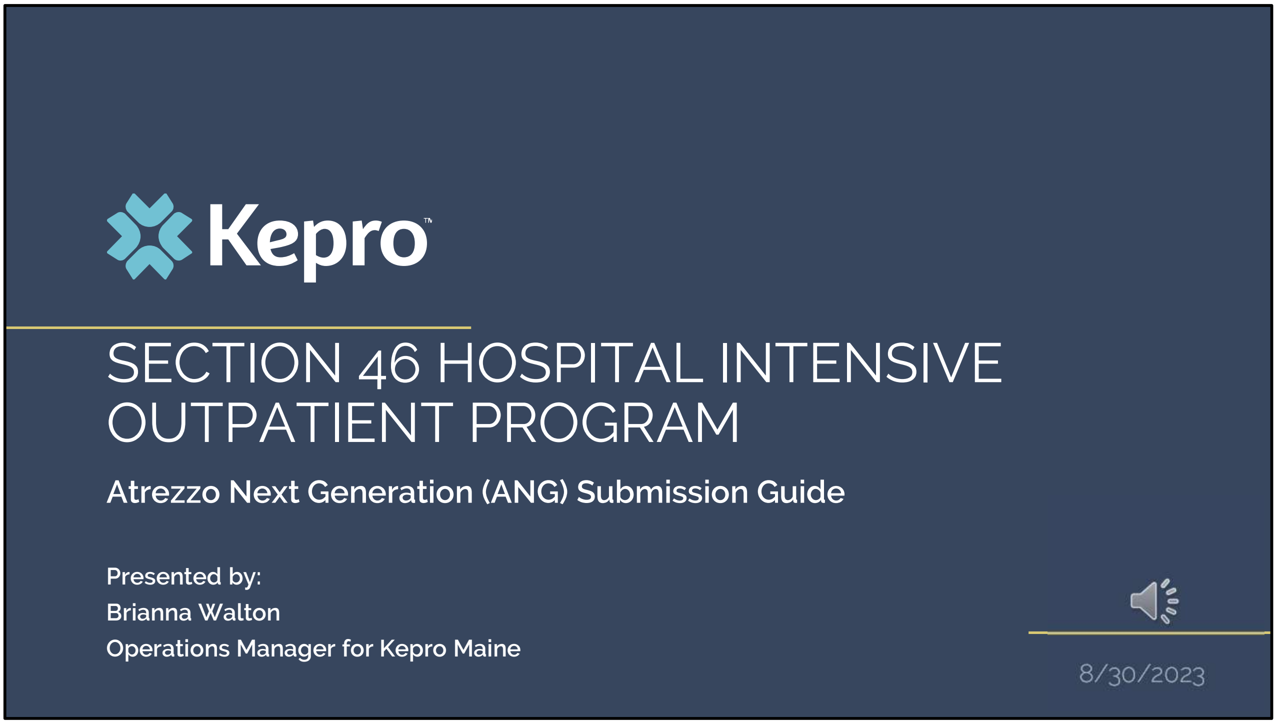
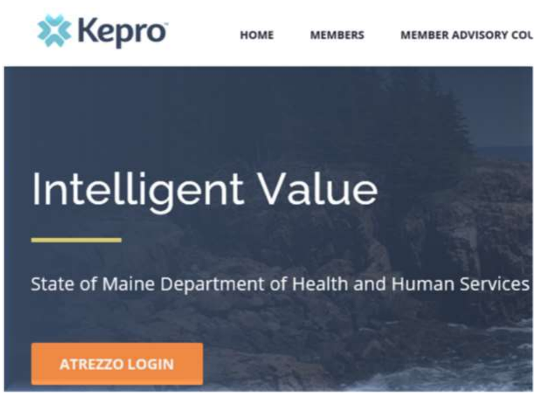


Hello and Welcome to the Kepro Section 46 Hospital Intensive Outpatient Program training guide. This video has been created to provide general guidance for Providers on how to submit an IOP request in Atrezzo.

The guidance presented in this presentation is meant to give providers a basic understanding of the submission process in Atrezzo.

We will start with a basic overview of submitting a Section 46 IOP request in Atrezzo.

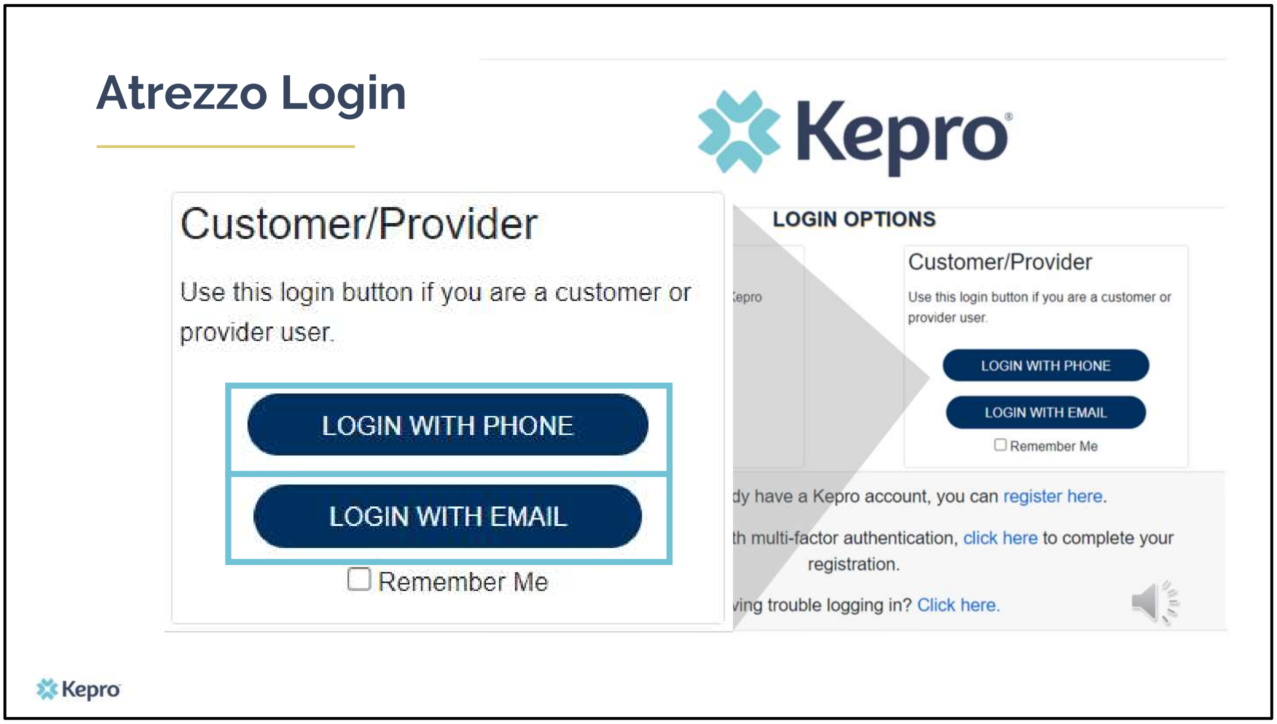
Accessing Atrezzo



Visit www.qualitycareforme.com to access the Atrezzo portal

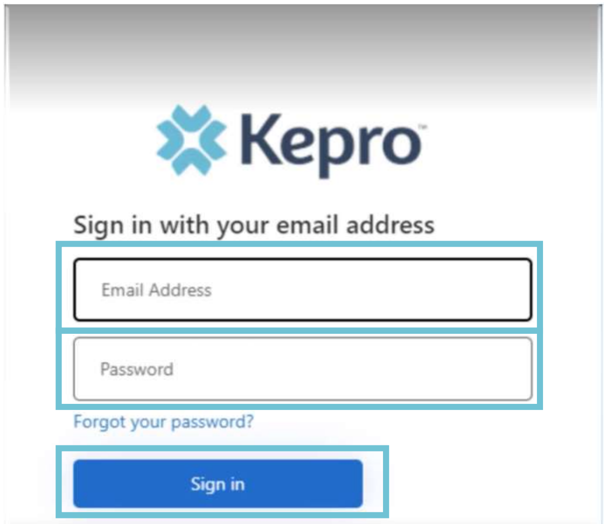
Kepro

To access the Atrezzo portal, go to our informational website; www.qualitycareforme.com and click on the Atrezzo login button

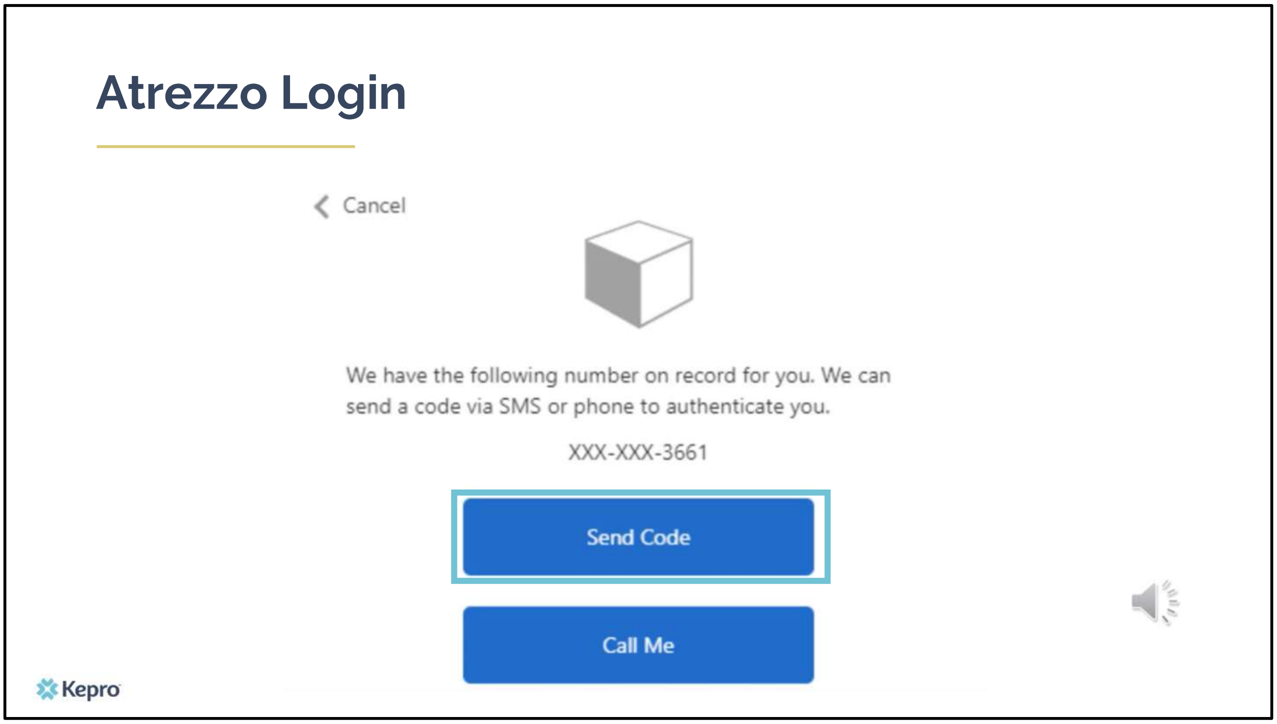


When you arrive to the login screen, you will use the Customer/Provider login. Here you will choose Login with Phone or Login with email depending on how your registered for the mutli-factor authentication. Please note, if you chose to register with phone and you do not currently have your phone you can still login with email. If you click remember me, the system will remember your login for four hours. Please do not use the remember me feature on a shared device. In this demonstration, we will click Login with phone because that is how we registered our multi-factor authentication.

Atrezzo Login



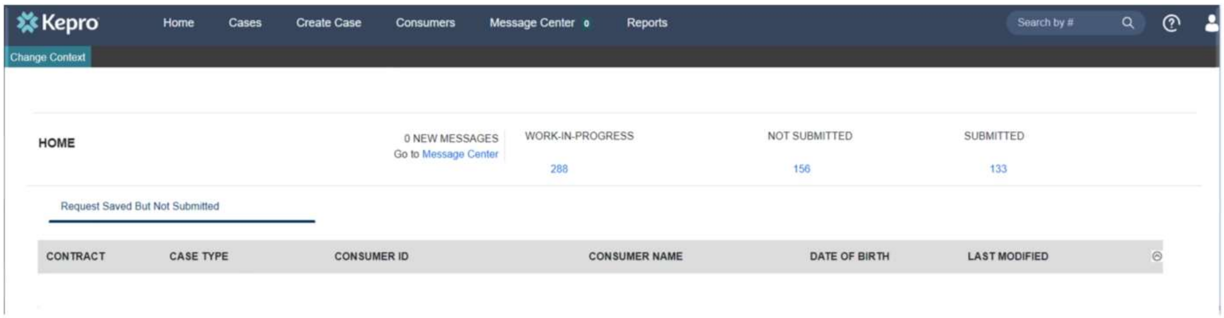
To sign in, you will enter your email and password then click Sign in.



Next, you will choose how you want to receive your verification code. You can click send code or call me. Send code will send a SMS text to your cell phone with your verification code. Call me will prompt a phone call to your phone where you will press a specific digit. In this example, we will chose send code.

Enter in your verification code.

Atrezzo Login



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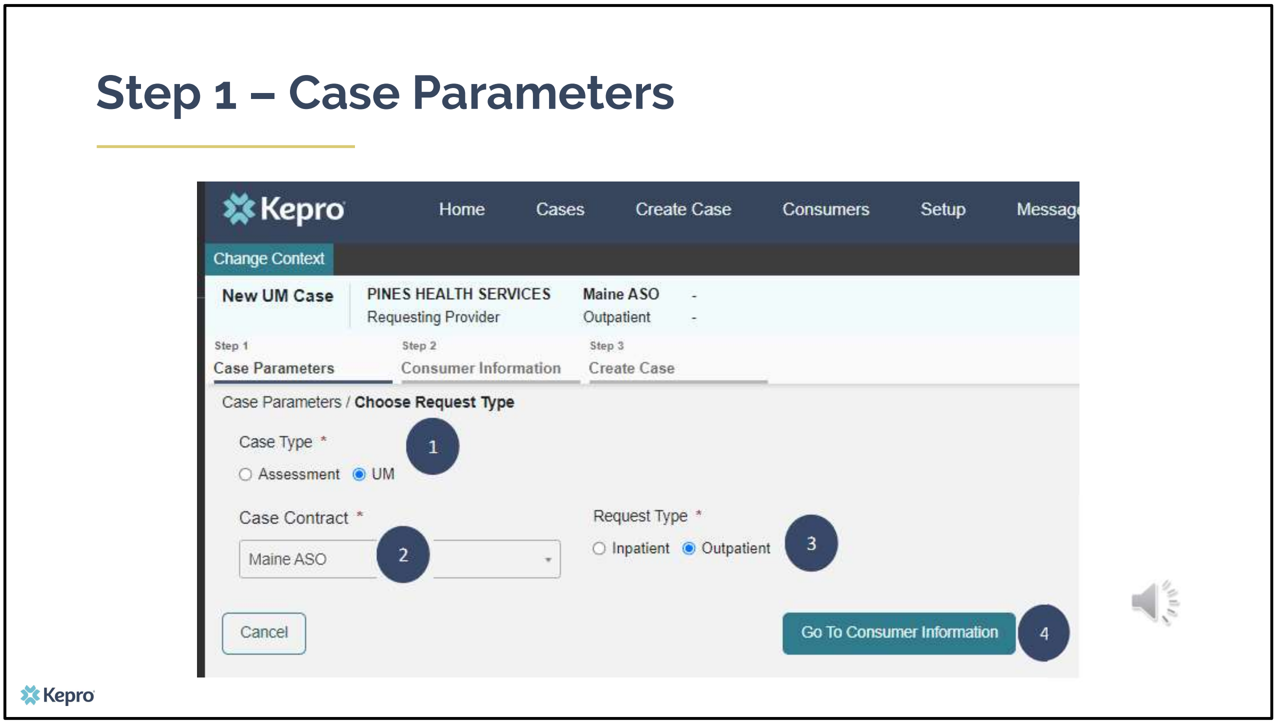
The system will automatically verify your account and you will be logged into the home screen.

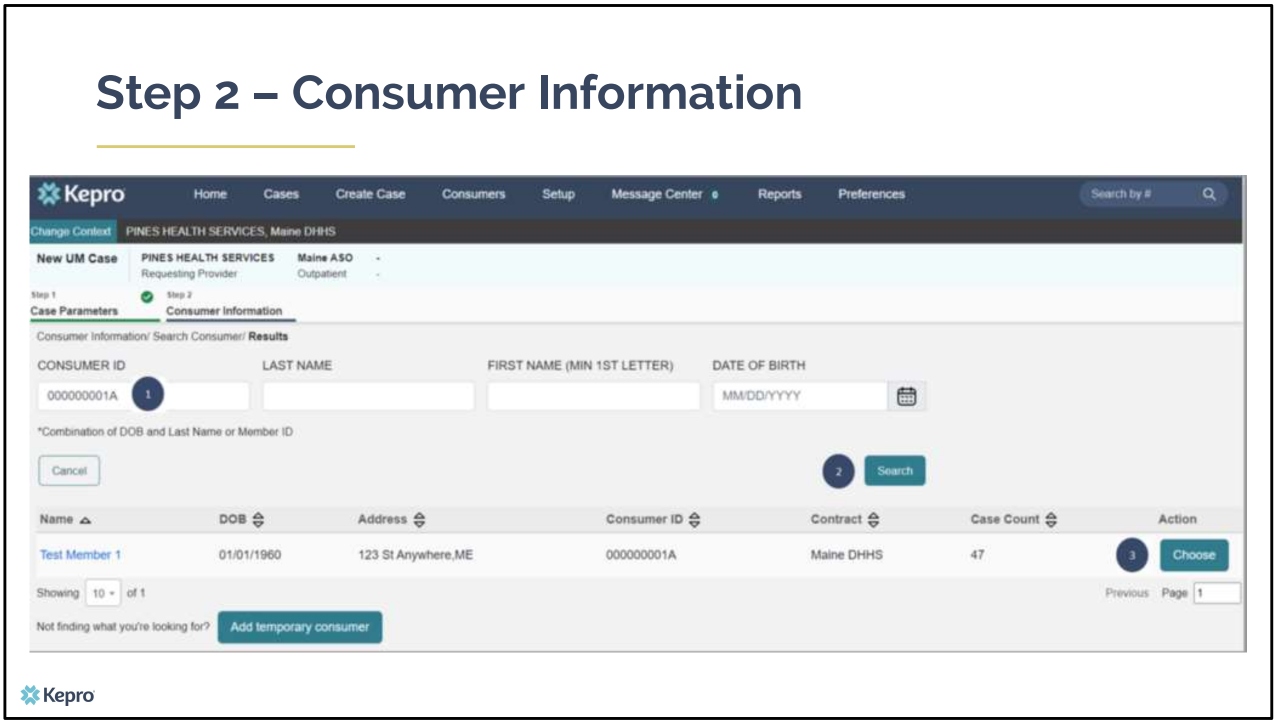
Creating the Request

To create a new case, click create case.



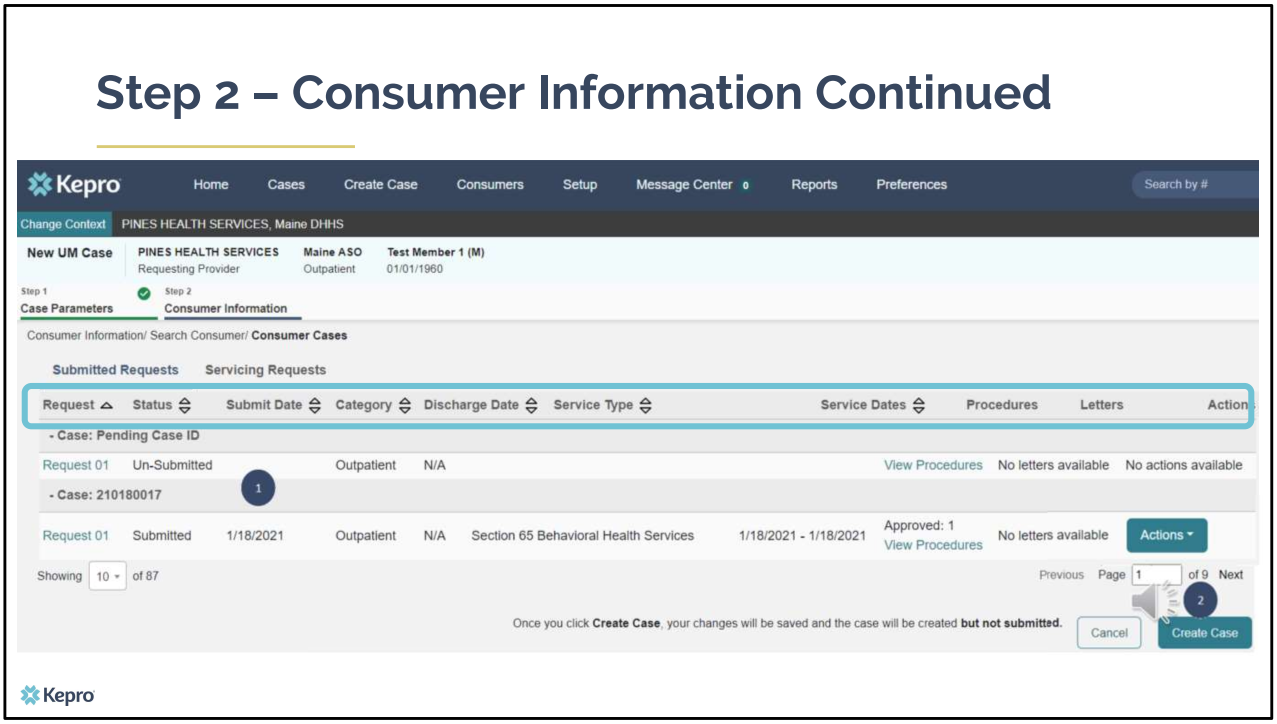
Step 1 – Case Parameters:

1. Select UM for **Case Type**
2. Select Maine ASO for **Case Contract**
3. Select Outpatient for the **Request Type**
4. Click **Go to Consumer Information.** Note: Go to Consumer will remain grayed out until all required fields are completed.



Step 2 – Consumer Information

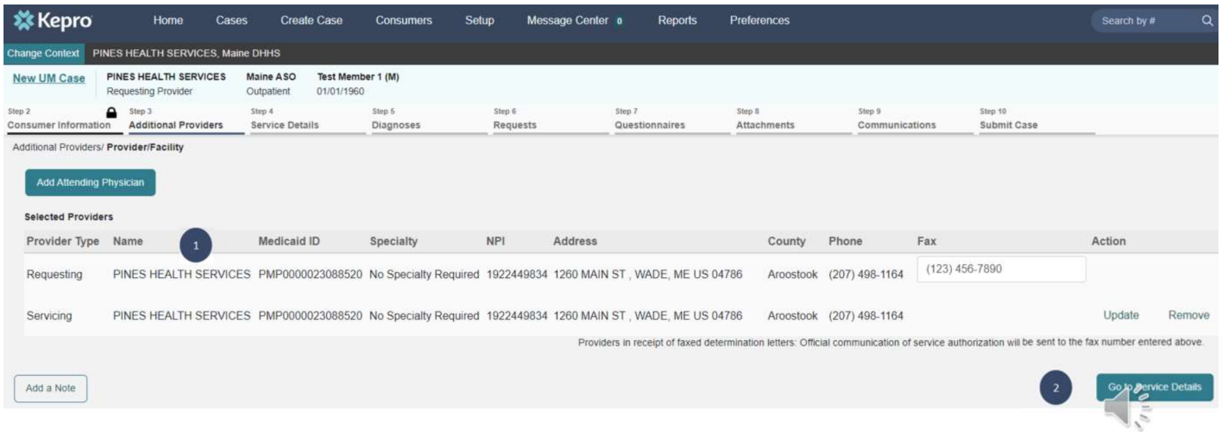
1. In the **Consumer ID** box enter the Member's MaineCare number. You may also search for the Member by using their last name and Date of Birth.
2. Click **Search.**
3. Review the search results. If the correct member match is found, click **Choose.**



Step 2 – Consumer Information Continued

1. Once you have chosen the member, if they have had any other cases submitted previously by your organization, those cases will display. Each column can be filtered by clicking on the header. The columns can be sorted by chronological order or by alphabetical order. A second click will reverse the order.
2. To create a new case, scroll to the bottom and select **Create Case.**

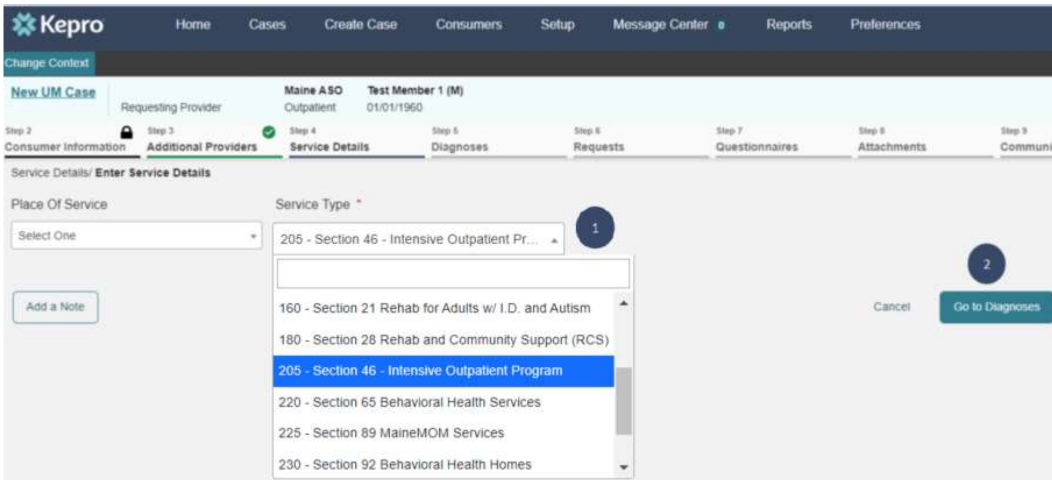
Step 3 – Additional Providers



Step 3 – Additional Providers

1. The Requesting and Servicing providers will automatically be indicated based on the NPI number your login is associated with.
2. Click on Go to Service Details

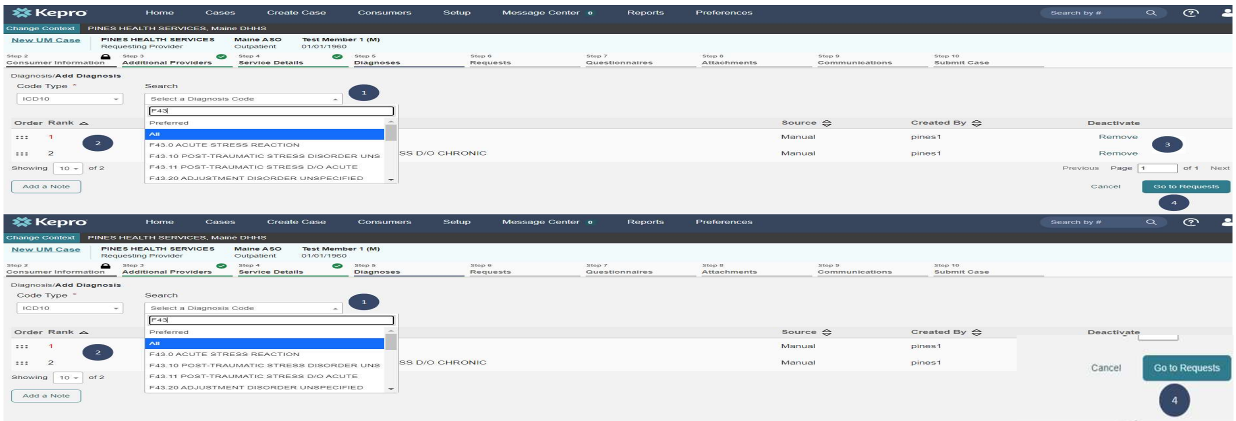
Step 4 – Service Details



Step 4 – Service Details

1. In the service details section, select Section 46 – Intensive Outpatient Program from the Service Type drop down. The place of service field is not required.
2. Click on Go to Diagnosis

Step 5 – Diagnosis



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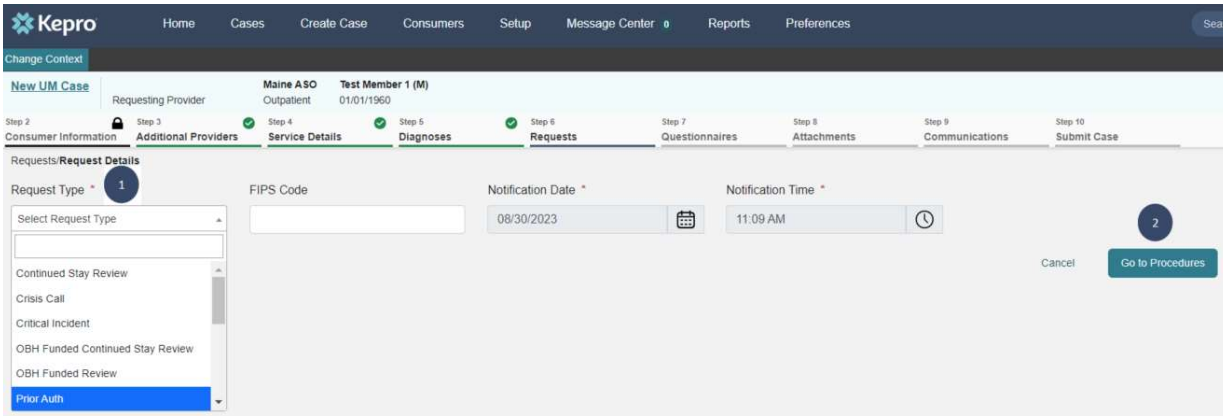
In Step 5 – Diagnosis:
The Atrezzo system will require you to enter in at least one diagnosis code.

1. In the Diagnosis **Search** box, start typing in either the diagnosis code or the description of the code. You will need to enter in at least three characters for the search feature to start finding results. Once you have found the diagnosis code, click on it to automatically add it to your request. Repeat the same search process for each additional diagnosis code.
2. If you have added more than one diagnosis code, you can rearrange the order of how the diagnosis codes appear by clicking on the diagnosis line and dragging it up or down in the list.
3. If you have added a diagnosis code in error, you may remove it by clicking on the **Remove** link. Please note: Once your request has been submitted, you will not be able to remove the diagnosis code.
4. When you have finished added the diagnosis code(s), click on **Go to Requests**

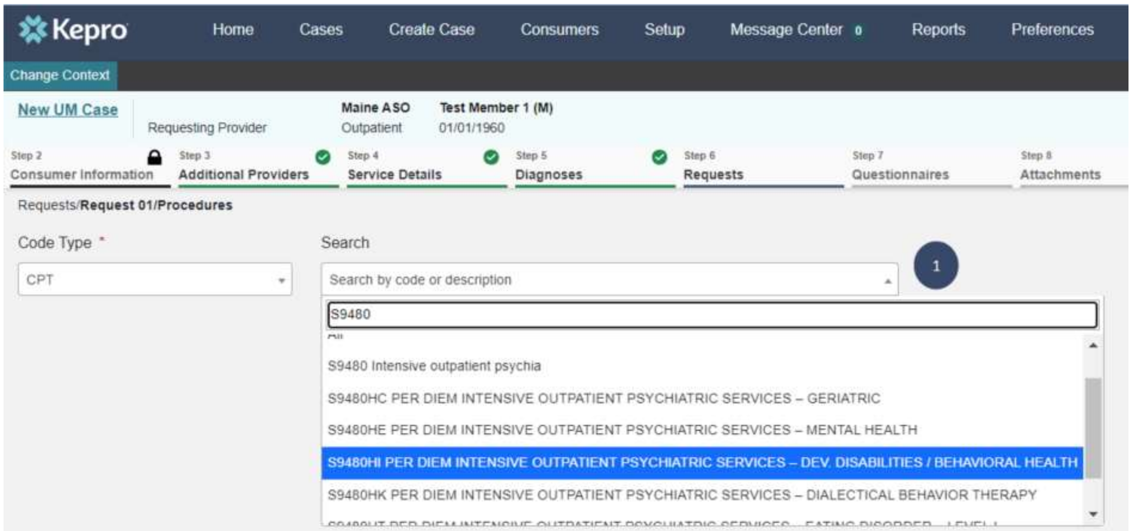
Step 6 – Requests



Step 6 – Requests:

1. In the **Request Type** box, select Prior Auth
2. Click **Go to Procedures**

Step 6 – Requests Continued



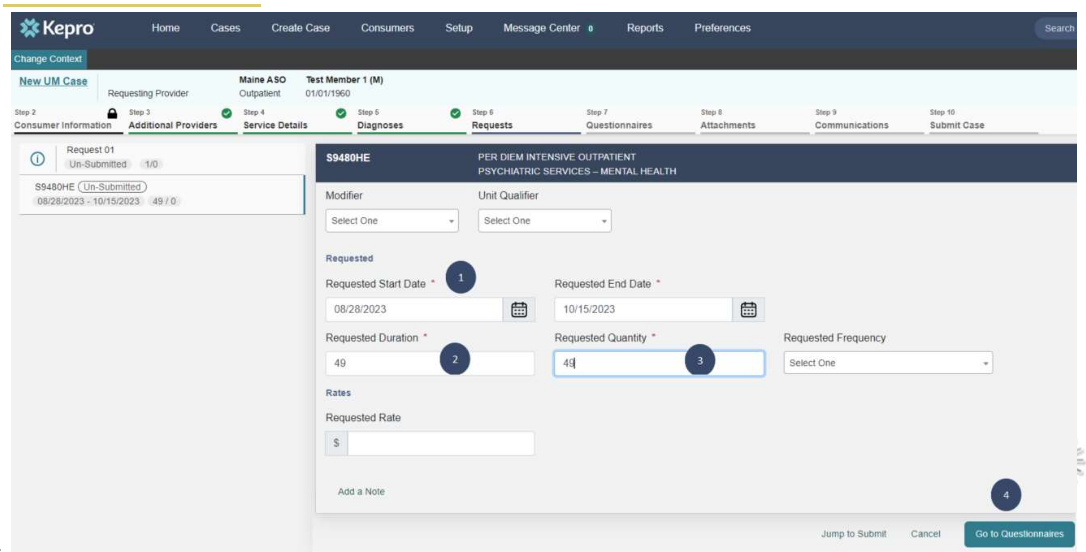
Step 6 – Requests Continued:

1. In the search box, start typing in the procedure code for the service you are requesting. You will need to enter in at least three characters for the search feature to start finding results. Once you've found your code, click on it to add it to the case.

The IOP Codes available for submission are as follows:

- S9480 – Per Diem Substance Use (shown as Intensive Outpatient Psychiatric in Atrezzo)
- S9480HE – Per Diem Mental Health
- S9480HI – Per Diem Developmental Disabilities/Behavioral Health
- S9480HC – Per Diem Geriatric
- S9480HK – Per Diem Dialectical Behavior Therapy
- S9480HT – Per Diem Eating Disorder

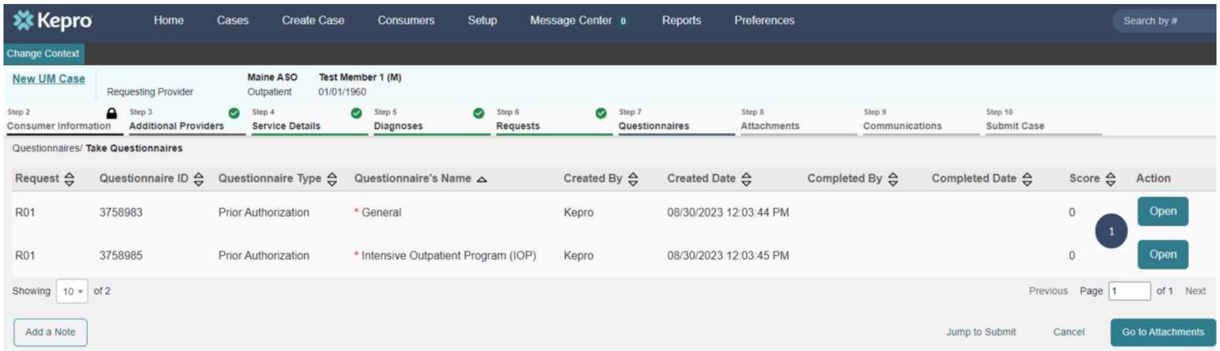
Step 6 – Requests Continued



Step 6 – Requests Continued:

1. In the **Requested Start Date** box, enter the date you need the request to start. Please note, cases can only be backdated 5 calendar days from your submit date, however you can enter in requests up to 10 calendar days in advance of the start date.
2. In the **Requested Duration** box, enter in 49. This will automatically populate the end date.
3. In the **Requested Quantity** box, enter in the total amount of units needed for this request.
4. When you have finished adding the procedure code information, click on **Go to Questionnaires** to navigate to the next step.

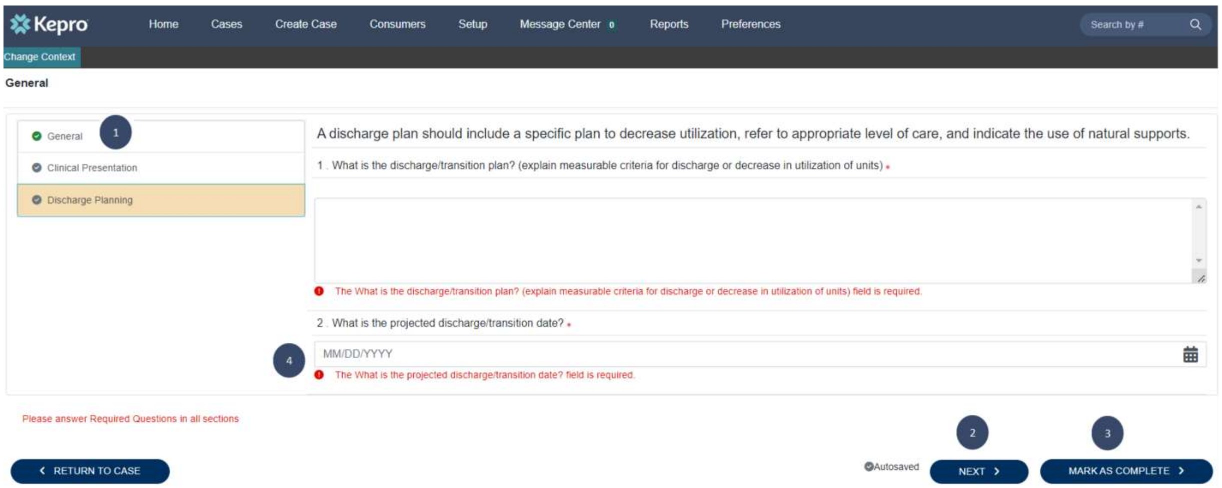
Step 7 – Questionnaires



Step 7 – Questionnaires:

1. Click on **Open** on the first questionnaire to begin completing it.

Step 7 – Questionnaires Continued



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Step 7 – Questionnaires:

1. The questionnaire will open in a separate window. Begin by answering the first question. As you respond to a question, additional questions may cascade for you to complete. When you have finished filling out the questionnaire, you will see a green check mark next to each completed section. Gray check marks indicate the section has not yet been completed.

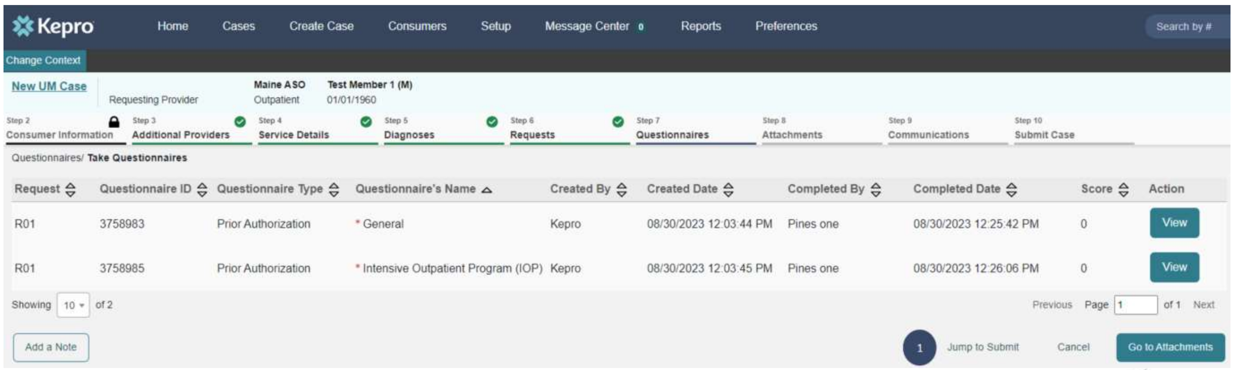
2. To navigate to the next section of the questionnaire, click on next.

3. All questions of the questionnaire need to be filled out. When you have finished answering the questions, click on **Mark As Complete.** If you have filled out all questions and no errors have been detected, the system will return you back to the case. Then complete the next questionnaire following these same steps.

4. If you have missed a question, or an error is detected, it will show up in red. You will not be able to mark the questionnaire as complete until you have

addressed the error.

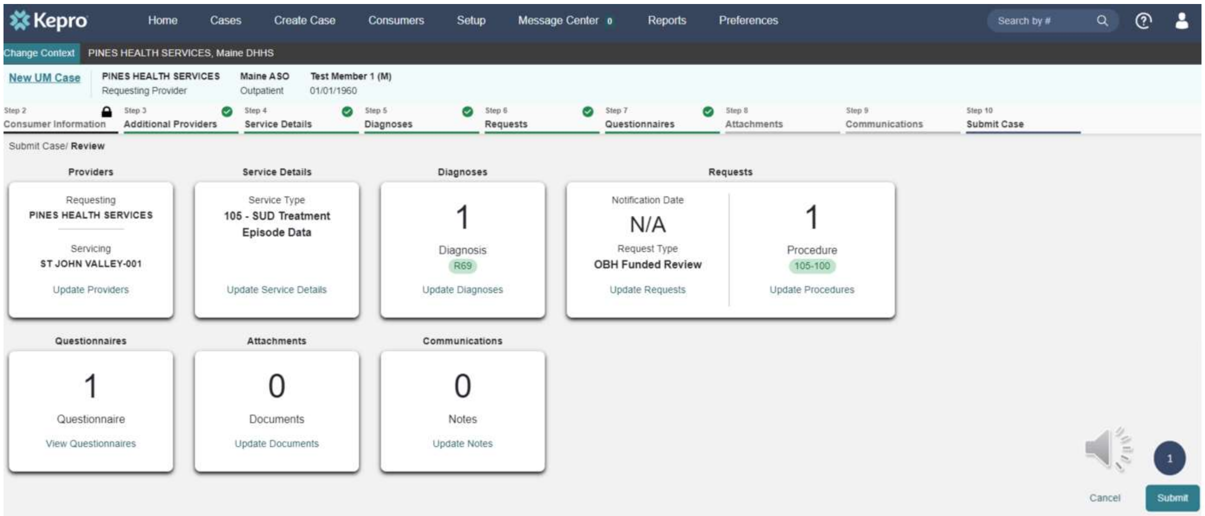
Step 7 – Questionnaires Continued



Step 7 – Questionnaires Continued:

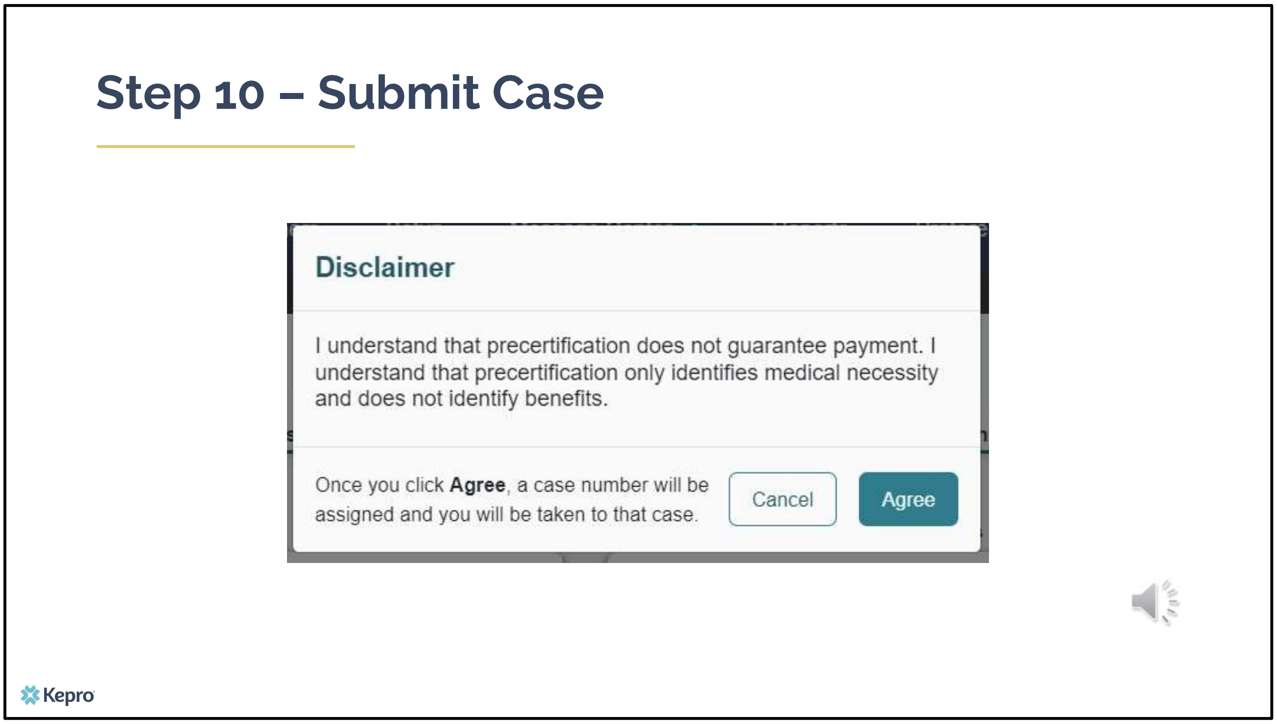
1. Once you have marked both questionnaires as complete, you are ready to submit. Click on the **Jump to Submit** link.

Step 10 – Submit Case



In Step 10 – Submit Case:

1. Once you have completed the request, the information you input will be displayed as tiles. If you need to update information prior to submitting, you can click on the tile to navigate back to that section of the request or click on the step. Click on **Submit.**

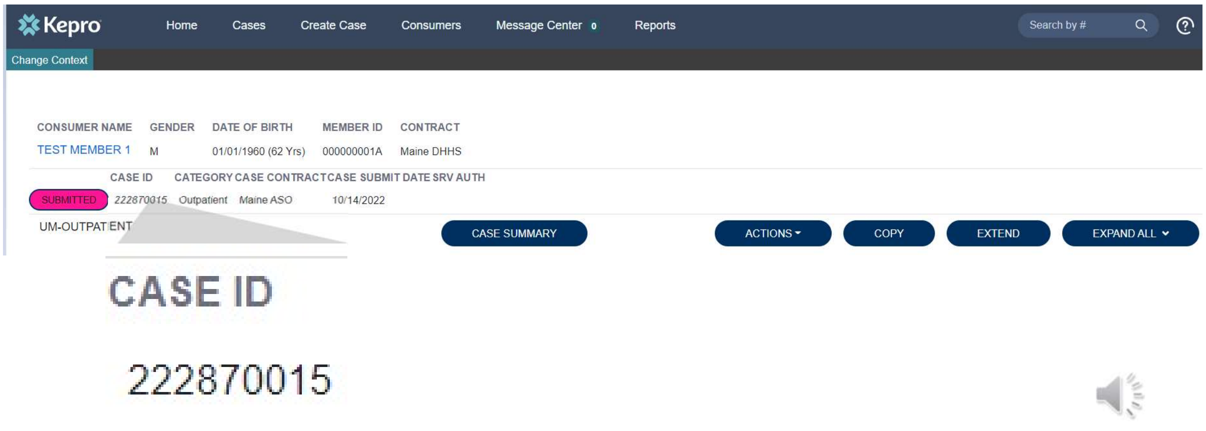


In Step 10 – Submit Case:

1. Once you click submit a Disclaimer popup will appear indicating that precertification does not guarantee payment and precertification only identifies medical necessity and does not identify benefits. Click on **Agree.**

2. If there are no errors, you case will submit and you will receive a case ID number. If there are errors, you will receive a message indicating what the errors are that need to be addressed before the case can be submitted.

Submitting the Request



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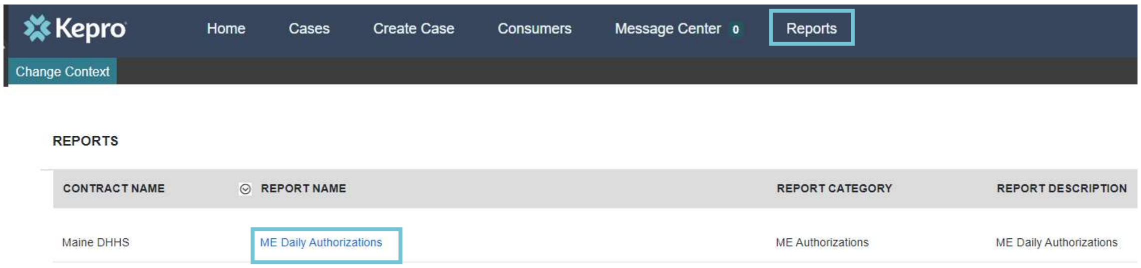
Once the case has been submitted it will bring you to the request overview page. This will be a receipt of all information provided in the request. It is important to document the Case ID to reference this request at a later time

Please note: You will also be able to search and find the consumer by other identifying information like Name, DOB, etc. If calling Kepro regarding the request, two pieces of identifying information will be required to confirm the member’s identity. For example, a Case ID and member’s name.

In part two, we will review how to access your daily authorization report.

Daily Authorization Report



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The Daily Authorization Report is the primary way Kepro communicates to providers regarding the status of a case. In the Atrezzo portal, users who have been setup as a Group Admin + Reports or Admin +Reports User will have a Reports tab. Within the reports tab, you will find the Daily Authorization Report

Checking The Daily Auth Report

Kepro

Daily Authorization Report:
Requests submitted or certified or had a status change between 10/29/2020 and 11/27/2020
Total records: 1

Request ID	KEPRO Case ID	Submit Date	Member First	Member Last	Service Start Date	Service End Date	No Of Days	Approved Units	Status	Request Notes
0	203030019	10/29/2020	Jon	Doe	10/29/2020	11/27/2020	30	1	Approved - Authorized	

Kepro

In your daily authorization report, select the date range you want to search by. Then select the request types you want to search by and click view report. Once the report runs, any cases that have been entered in Atrezzo under your agency's NPI number will display. The report will provide you with a Kepro Case ID, start date, authorization number, status and notes section which will show any notes that have been added to the case.

Questions?

Toll-Free Phone: (866) 521-0027

Option 1 – Member Services
Option 2 – Katie Beckett
Option 3 – Provider Relations
Option 4 – Care Management
Option 5 – Appeals

Email: ProviderRelationsME@Kepro.com

www.qualitycareforme.com

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Thank you for joining the Kepro Section 46 Hospital IOP Training. If you have further questions or need assistance, please call us at 866-521-0027. For technical assistance, please press Option 3 to reach a member of our Provider Relations Team. You can also reach a member of our Provider Relations Team via email at ProviderRelaitonsME@Kepro.com. Our hours of operation are Monday thru Friday 8am to 6pm.