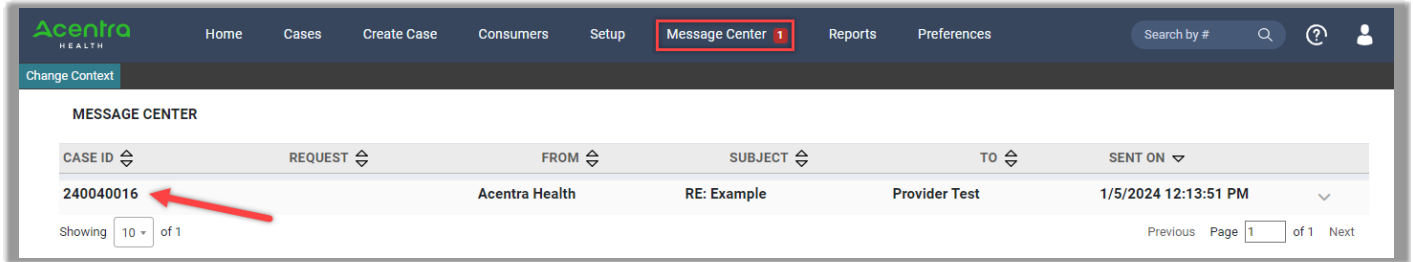
The Message Center is a central location for all new, unread messages about cases you are associated with. The number of new messages can be seen in the navigation bar at the top. In the image below, you can see 1 unread message waiting.

Click **Message Center** to view the message.

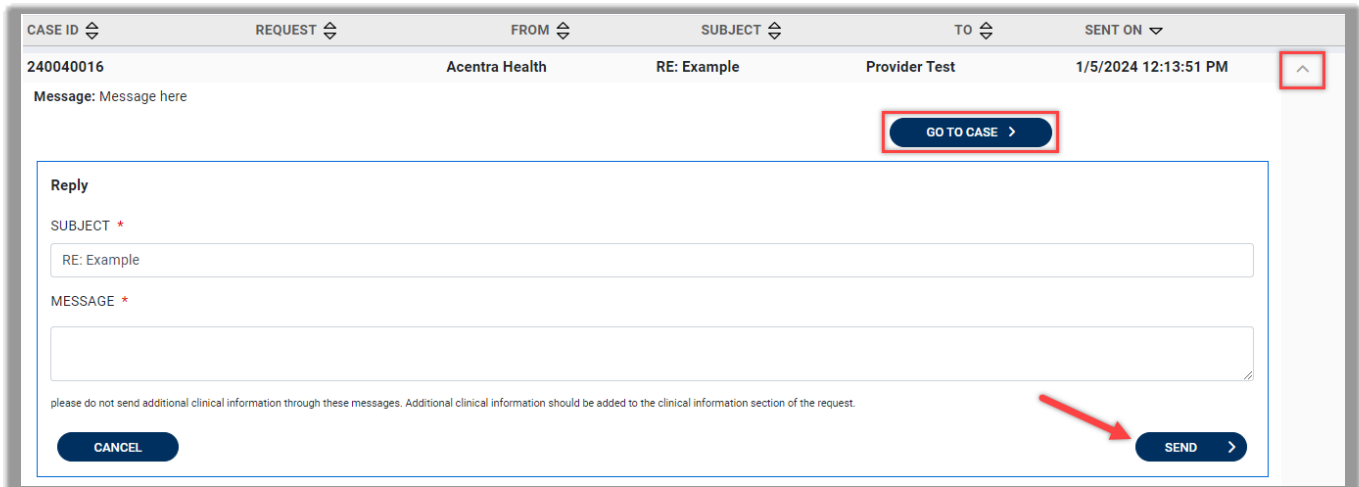


Note: To send initial messages, you must be inside a specified case, rather than in the Message Center.

The Message Center is to view and respond to messages for all cases that you are associated with.



To open/view the message, click the **caret** in the right had corner of the selected message. To view the case, click **Go to Case**. From within the Message Center, you can reply to the message by entering your message and clicking **Send**.



Troubleshooting Tips and Tricks

This section will identify a few troubleshooting tips and tricks to help make navigation of the system easier. For access and login instructions, please see the **Atrezzo User Guide – Access & Login Manual**.

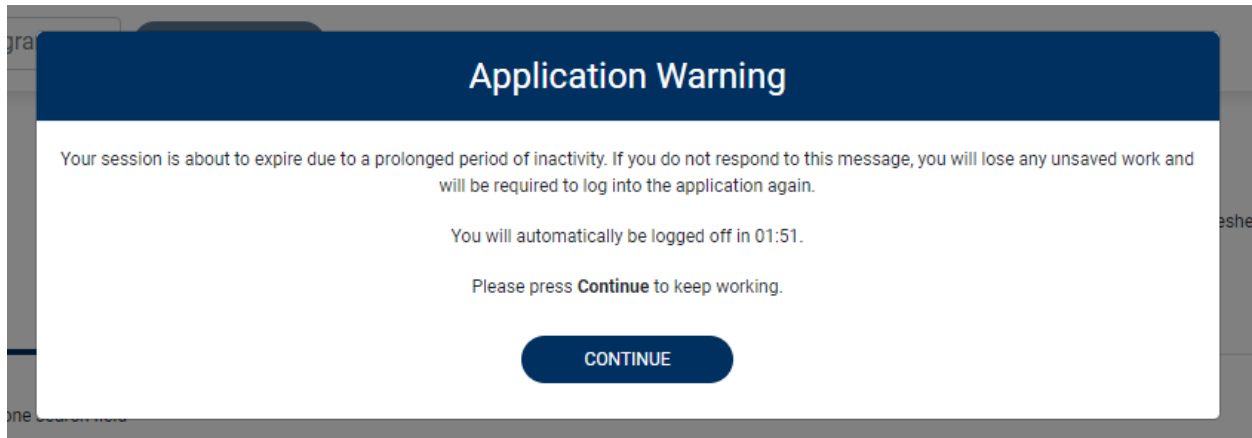
Inactivity Warning

Important Note:

After a period of time of inactivity (15 minutes), a pop up will appear with a 2-minute countdown to logging out. If you are actively working within the system, you will not receive this pop-up warning. To continue working, select **Continue**.



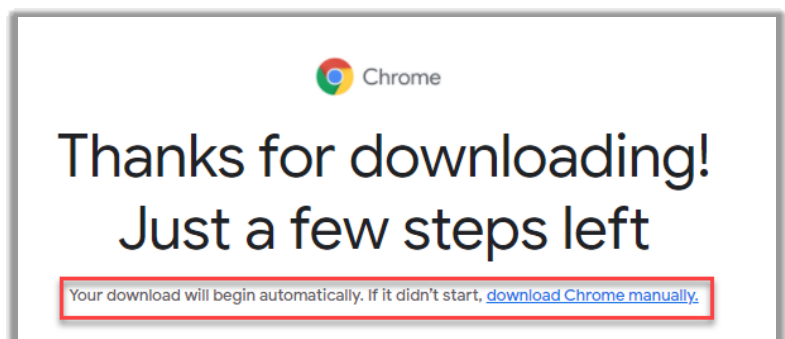
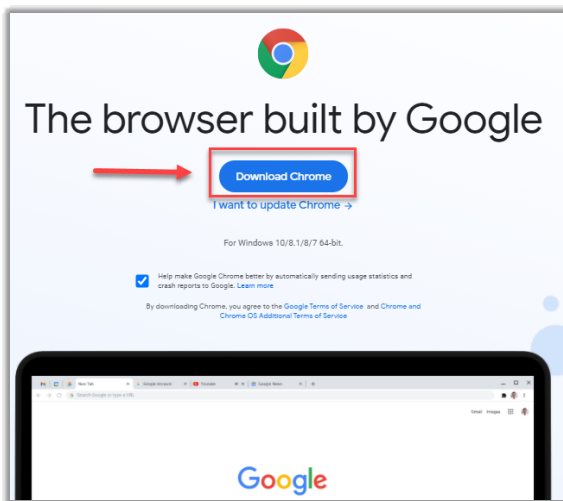
If you do not select continue before the countdown reaches 0, you will be required to log in again to continue utilizing the system. The system AutoSaves as you navigate and complete fields. Completed work will not be lost; however, any unsaved work will be lost, if the system times out due to inactivity.

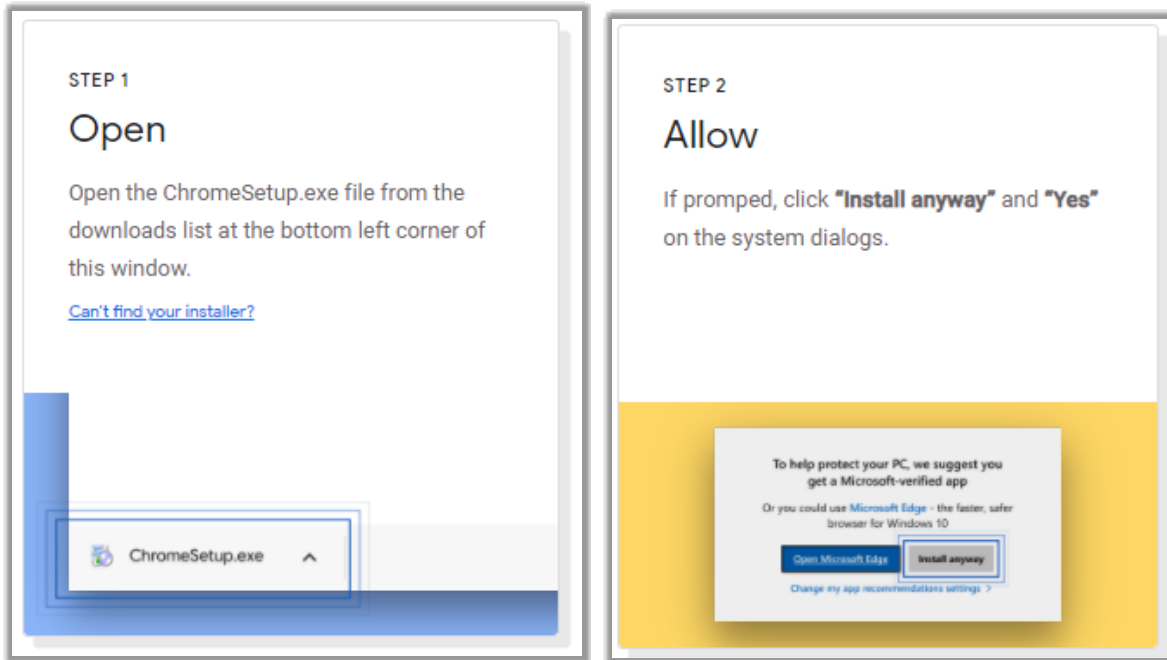


Appendices

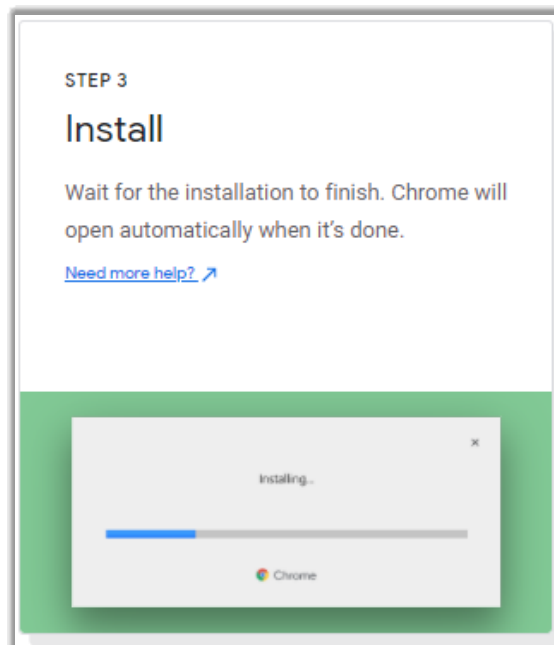
How to Add Google Chrome to Computer

A user can do a search for “Google Chrome Download” or click [Download](#) to access the available link. Once the Google Chrome Download page opens, click **Download Chrome**, then follow the prompts.





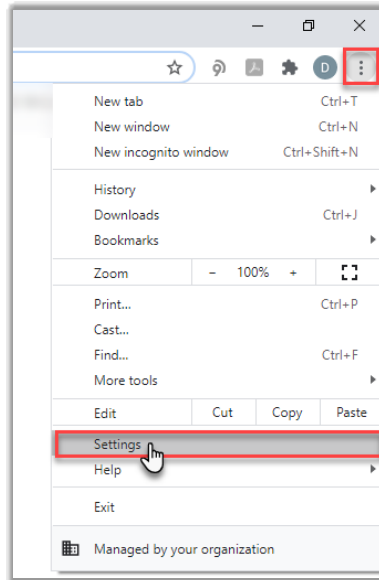
Once installed, Chrome can be set as a default browser for all applications, or you can simply create a shortcut for Atrezzo within the application.



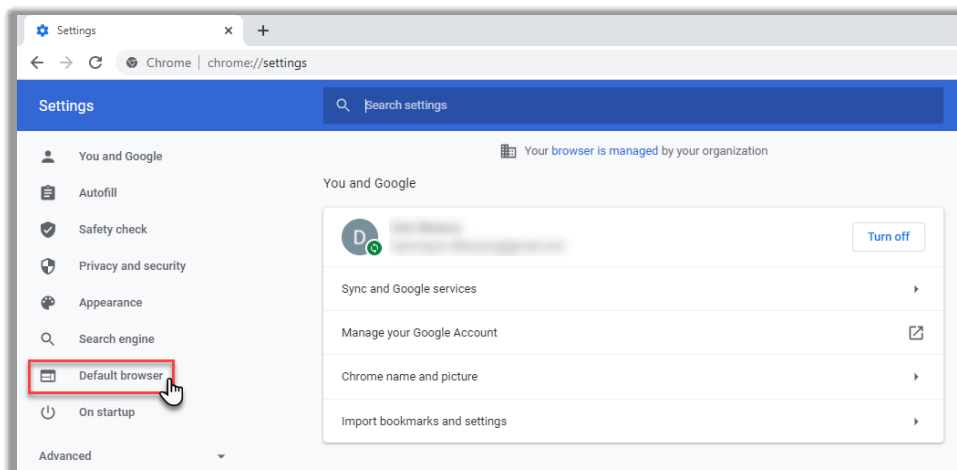


How to Set Chrome as Default Browser

To set Chrome as the default browser, click the **three dots** in the upper right-hand corner, select Settings from the drop down.

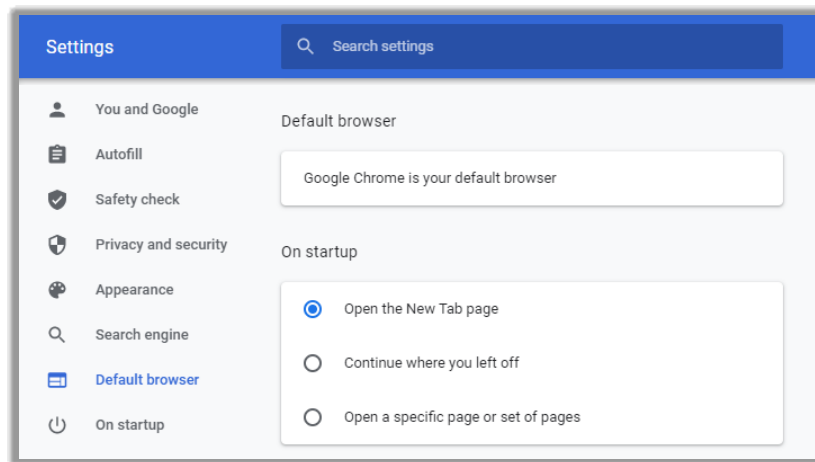


Select Default browser from the menu options on the left side of the page.



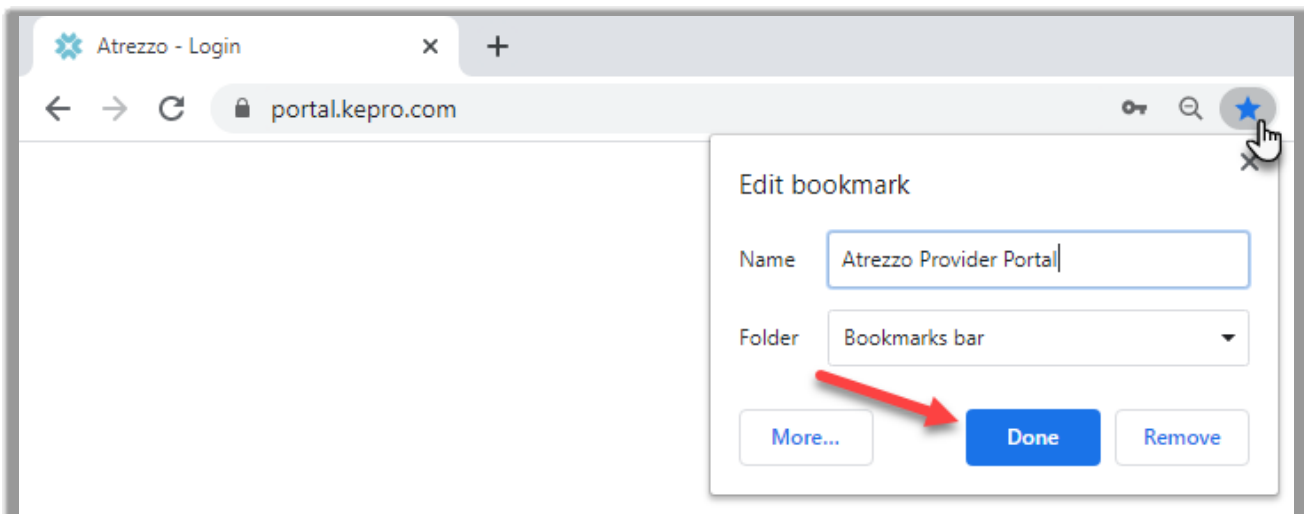


Select **Make Default** under Default browser. Once the option is selected Google Chrome is your default browser will display.



How to Set Atrezzo Bookmark in Chrome

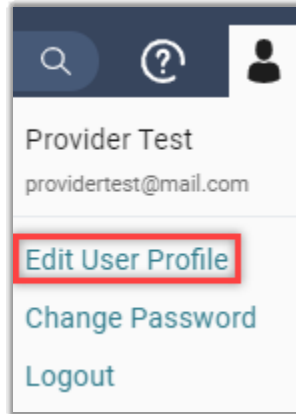
After entering the Atrezzo portal URL <https://portal.kepro.com/> into the browser and click the star in the address bar. Enter the name of the bookmark (be sure to keep the name simple so you remember it), choose a folder or add to the bookmarks bar, and click **Done**. This will set a bookmark for easy navigation and future use.





Updating User Profile

To update user profile information once an account has been created, click on the person icon in the upper right corner. Once the menu opens, click **Edit User Profile**.



Once the profile screen displays, update information and include all required fields, then click **Save**.

The image shows the "Edit User Profile" form. The form is titled "Edit User Profile" and has two columns of fields. The left column is labeled "UserName" and the right column is labeled "Provider One". The fields are:

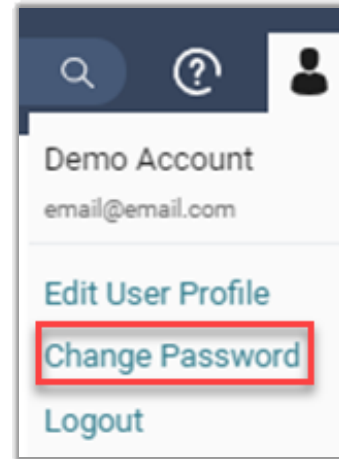
- FIRST NAME * (red box around "Provider")
- LAST NAME * (red box around "One")
- EMAIL ADDRESS * (red box around "testemail@email.com")
- CONFIRM EMAIL ADDRESS * (red box around "testemail@email.com")
- ADDRESS 1
- ADDRESS 2
- CITY
- STATE (dropdown menu, currently "Alaska")
- ZIP
- PHONE NUMBER (111-111-1111)
- PHONE EXTENSION
- FAX NUMBER (555-123-9876)

Below the fields, there is a note: "Providers in receipt of Faxed determination letters: Official communication of service authorization will be sent to the fax number entered below." At the bottom right, there are two buttons: "CANCEL" and "SAVE >". A red arrow points to the "SAVE >" button.

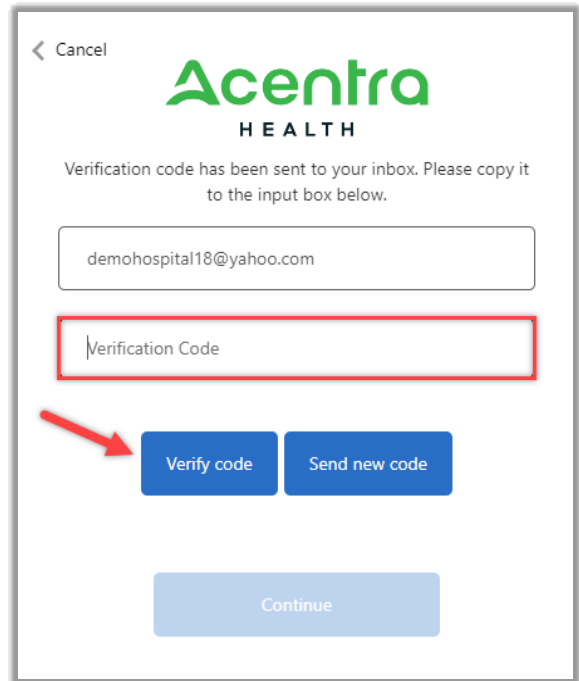


Change Password

To change your password, click the person icon in the upper right corner, then select **Change Password**.



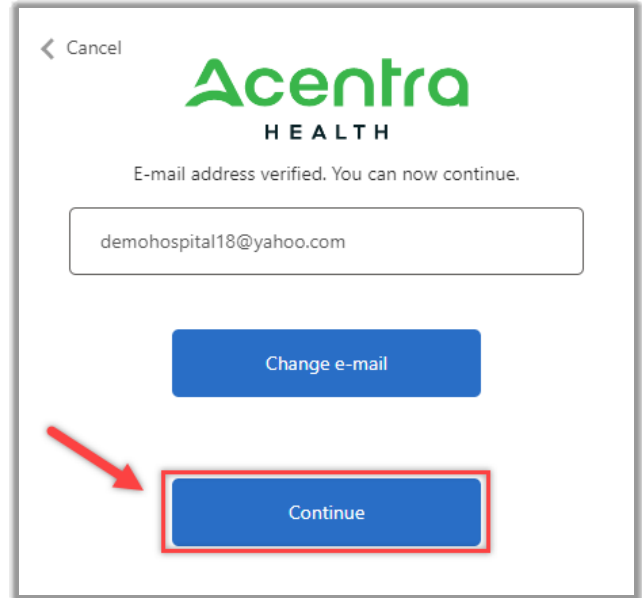
Enter the email address associated with your Acentra account and click **Send Verification Code**.



Enter the code from the system generated email and click **Verify Code**.

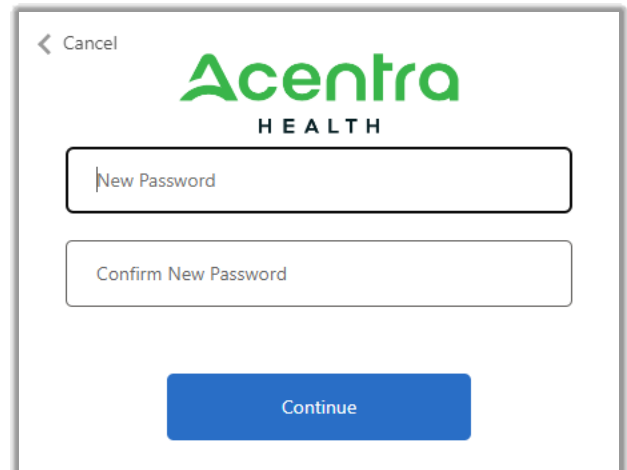


Once your email address is verified click **Continue** to change password.



Enter your new password, confirm the new password, and then click **Continue**.

The system will refresh, and you'll be taken to the home screen.



Informational Error/Warning Messages

This section will identify the different types of informational and error/warning messages that a user may see while using this platform.

Informational Message	Explanation
Servicing Provider Type Not Allowed for Service Type	This message displays when the servicing provider does not match with the requested service type. The servicing provider must be corrected to be a provider that can bill for the requested service type.
Member Ineligible	This message will display when the member does not have active coverage for the requested timeframe.
Requesting Provider Not Allowed	This message displays when the requesting provider does not match with the requested service type or is not appropriate for the service being requested.



Duplication of Services	This message will display when there is a current request for the same services within the same timeframe. You will need to return to the consumer search and locate the submitted/completed request.
Missing Information	The case cannot be submitted until all required information is submitted. Review specific fields with missing information, then click Submit.
Auth Not Required	This message will populate when one or more procedure codes do not require prior authorization.

How to Access Technical Assistance

For technical assistance, please reach out to your dedicated support team for assistance. If uncertain of the contact information, [Atrezzo Help Contact Us](#) will provide available Support Center information.