Atrezzo®
User Guide
Provider Portal

Colorado Utilization Management (UM) & Physician Administered Drug (PAD)[1]

[1]The Department of Health Care Policy & Financing administers Health First Colorado (Colorado's Medicaid program), Child Health Plan *Plus* (CHP+) and other health care programs for Coloradans who qualify.

Contents

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The purpose of this user guide is to provide an overview of the Provider Portal for Atrezzo, the Kepro proprietary system. Atrezzo is a person-centered, web-based care management solution that transforms traditional, episodic-based care management into proactive and collaborative population healthcare management.

Atrezzo is a web-based system that works across numerous internet browsers; however, **Chrome is preferred** and system functionality is enhanced with this platform.

Kepro utilizes Multi-Factor Authentication to keep all information within the Provider Portal protected.

Multi-Factor Authentication (MFA) Summary

Single-Factor authentication (username/password) is not sufficiently secure when handling sensitive Personal Health Information or Personally Identifiable Information. Multi-Factor authentication is required to properly secure access to sensitive information.

What is MFA?

Multi-Factor authentication (MFA) is an authentication method that requires users to verify identity using multiple independent methods. Instead of just asking for a username and password, MFA implements additional credentials like a pin sent via email or text, or a verification call made to a pre-registered phone number.

How Multi-Factor Authentication Works

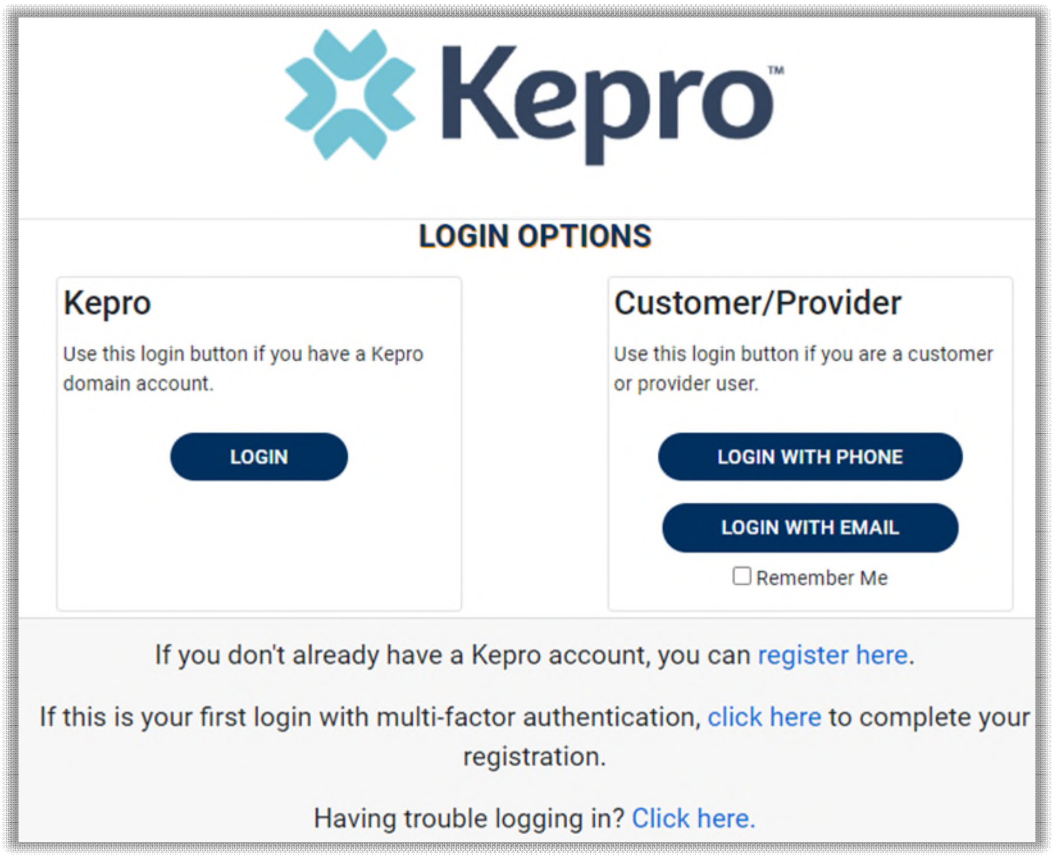
The goal of MFA is to provide a multi-layered defense system. This helps ensure that the users who access your system are who they say they are. Even if one factor is compromised, there are still more barriers to breach.

For example, to log in to a secure program, a user would need to type a password and enter another number from a text, phone call or email. Only the correct password combined with the correct number from the additional authentication factor would give a user access.

Provider Login

Customer and provider users are any users who do not have a Kepro account or kepro.com email address. These users should use the login button under the Customer/Provider heading on the right-hand side of the login page.

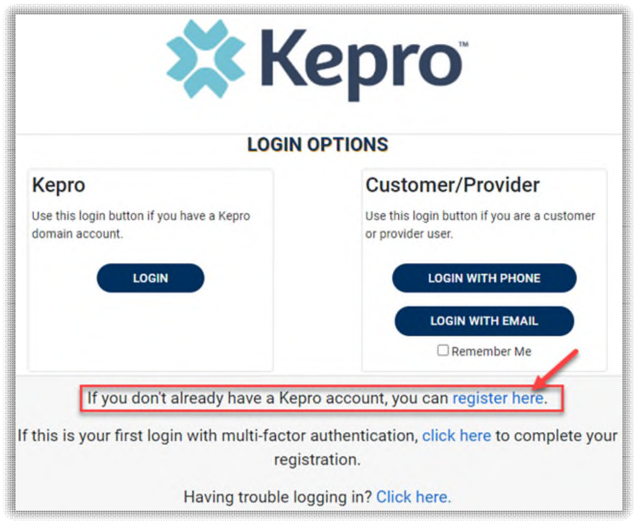
After entering the Atrezzo Provider Portal URL (https://portal.kepro.com/), the login page will display.



New Provider Registration & MFA Registration

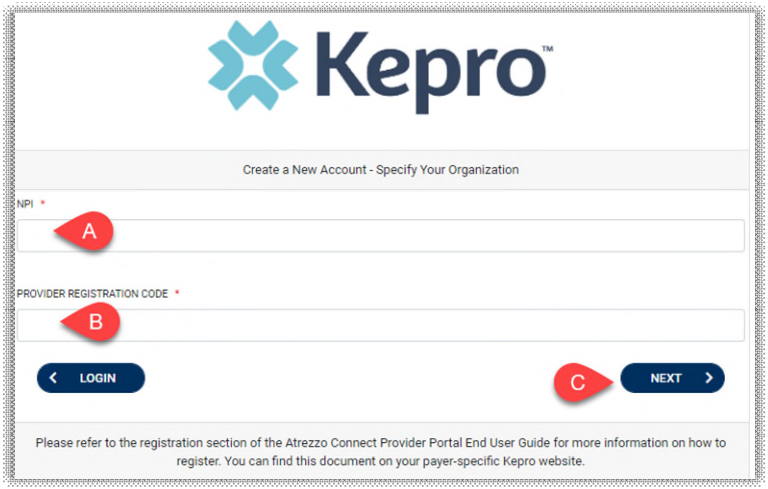
Use these instructions if you are a new provider and need to register for a Kepro account. The below instructions will guide you through registering for the Atrezzo Provider Portal and completing the Multi-Factor Authentication (MFA) Registration. Both registration and MFA registration are a one-time process.

From the login screen, click the link to register for a Kepro Account.

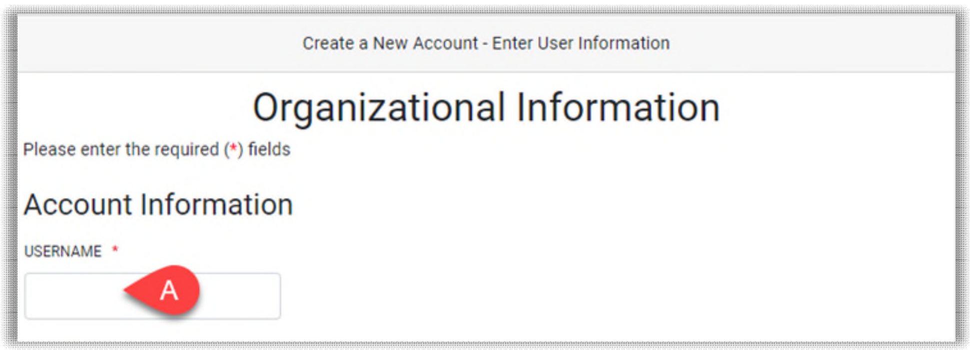


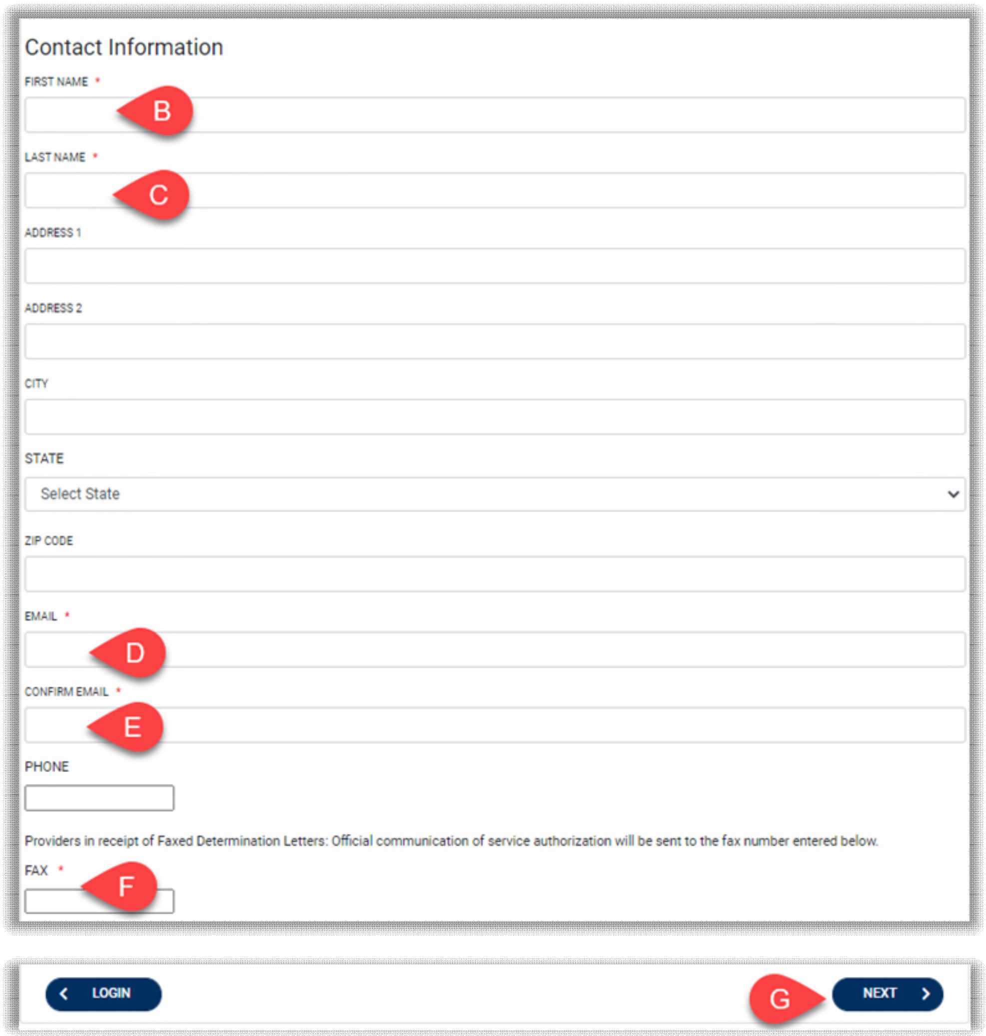
Enter your facility NPI in the NPI box and use your Medicaid ID as the Registration Code, then click Next.

NOTE: If you do not have an NPI, use the Medicaid ID in both NPI and Registration Code fields.

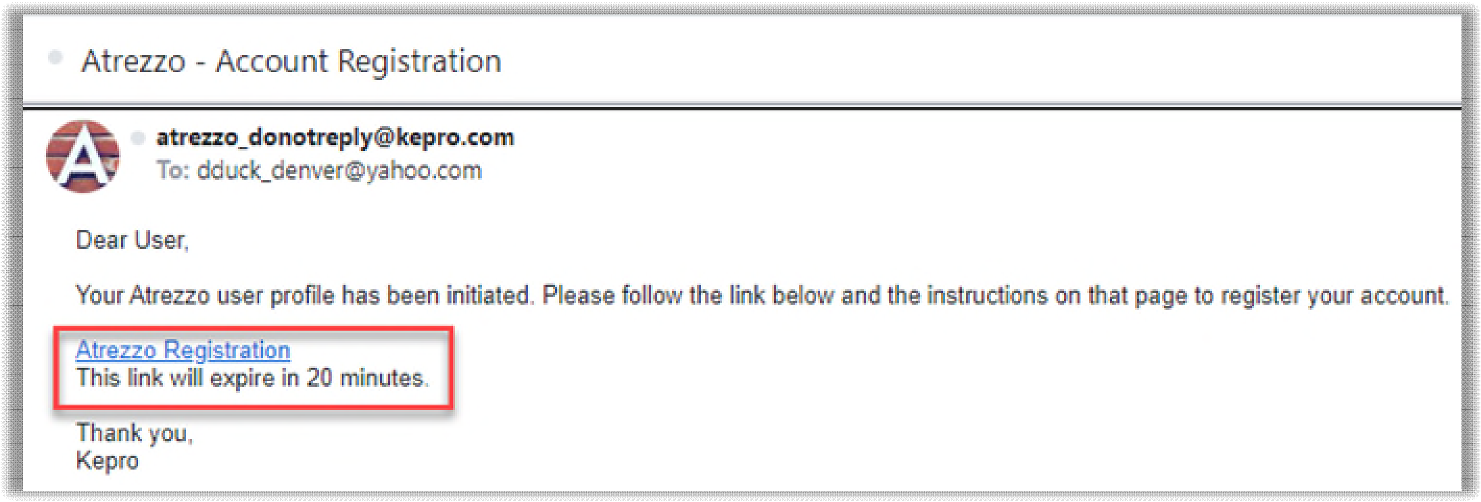


Create Username, and enter all required fields under Contact Information, then click Next. If you do not have a fax number, you may enter all 9s (i.e., 999-999-9999) in the fax field.





A message will display confirming the Registration is complete. To complete the Multi-Factor Authentication registration, you must click the link in your email within 20 minutes.

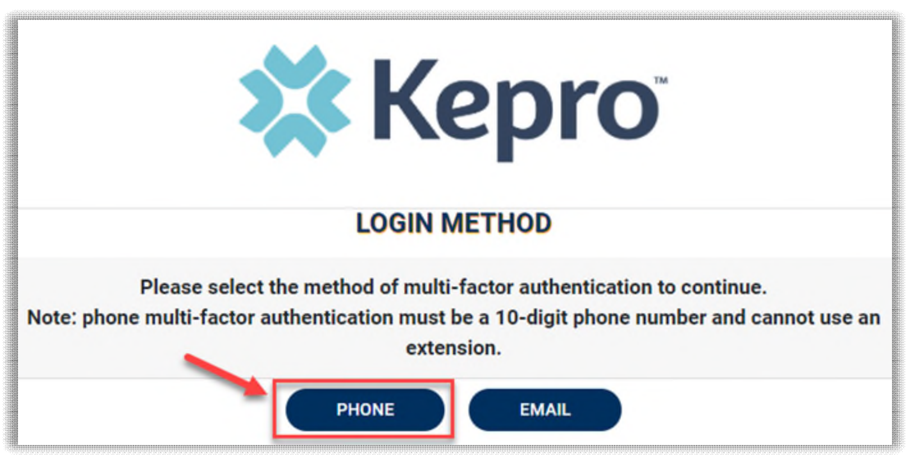


Select the best multi-factor authentication method for you. A phone registration will require a direct line with 10-digits; extensions are not supported.

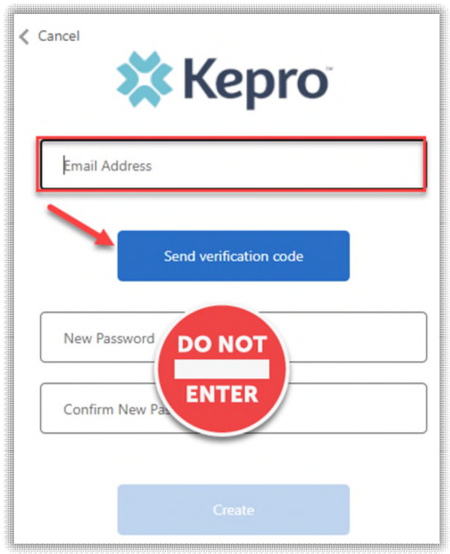
NOTE: When choosing an authentication method, you will be required to enter an email address for both options. Only choose the Email option if you do not have access to a direct phone line (landline or mobile).

Phone Verification

Click the PHONE button

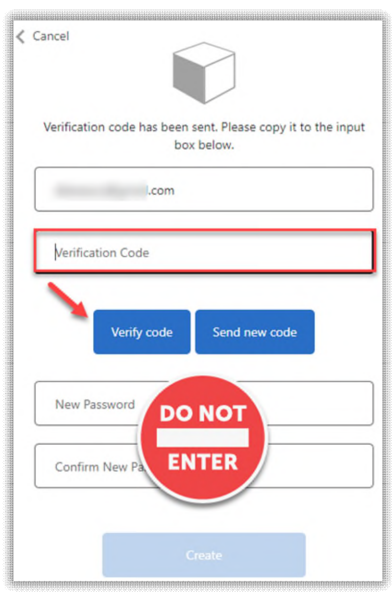


Enter your work email address, then click Send Verification Code. A 6-digit code will be sent to your email.



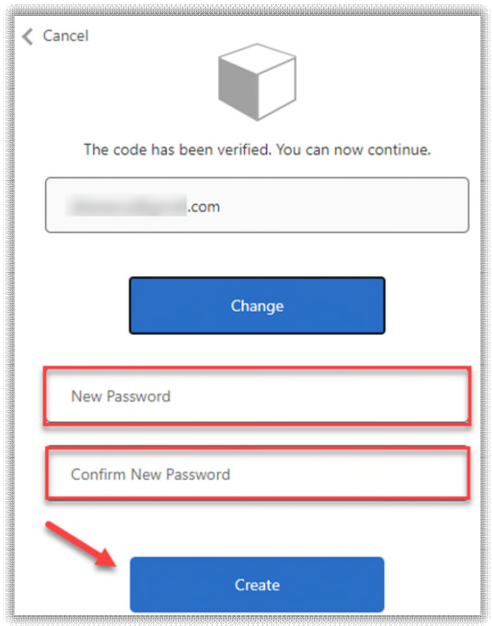
IMPORTANT: Do NOT enter anything in the Password section (this is not needed at this step).

Enter the verification code sent to the email address entered; then click Verify Code.

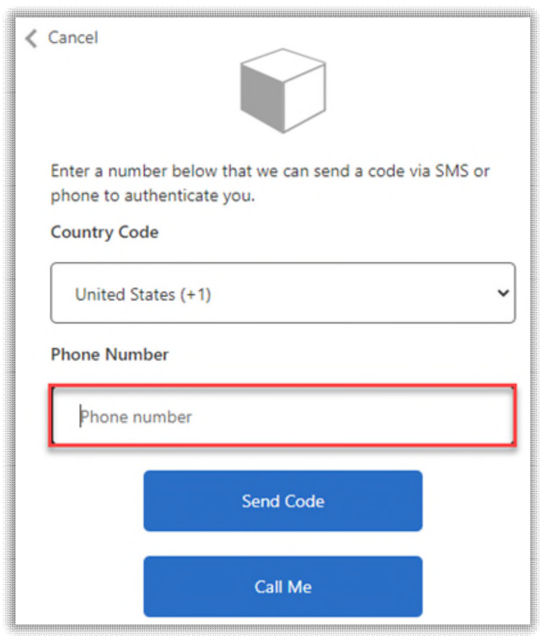


IMPORTANT: Do NOT enter anything in the Password section (this is not needed at this step).

After email verification is complete, enter a new password, confirm the password, and click Create. This is creating a password for the Multi-Factor Authentication Registration.

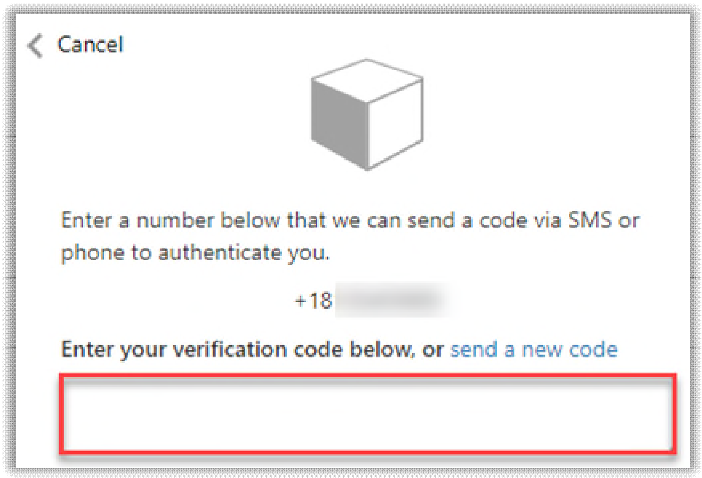


Enter your phone number and select Send Code or Call Me.

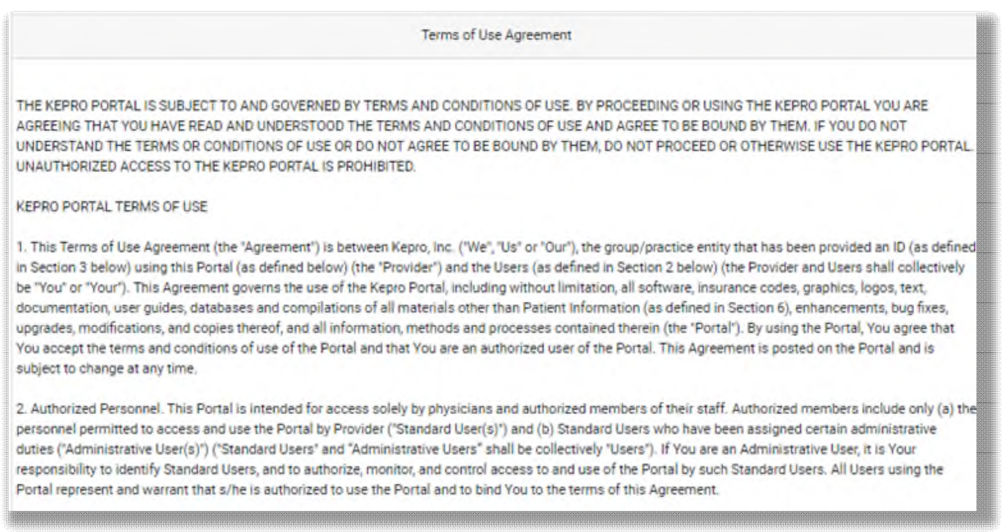


When phone call is selected, the user will receive a phone call on the registered phone number and will be prompted to press the # key to complete authentication.

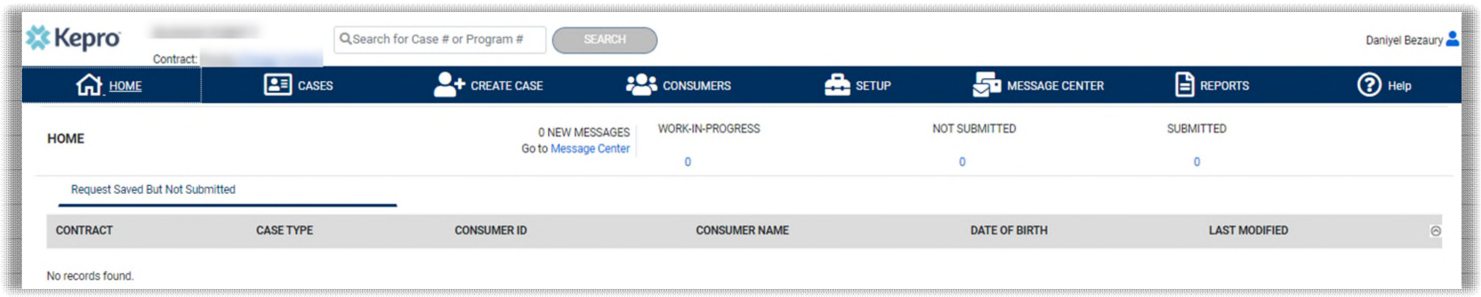
For SMS text authentication, enter the verification code received.



As a new user, you will need to read and agree to the Terms of Use.

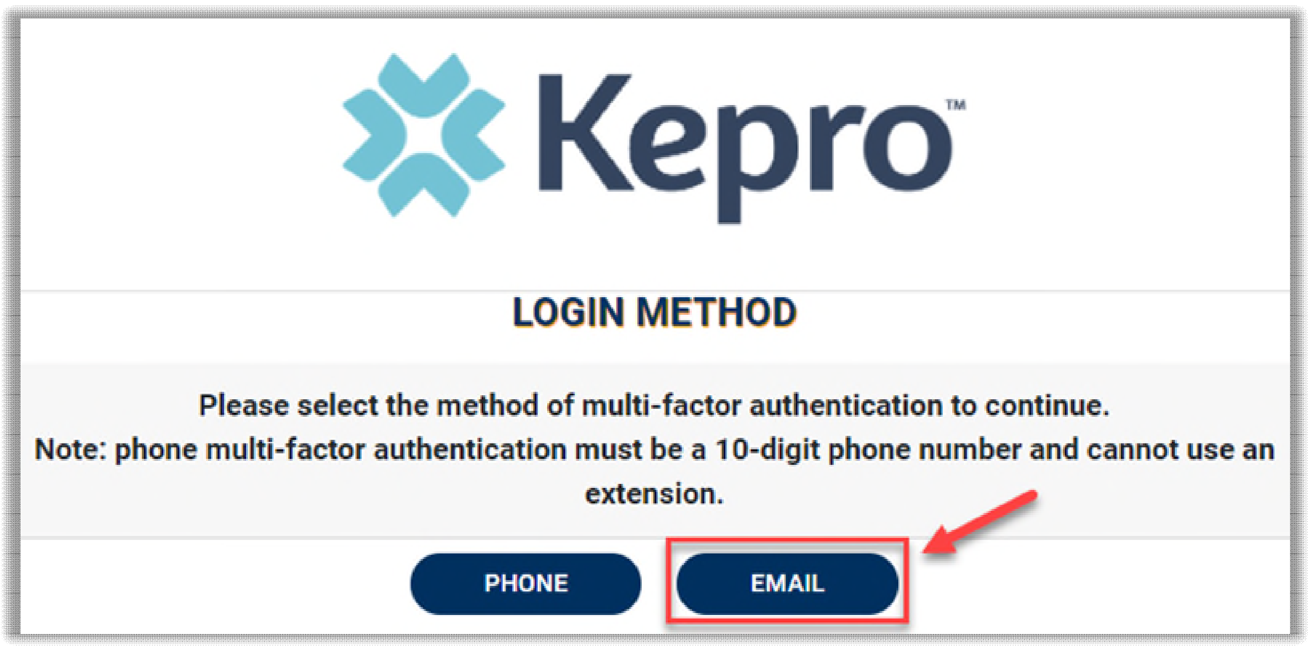


The system will automatically authenticate and display the home page.

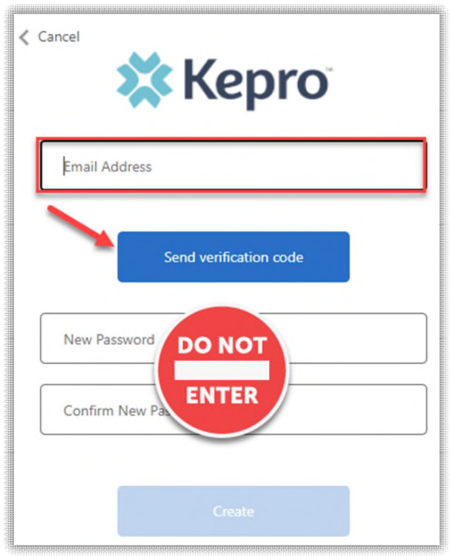


Email Verification

Click the EMAIL button

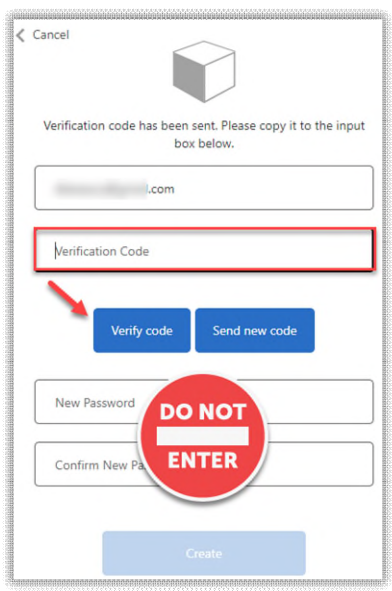


Enter your work email address, then click Send Verification Code. A code will be sent to your email.



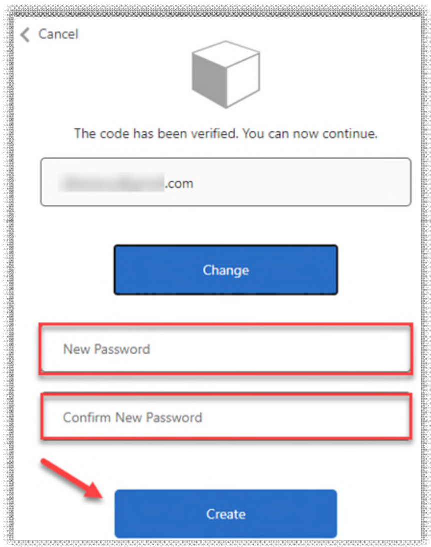
IMPORTANT: Do NOT enter anything in the Password section (this is not needed at this step).

Enter the verification code sent to the email address entered; then click Verify Code.



IMPORTANT: Do NOT enter anything in the Password section (this is not needed at this step).

After email verification is complete, enter a new password, confirm the password, and click Create. This is creating a password for the Multi-Factor Authentication Registration.



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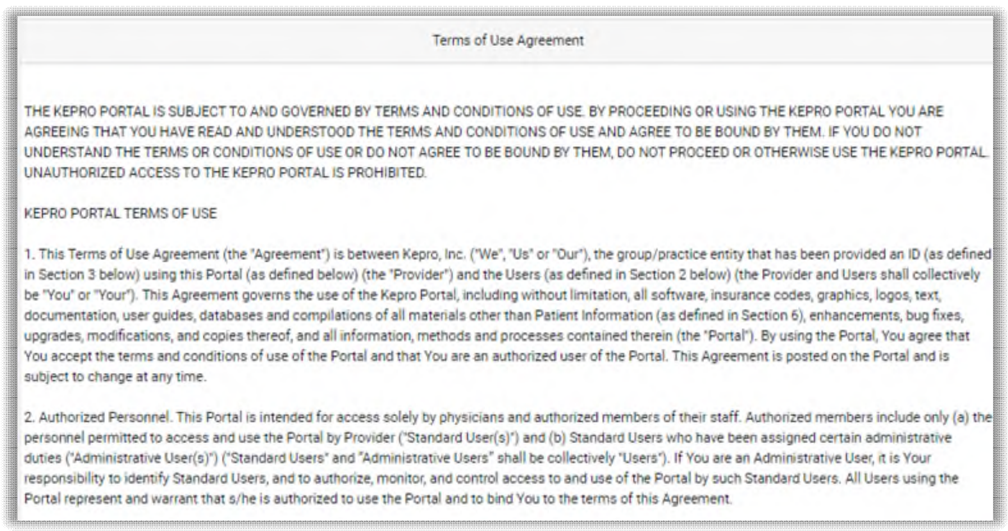


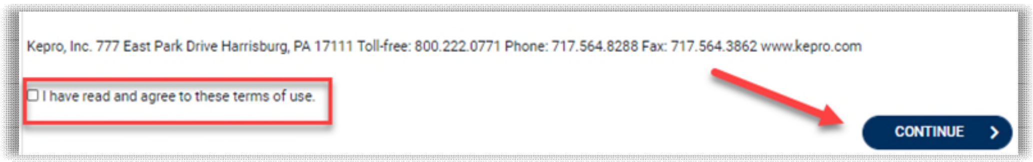
Terms of Use Agreement

THE KEPRO PORTAL IS SUBJECT TO AND GOVERNED BY TERMS AND CONDITIONS OF USE. BY PROCEEDING OR USING THE KEPRO PORTAL YOU ARE AGREEING THAT YOU HAVE READ AND UNDERSTOOD THE TERMS AND CONDITIONS OF USE AND AGREE TO BE BOUND BY THEM. IF YOU DO NOT UNDERSTAND THE TERMS OR CONDITIONS OF USE OR DO NOT AGREE TO BE BOUND BY THEM, DO NOT PROCEED OR OTHERWISE USE THE KEPRO PORTAL. UNAUTHORIZED ACCESS TO THE KEPRO PORTAL IS PROHIBITED.

KEPRO PORTAL TERMS OF USE

1. This Terms of Use Agreement (the "Agreement") is between Kepro, Inc. ("We", "Us" or "Our"), the group/practice entity that has been provided an ID (as defined in Section 3 below) using this Portal (as defined below) (the "Provider") and the Users (as defined in Section 2 below) (the Provider and Users shall collectively be "You" or "Your"). This Agreement governs the use of the Kepro Portal, including without limitation, all software, insurance codes, graphics, logos, text, documentation, user guides, databases and compilations of all materials other than Patient Information (as defined in Section 6), enhancements, bug fixes, upgrades, modifications, and copies thereof, and all information, methods and processes contained therein (the "Portal"). By using the Portal, You agree that You accept the terms and conditions of use of the Portal and that You are an authorized user of the Portal. This Agreement is posted on the Portal and is subject to change at any time.

2. Authorized Personnel. This Portal is intended for access solely by physicians and authorized members of their staff. Authorized members include only (a) the personnel permitted to access and use the Portal by Provider ("Standard User(s)") and (b) Standard Users who have been assigned certain administrative duties ("Administrative User(s)") ("Standard Users" and "Administrative Users" shall be collectively "Users"). If You are an Administrative User, it is Your responsibility to identify Standard Users, and to authorize, monitor, and control access to and use of the Portal by such Standard Users. All Users using the Portal represent and warrant that s/he is authorized to use the Portal and to bind You to the terms of this Agreement.



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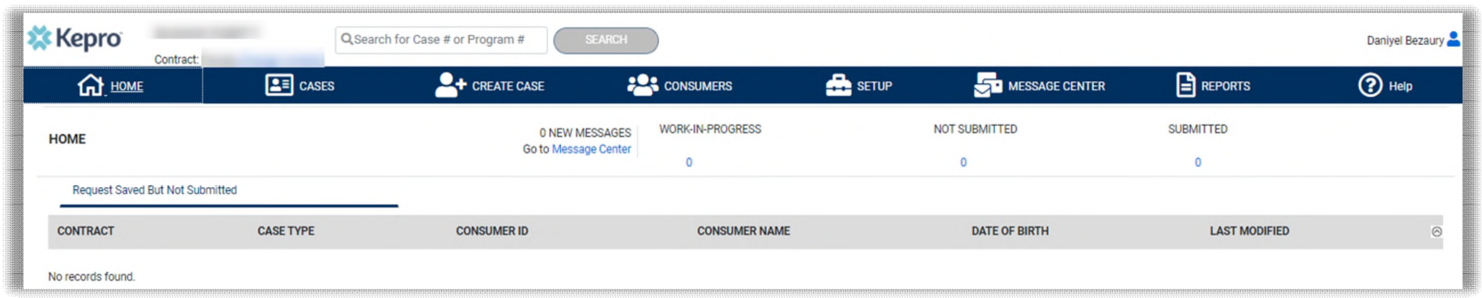
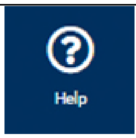


System Navigation

Navigation of Atrezzo will remain consistent throughout use despite user role. The navigation pane will remain in place regardless of navigation through the system. This functionality allows for quick and easy navigation from any screen.

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

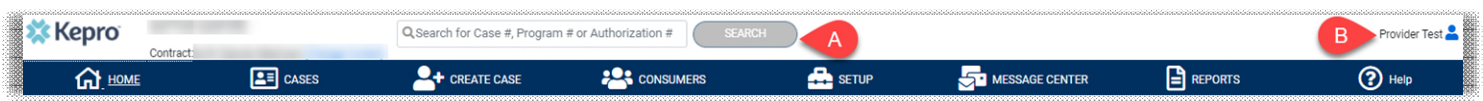
Sections	Section Name	Purpose of Section
HOME	Home	This is the default page upon successful login and will enable you to view submitted cases and any pending submissions.
CASES	Cases	This section will enable you to search cases based on specific parameters including case type, case status and request type To identify specific cases and ensure efficient search results, try selecting specific information in each drop down to narrow search results.
CREATE CASE	Create Case	This section will enable you to create a new case for a consumer. Required fields include the case type, consumer information, and case parameters. Some fields will auto populate based on user role. Additional fields appear based on selections made.
CONSUMERS	Consumers	This section will enable you to search for Consumer specific information utilizing the Consumer ID or last name and date of birth. Consumer specific data will render based on information entered.
SETUP	Setup	**Visible to Provider Administrator users only.** This section will enable Provider Administrators to manage, edit, and add provider users for the facility.
MESSAGE CENTER	Message Center	This section will enable users to communicate directly with the team at Kepro regarding specific Consumers and/or cases.

	Reports	This section will display all available reports for those who have access. The report icon will not be visible to those users or contracts who do not have access to reports User specific reports will be listed on this page, no search required.
	Help	This section will display available information including User Guides, FAQs, Latest Release Notes, and Password Guidelines.

General System Features

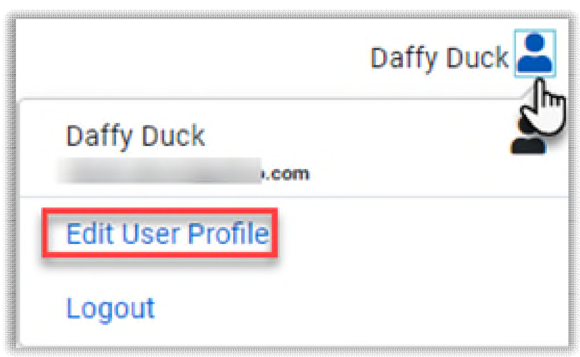
This section will highlight the features found on all screens throughout the system and provide information on how to utilize these features for optimal navigation. The ability to search and view profile information will appear on all pages throughout the system, regardless of navigation.

After successful login, the system will default to the Home Screen. See below for the features present on all pages throughout the system to assist with navigation.



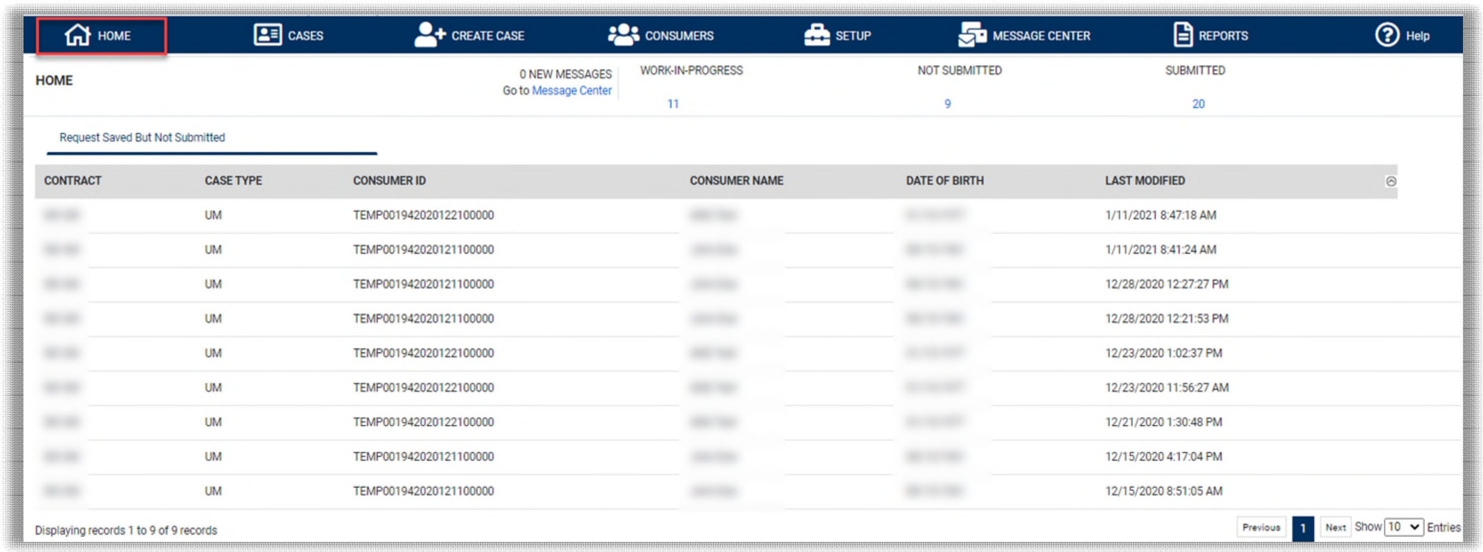
A. To search a Case #, Program #, or Authorization #, enter specified information in this box and click Search (see [Searching by Case ID](#) for step-by-step instructions).

B. This section will identify the user logged in. Click on the icon in the upper right corner to open menu options where you can Edit User Profile or Logout.

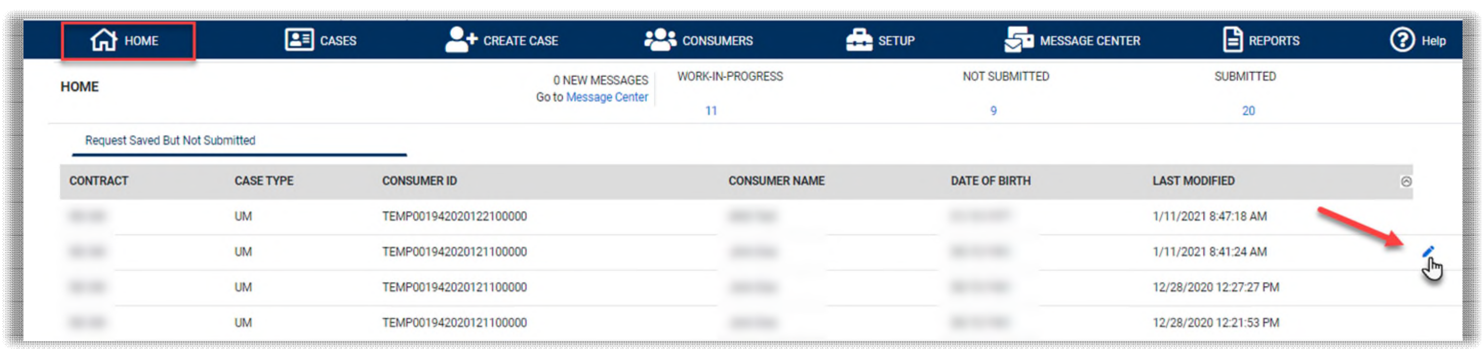


Home Screen View

Once successfully logged in, the user will be taken to the Atrezzo Home Screen which will default 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 to Kepro.



To complete an un-submitted case, you can click the edit icon that will appear when hovering over the specified Consumer line, or complete a full search for un-submitted cases with specific parameters (see the Cases section for the steps to complete a full search).

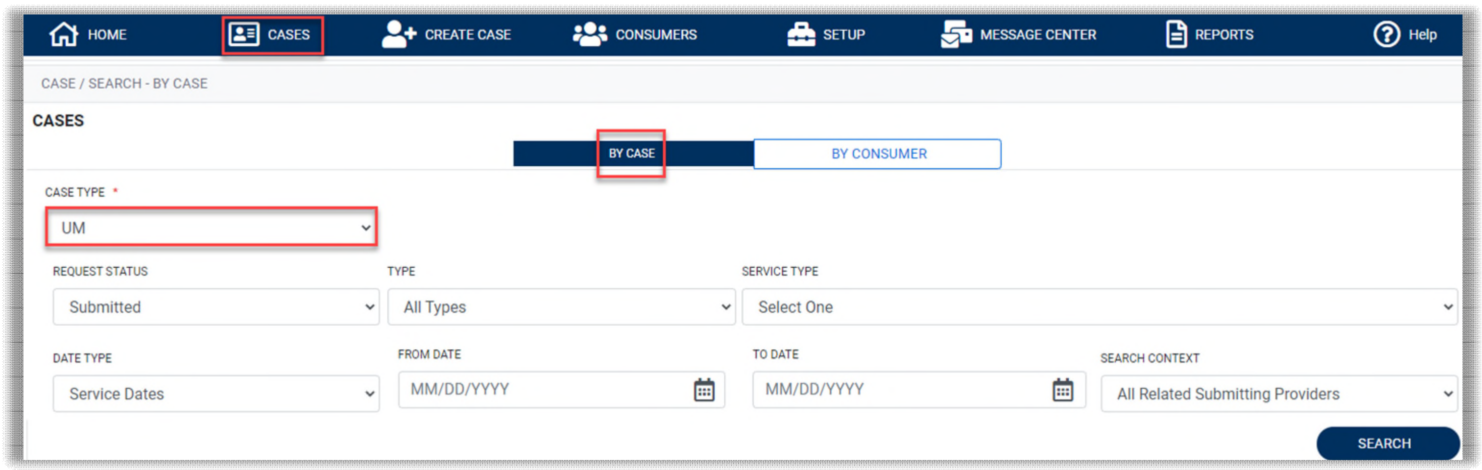


Cases

This section will identify the steps to search for cases based on selected search parameters. This section is searchable by Case or Consumer. Select the specific search on the top.

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 service date span for search results to render.*



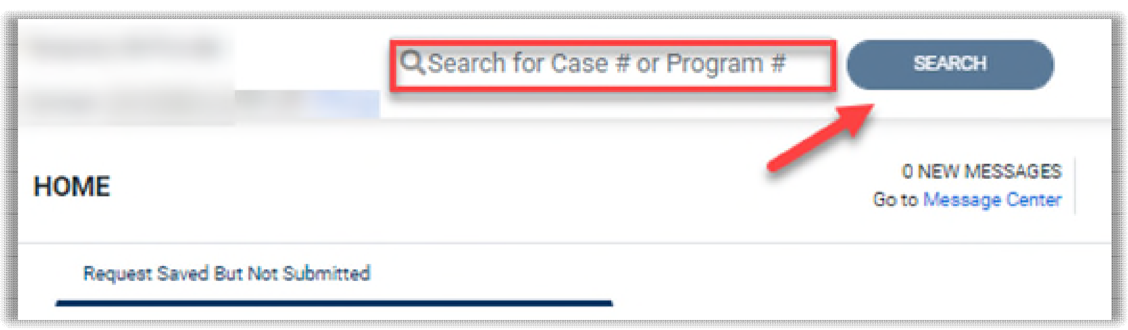
To search By Consumer, enter the required Member information. For results to render, user must enter Last Name and DOB or Member ID.

Search results will render below. The Case ID is a hyperlink which will open the specified Case page.

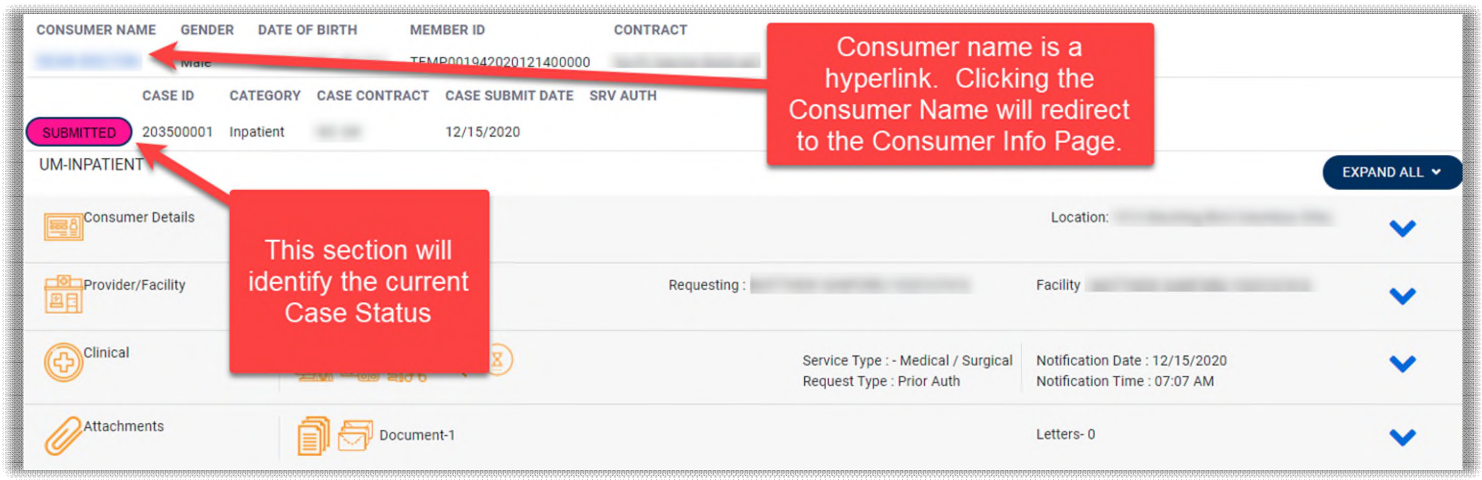
CASE ID	MEMBER INFO	STATUS	REQUEST INFO	SERVICE TYPE	SERVICE DATE(S)	PROCEDURES
203460001 8015979 View Request [Extend] [Copy] [Discharge]	36324343 [redacted]	Submitted Approved: 1 Denied: 0 Pending: 0 Void: 0	Submit Date: 12/11/2020 Outpatient Letters: 0 Messages: 1	- Medical / Surgical	12/31/2020 12:00:00 AM	E1399
203500001 8015985 View Request [Extend] [Copy] [Discharge]	36324355 [redacted]	Submitted Approved: 0 Denied: 0 Pending: 0 Void: 0	Submit Date: 12/15/2020 Inpatient Letters: 0 Messages: 0	- Medical / Surgical	12/8/2020 12:00:00 AM	LOS 43865
203500003 8015989 View Request [Extend] [Copy] [Discharge]	36324357 [redacted]	Submitted Approved: 1 Denied: 0 Pending: 0 Void: 0	Submit Date: 12/15/2020 Outpatient Letters: 1 Messages: 0	- Medical / Surgical	12/15/2020 12:00:00 AM	15780

Search by Case ID

To search directly for a case, enter the Case ID in the search box on the top left of any page, then click **SEARCH** to be directed to the specified case.



The visible information will be in Read-Only format.

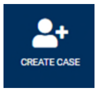


UM Case Status

The UM case will display the case status at the top. The UM program status options are color coded for quick and easy identification.

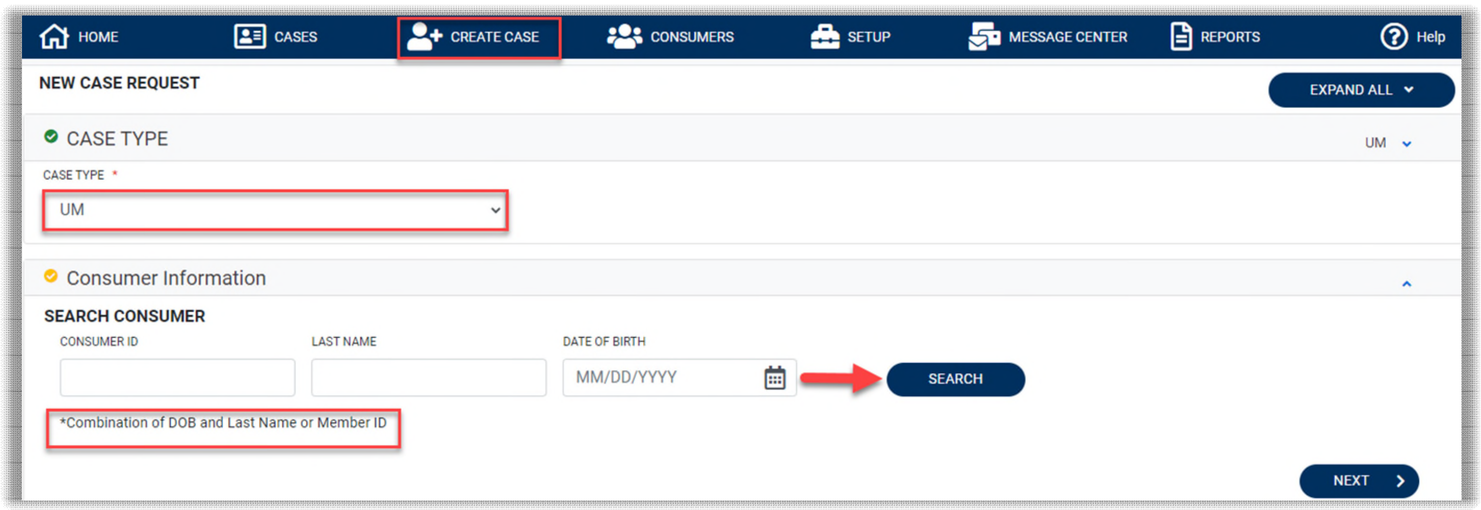
Status	Description of Status
UN-SUBMITTED	Unsubmitted identifies a case that has been started but has not been completed or officially submitted. This case will not have an associated Case ID until it is submitted. Once all information is entered, the case will move to Submitted or Insufficient Information if any required information is incomplete or missing.
SUBMITTED	Submitted identifies a case that has been submitted but has not yet been reviewed. Once the case is assigned to a clinical reviewer, the status will change to Active Review.
COMPLETED	Completed identifies a case that has been submitted, reviewed, a determination made, and is complete. A Complete case status does not identify the outcome of the clinical review (i.e., Approved, denied, partial approval, etc.).

Create Case

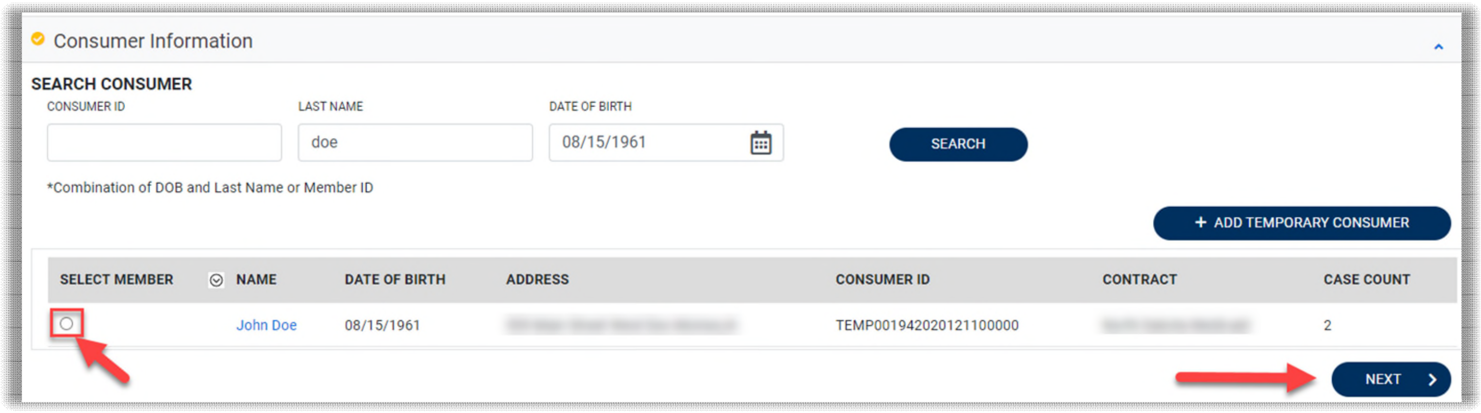


This section will identify the steps to create a new inpatient or outpatient request. In the navigation pane, click **CREATE CASE**.

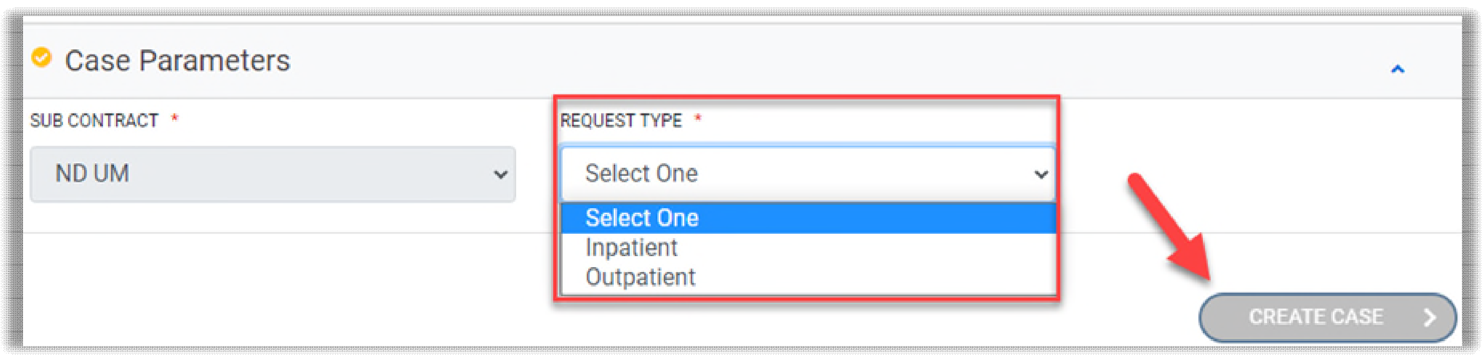
The Case Type will default to UM. To search the consumer, you must enter the Consumer ID or Last Name and Date of Birth, then select **SEARCH**.



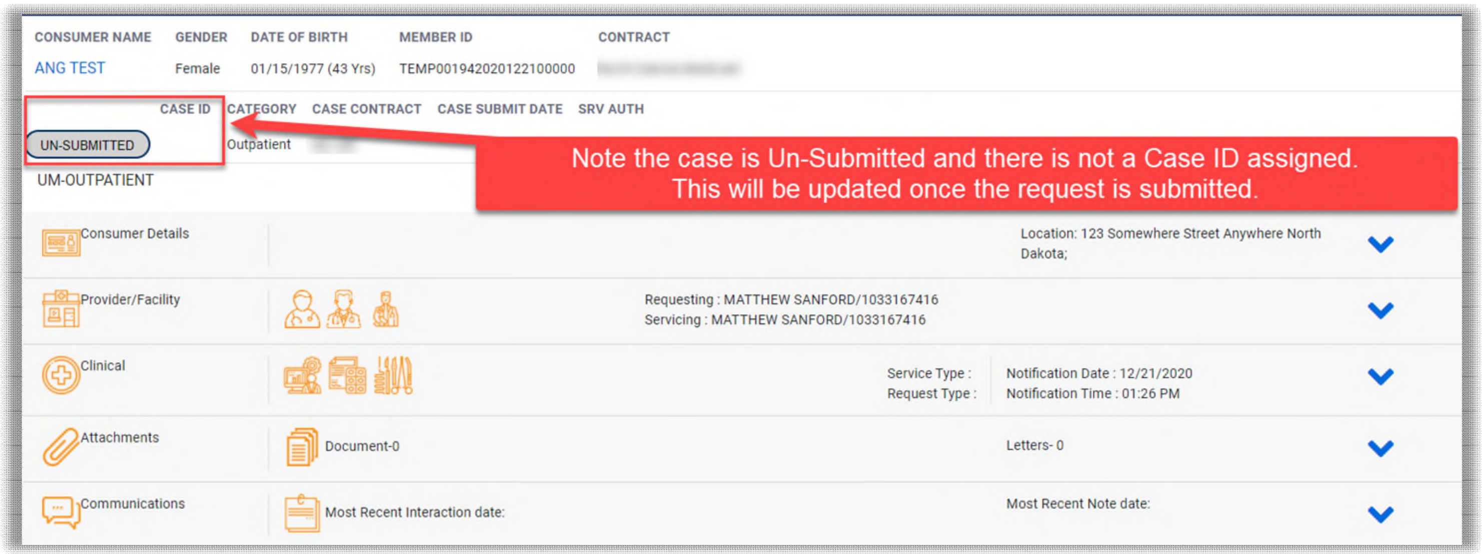
Click the radio button to select the consumer. If the Case Parameters section does not open automatically, click **NEXT** to proceed with the case.



After selecting the proper Consumer, Select the proper case parameters for the request being made. Then click **CREATE CASE**.

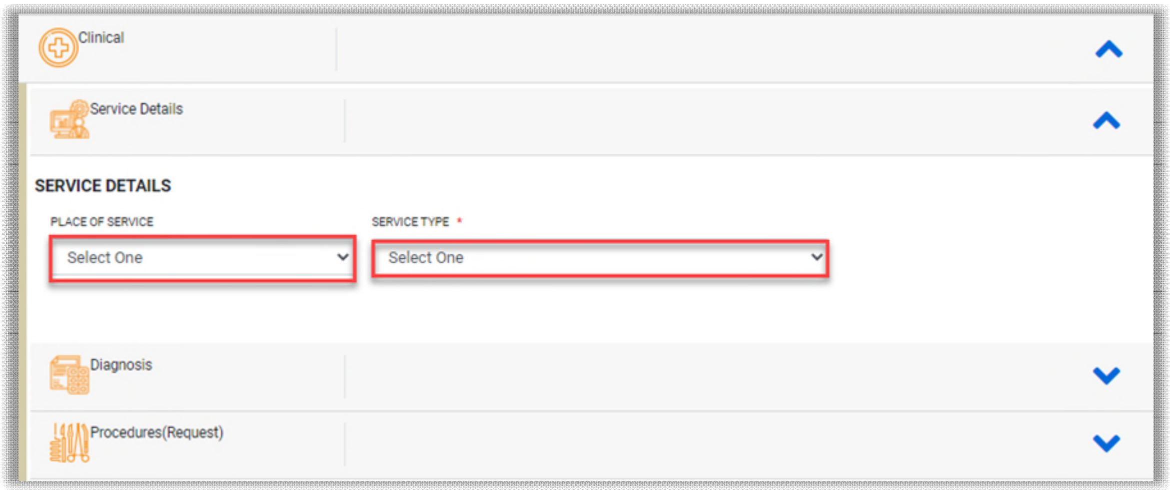


The next page that renders will be the shell of the case and will reflect Un-Submitted. This means the case request has been started, but not yet submitted to Kepro for review. Enter the rest of the clinical information pertaining to the request. Follow the instructions below to submit an inpatient or an outpatient request.


CONSUMER NAME
GENDER
DATE OF BIRTH
MEMBER ID
CONTRACT
ANG TEST
Female
01/15/1977 (43 Yrs)
TEMP001942020122100000
CASE ID
CATEGORY
CASE CONTRACT
CASE SUBMIT DATE
SRV AUTH
UN-SUBMITTED
Outpatient
UM-OUTPATIENT
Note the case is Un-Submitted and there is not a Case ID assigned.
This will be updated once the request is submitted.
Consumer Details
Location: 123 Somewhere Street Anywhere North Dakota;
Provider/Facility
Requesting : MATTHEW SANFORD/1033167416
Servicing : MATTHEW SANFORD/1033167416
Clinical
Service Type :
Request Type :
Notification Date : 12/21/2020
Notification Time : 01:26 PM
Attachments
Document-0
Letters- 0
Communications
Most Recent Interaction date:
Most Recent Note date:

Outpatient Request

To submit an Outpatient request, expand the Clinical section, then expand Service Details. Select the appropriate **Place of Service** and **Service Type**.



Place of Service Options include:

Ambulatory Surgical Center
Community Mental Health Center
Home

Outpatient Service Types Include:

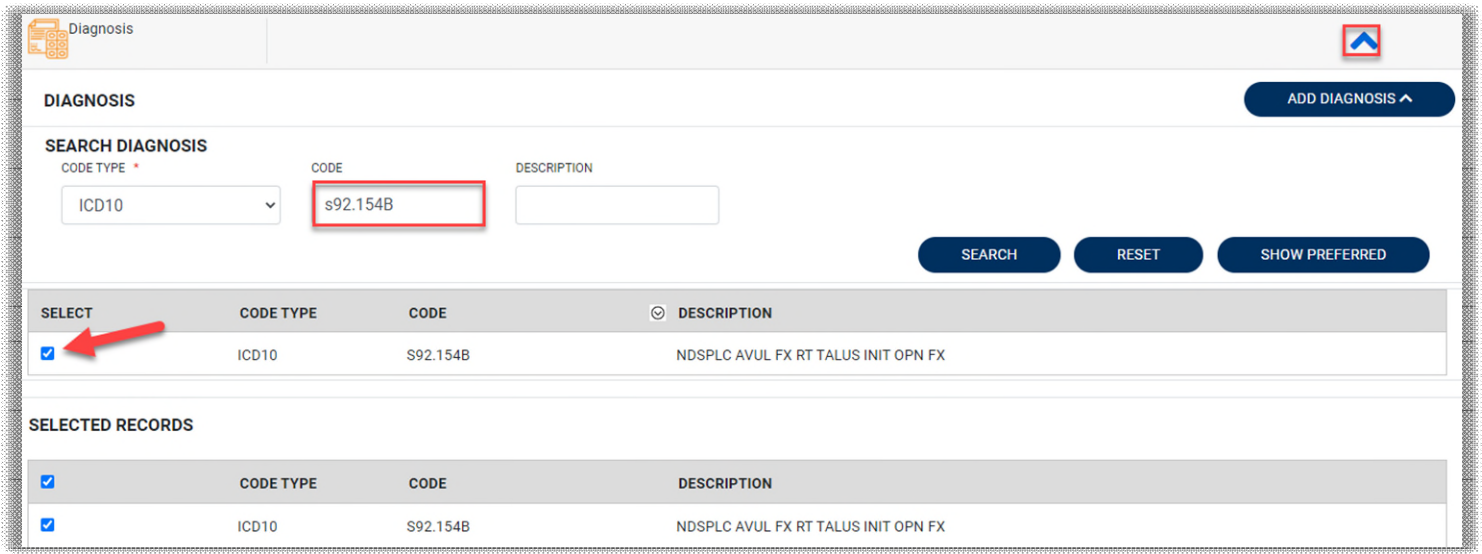
Occupational Therapy
Speech Therapy
Genetics Lab
Imaging Studies
Pediatric Behavior Therapy (PBT)
Physician Services
Personal Care Services
Vision Care
Ambulation Devices
Hot & Cold Applications
Oral / Enteral / Parenteral
Trapeze Traction & Fracture Frames

Audiology
Wheelchairs and Accessories
Disposable Medical Supplies
Oxygen and Respiratory
Orthotics/Prosthetics
Reconstructive Surgery
Pediatric Long Term Home Health
Private Duty Nursing
CRT
Phototherapy / Wound Care
Bedroom and Bathroom
Monitoring Equipment & Diabetic Supplies

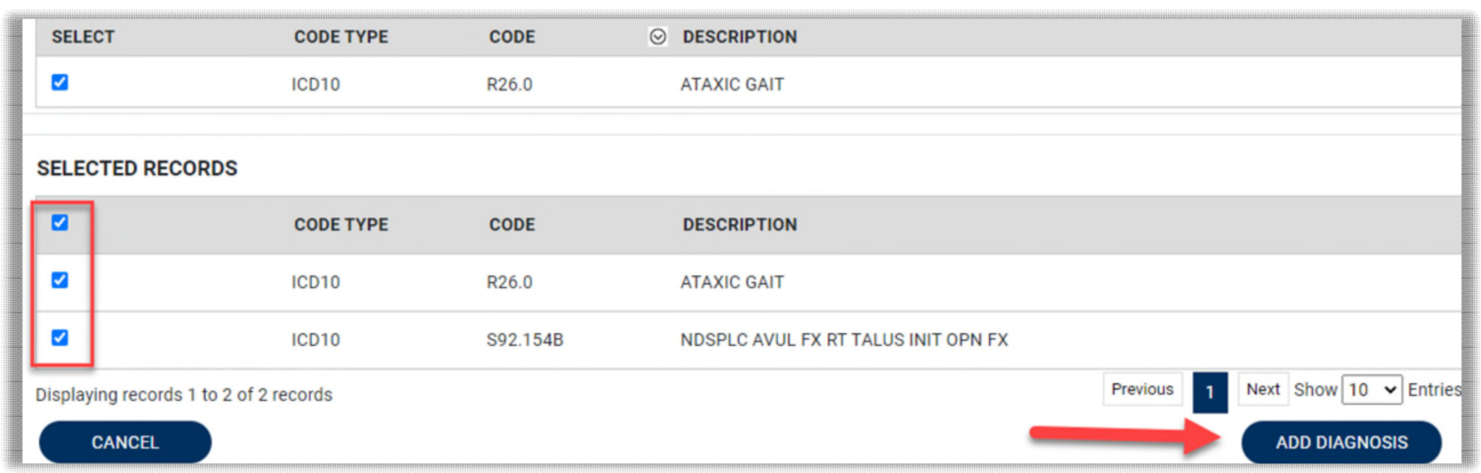
Nerve Stimulators

Lymphedema Pumps & Compressors

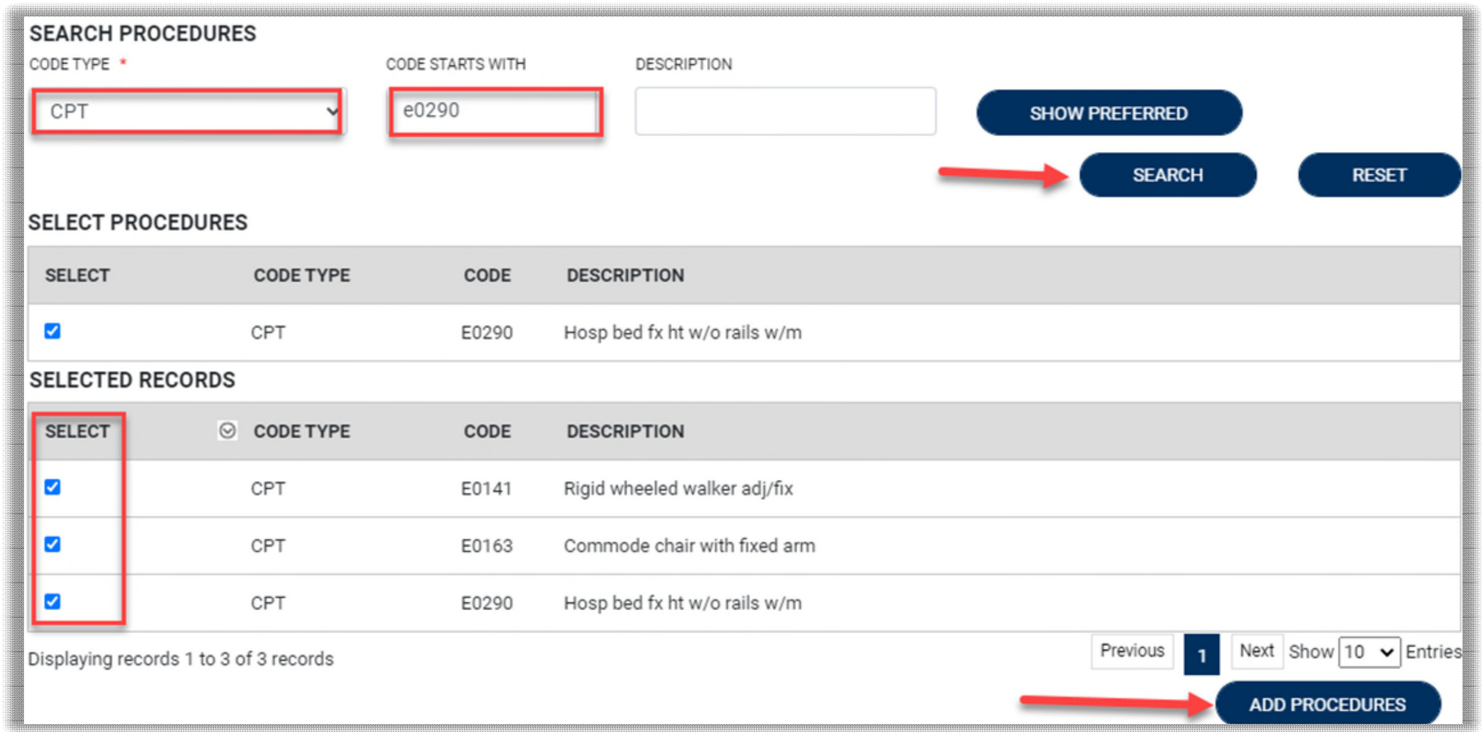
After entering Service Details, expand Diagnosis to enter all applicable diagnosis codes. Click Add Diagnosis and search by diagnosis code or description. Select the needed diagnosis by clicking the Select Box. The diagnosis will be added to the Selected Records section.



Once all diagnosis codes are entered, select **ADD DIAGNOSIS**.

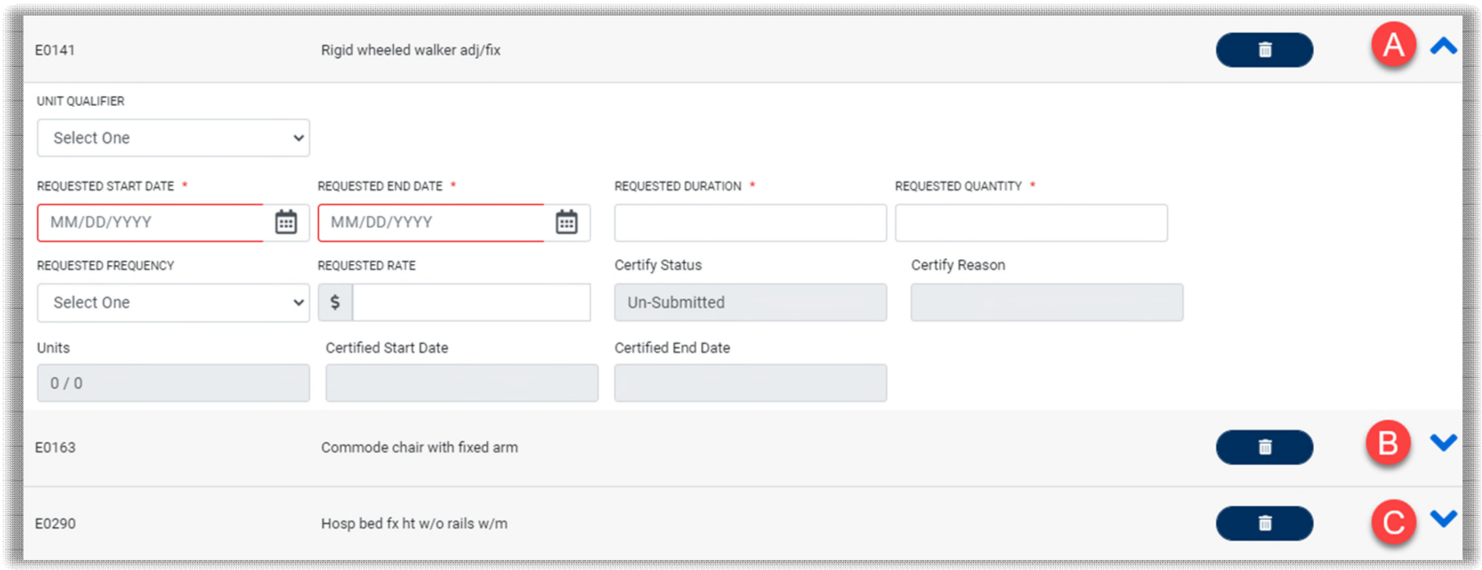


Once all diagnosis codes are entered, expand Procedures. Enter all applicable procedure codes, this process is similar to adding a diagnosis. Enter CPT or ICD10 Procedure Code or description, then click Search. Select the appropriate procedure codes to be added. Once all codes are listed, select Add Procedure.

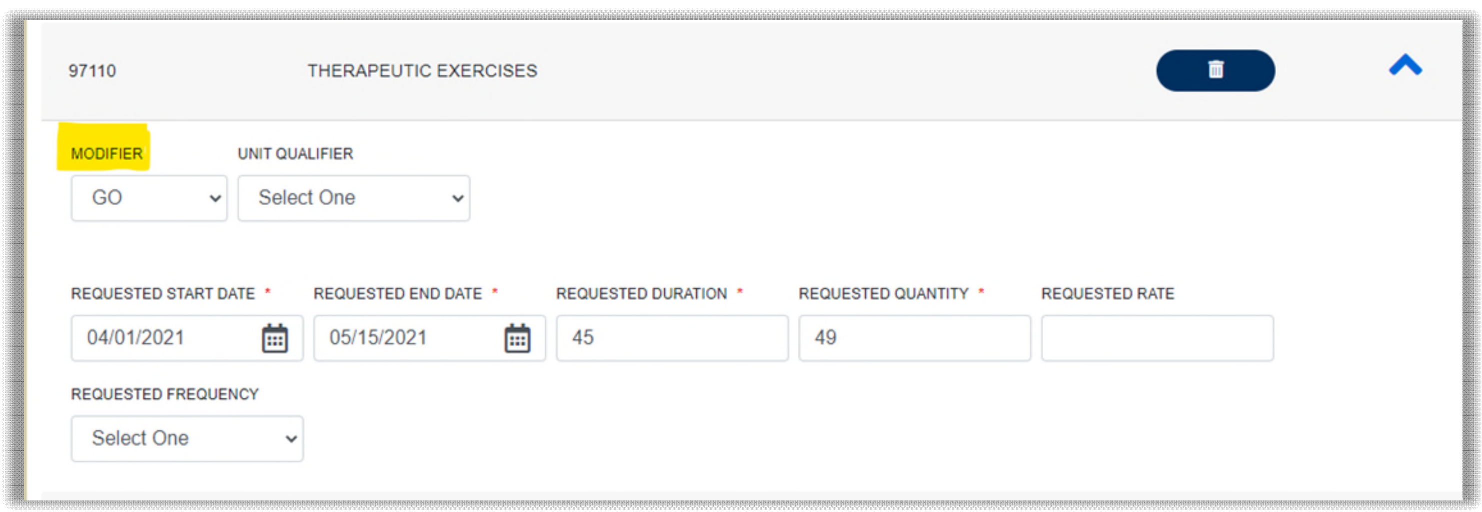


After entering the procedure codes, an outpatient request will require detailed information for each requested code. Once all the codes are entered, they will be displayed in a stacked layout.

To enter details for each procedure code, expand the line for each code entered and complete required fields.

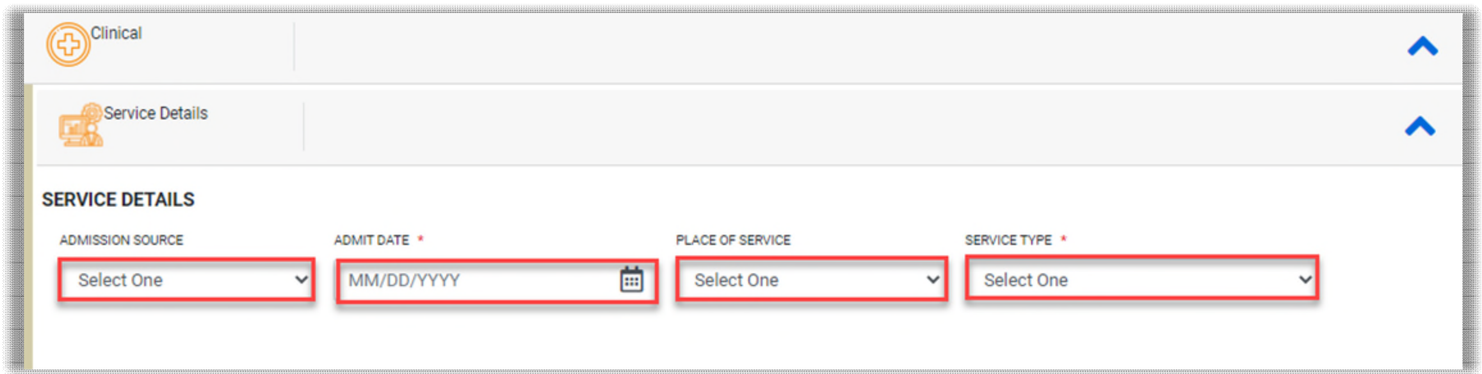


For codes requiring a modifier, select the appropriate modifier from the dropdown.



Inpatient Request

To submit an inpatient request, expand Clinical, then expand Service Details. Select the appropriate Admission Source, Admit Date, Place of Service, and Service Type.



Admission Source Options Include:

Elective	Emergency

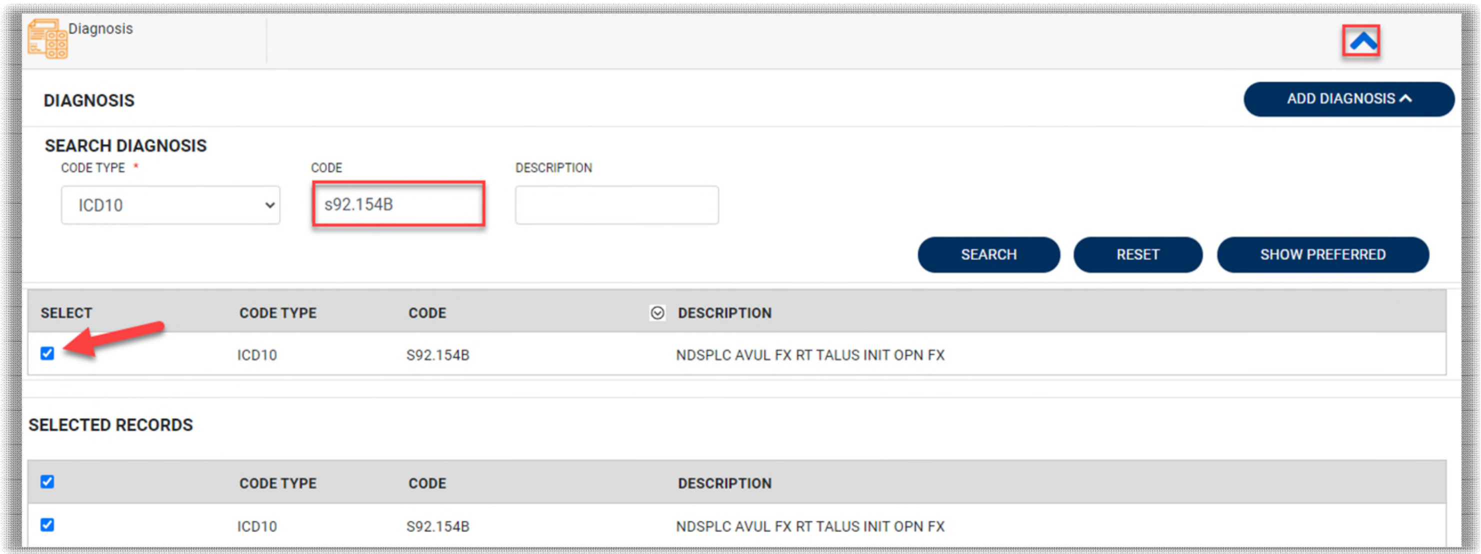
Place of Service Options Include:

Ambulatory Surgical Center	Inpatient Hospital
Community Mental Health Center	Office
Home	Outpatient Hospital

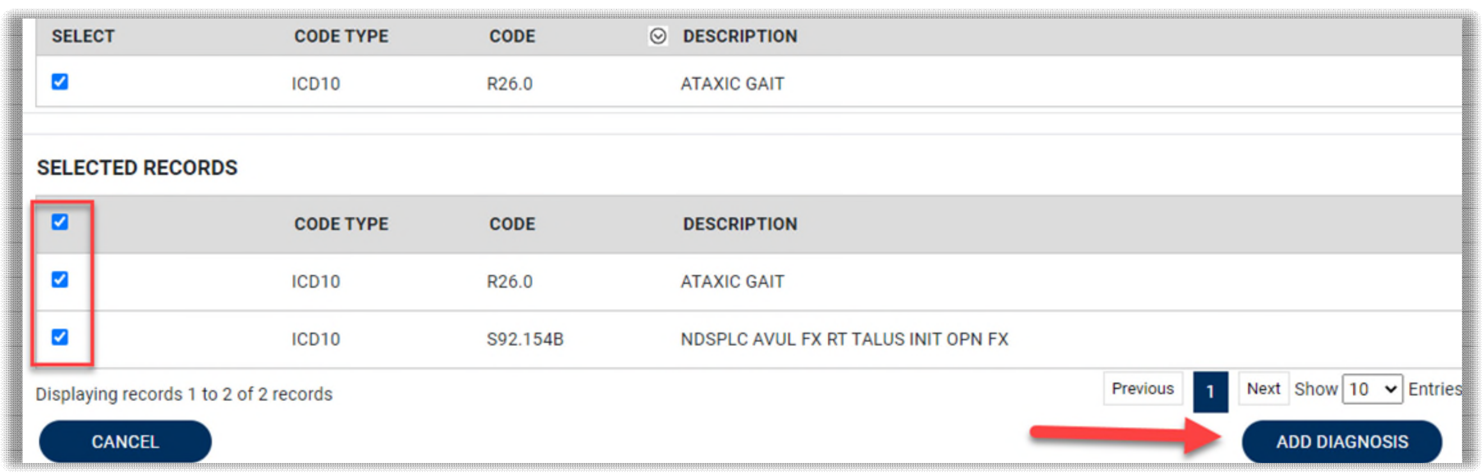
Inpatient Service Types Include:

Out of State (OOS) Inpatient	Transplant

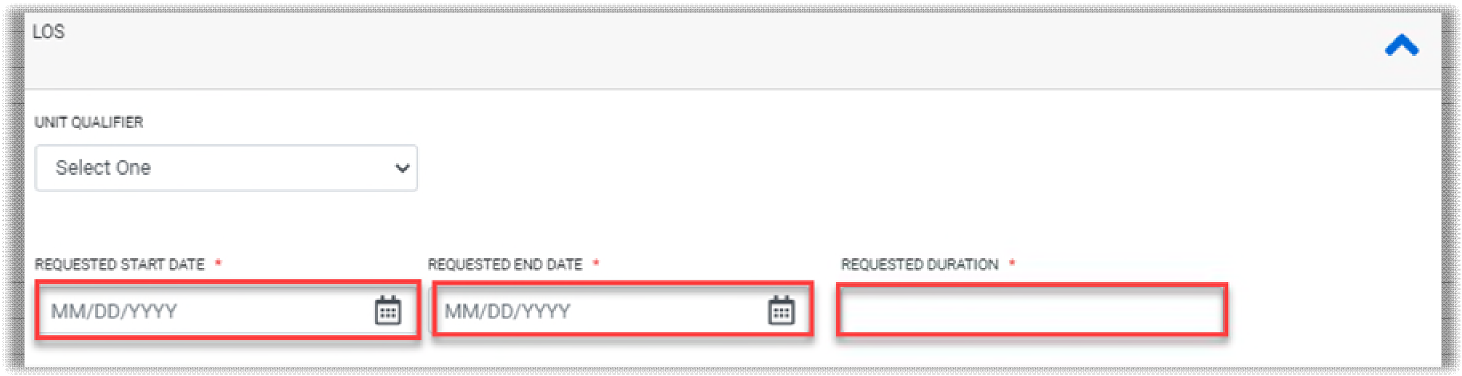
After entering Service Details, expand Diagnosis to enter all applicable diagnosis codes. Click Add Diagnosis and search by diagnosis code or description. Select the needed diagnosis by clicking the Select Box. The diagnosis will be added to the Selected Records section.



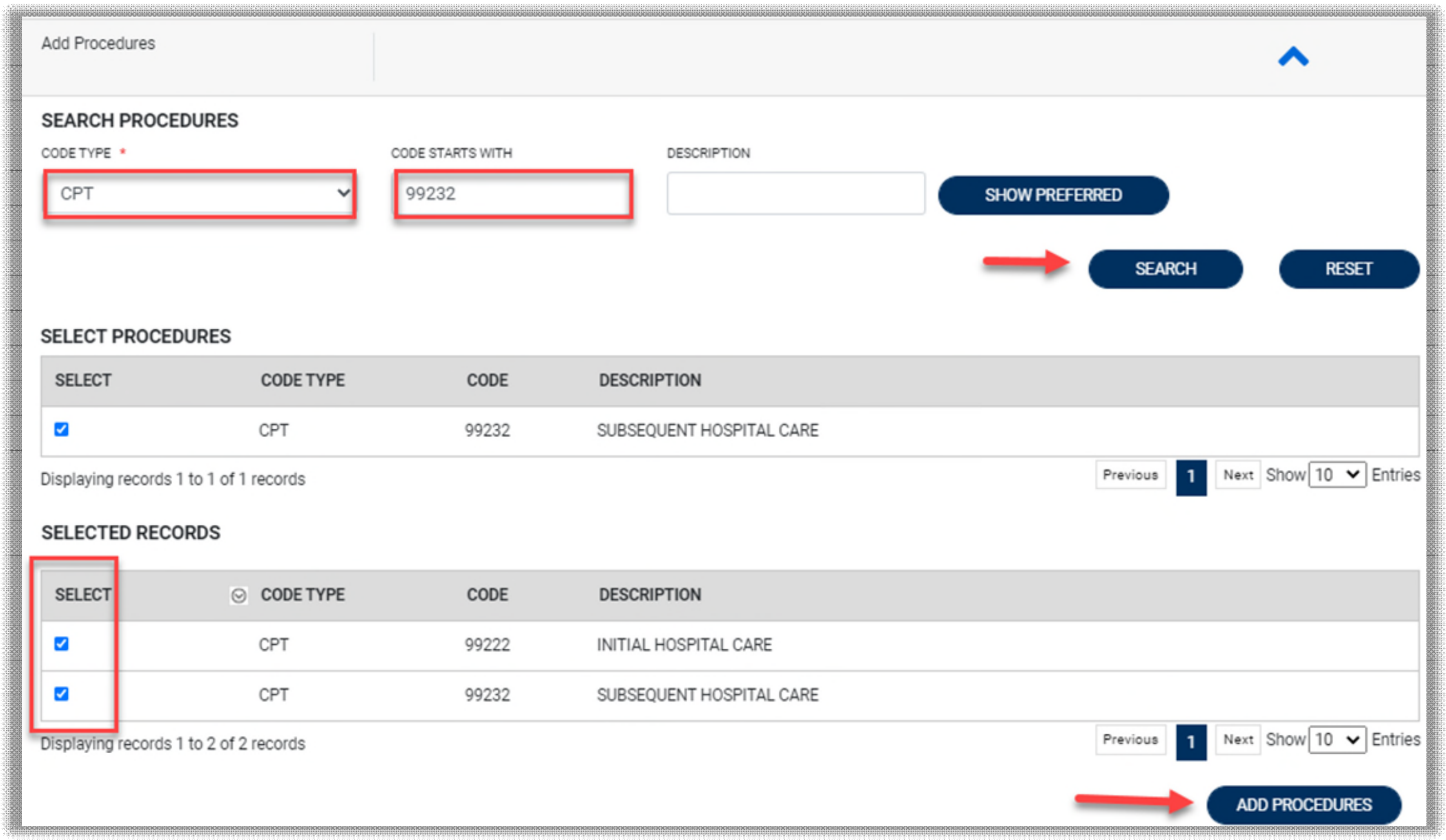
Once all diagnosis codes are entered, select **ADD DIAGNOSIS**.



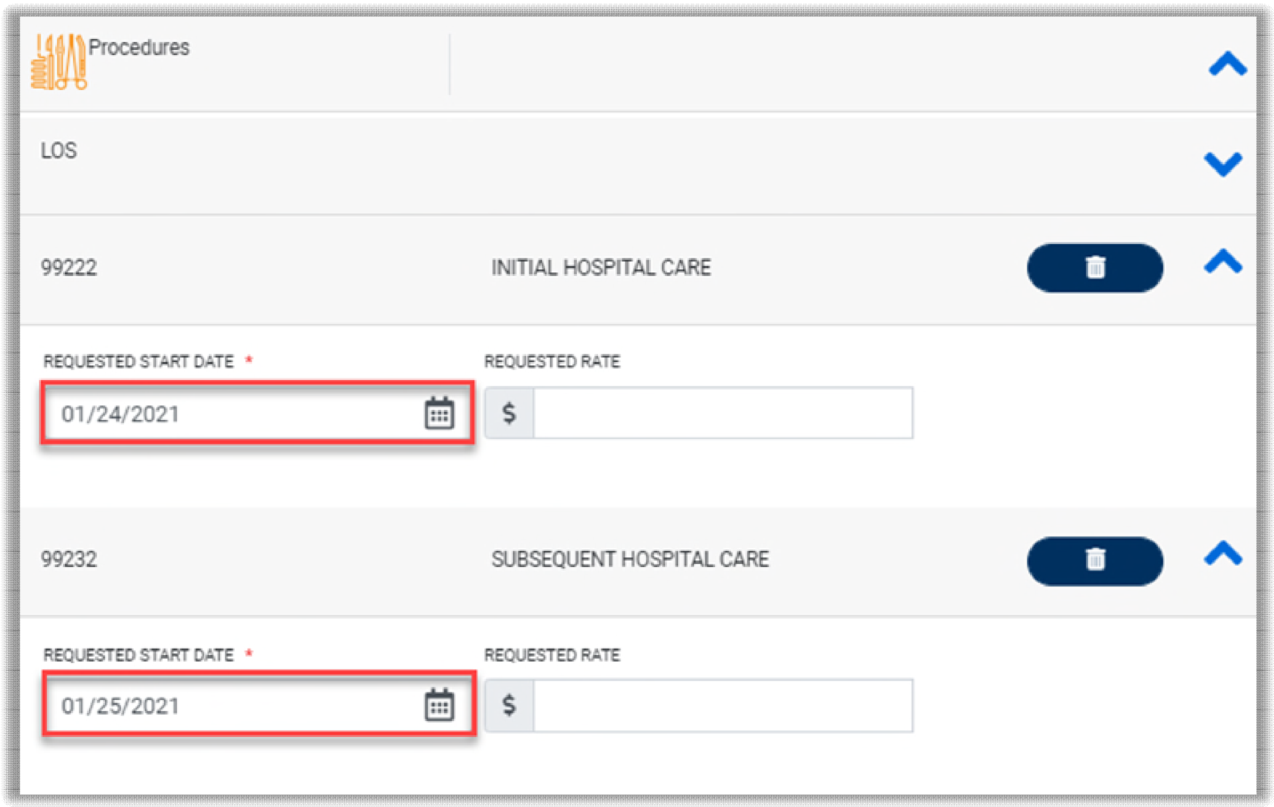
Once all diagnosis codes are entered, expand Procedures and enter required fields under LOS.



After completing LOS, enter all applicable procedure codes, this process is similar to adding a diagnosis. Enter CPT/ICD10 Procedure Code or description, then click Search. Select the appropriate procedure codes to be added. Once all codes are listed, select Add Procedure.

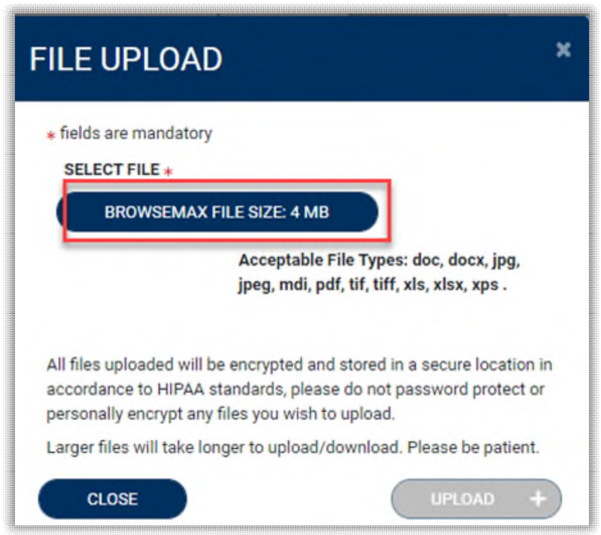


If the requested start date entered under LOS will not be applicable to all procedure codes, expand the procedure code section to update the date. Once the date has been changed, it will automatically save.

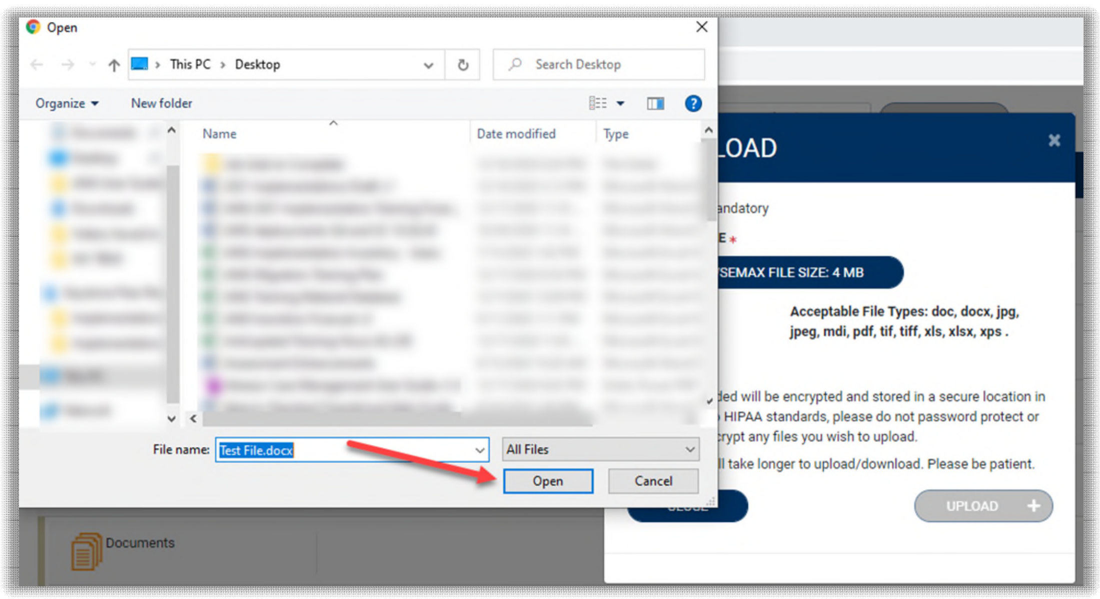


If no changes to the requested start date are needed, continue to complete request.

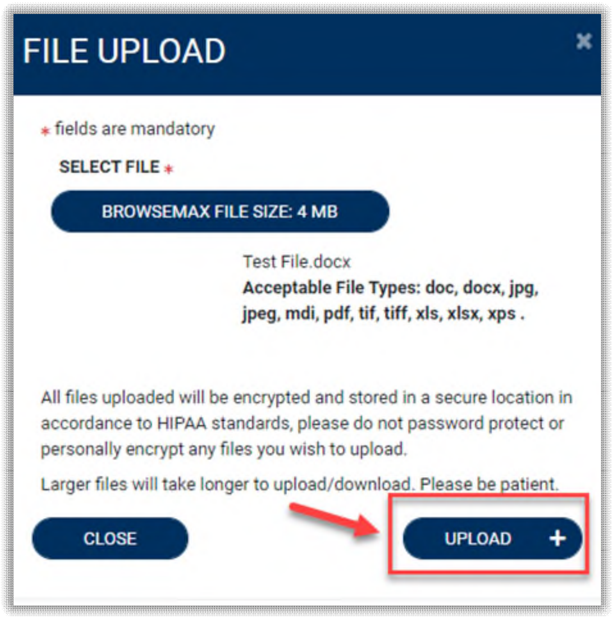
Once all clinical information is added, expand Attachments, then expand Documents to upload any supporting documentation. Select **CLICK HERE TO UPLOAD FILE**. A pop up will display, click Browse to search for the supporting documentation.



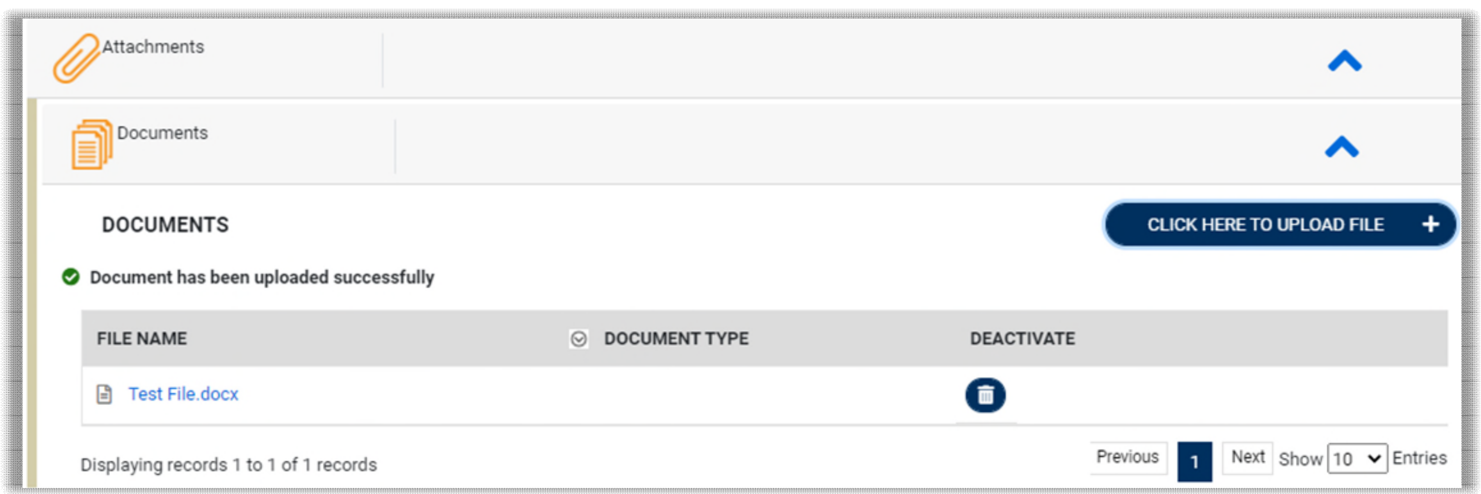
Select the file and click Open.



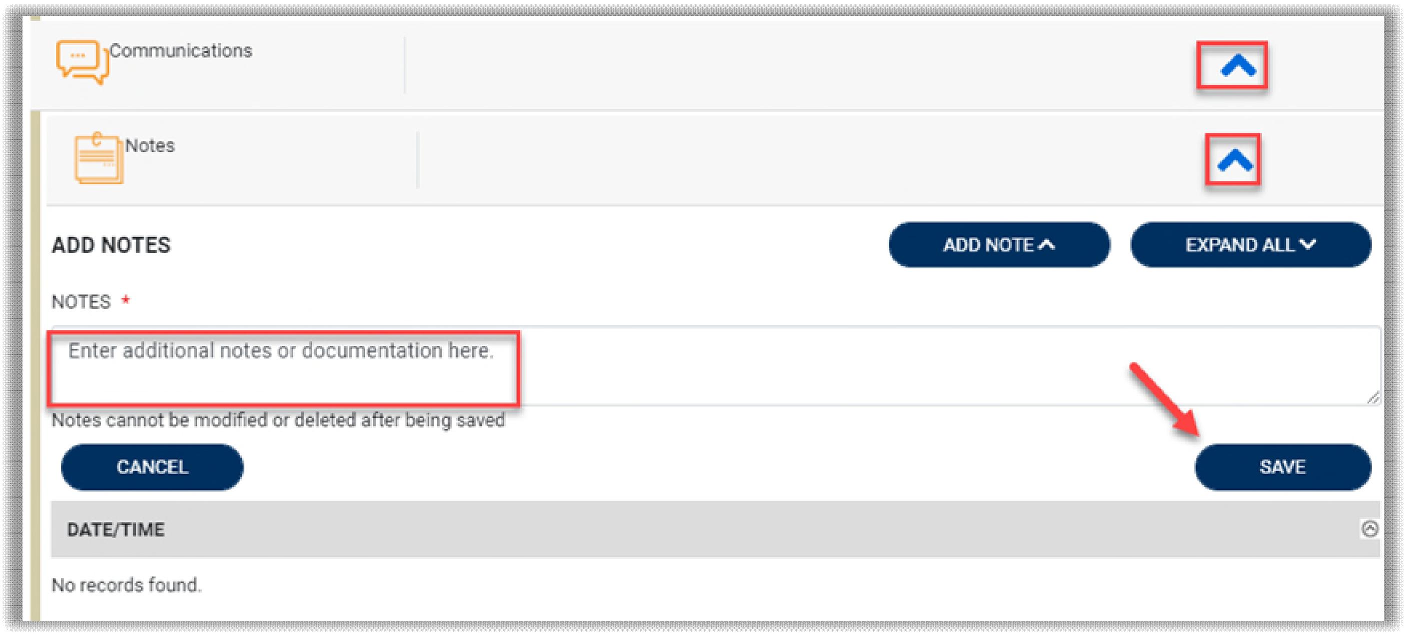
Repeat the above steps until all supporting documentation is uploaded. Then click **UPLOAD**.



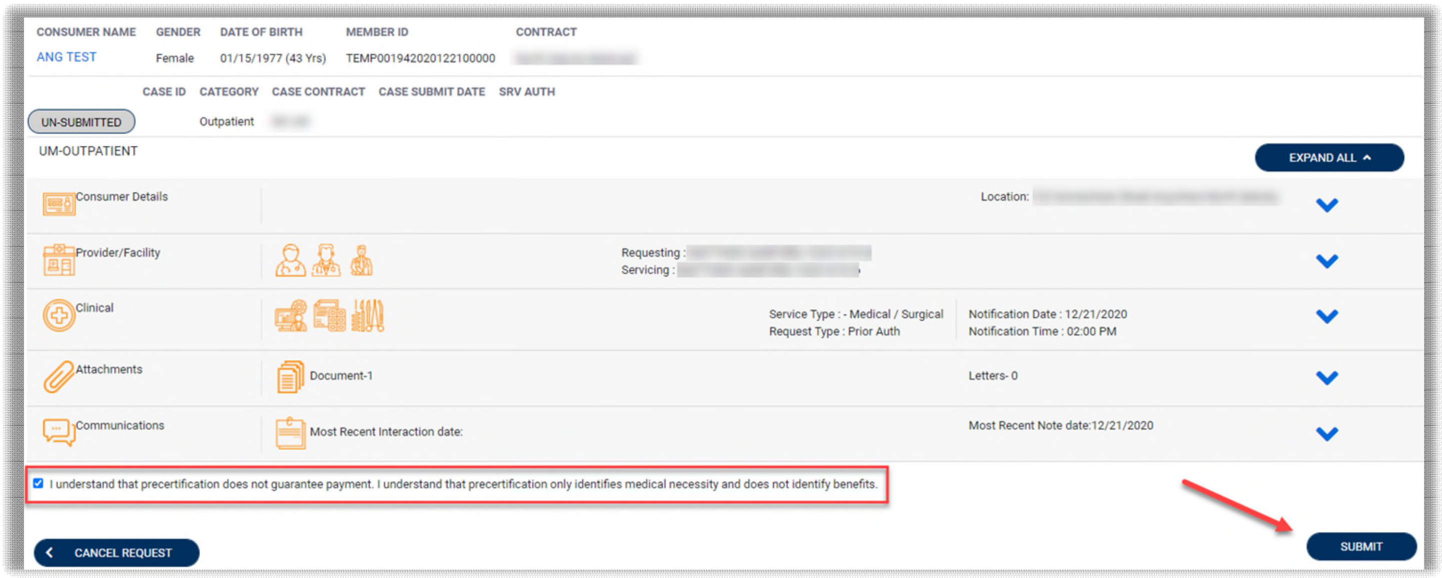
All uploaded documents will be visible in the Documents section for review.



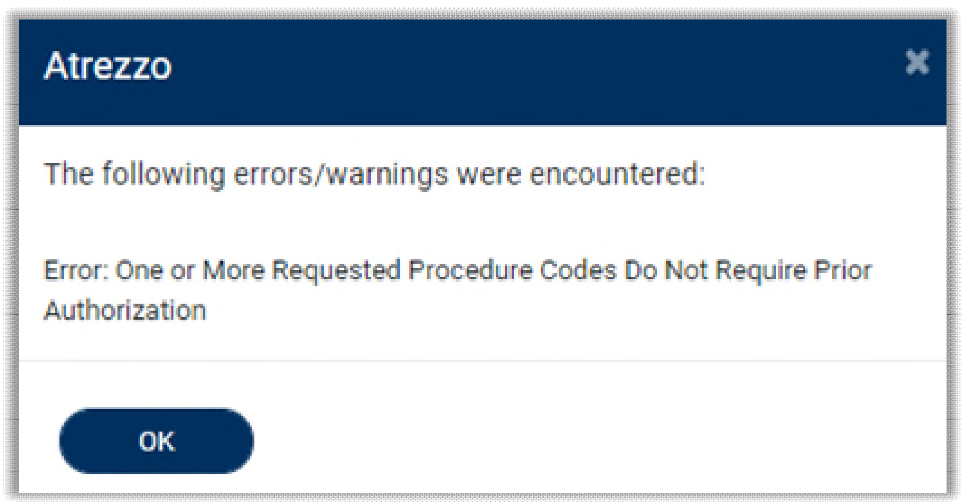
Once all supporting documentation has been added, expand Communications, then expand Notes to enter any additional supporting information or notes for Kepro to review. To add a note, click **ADD NOTE**, then enter documentation and click **SAVE**.



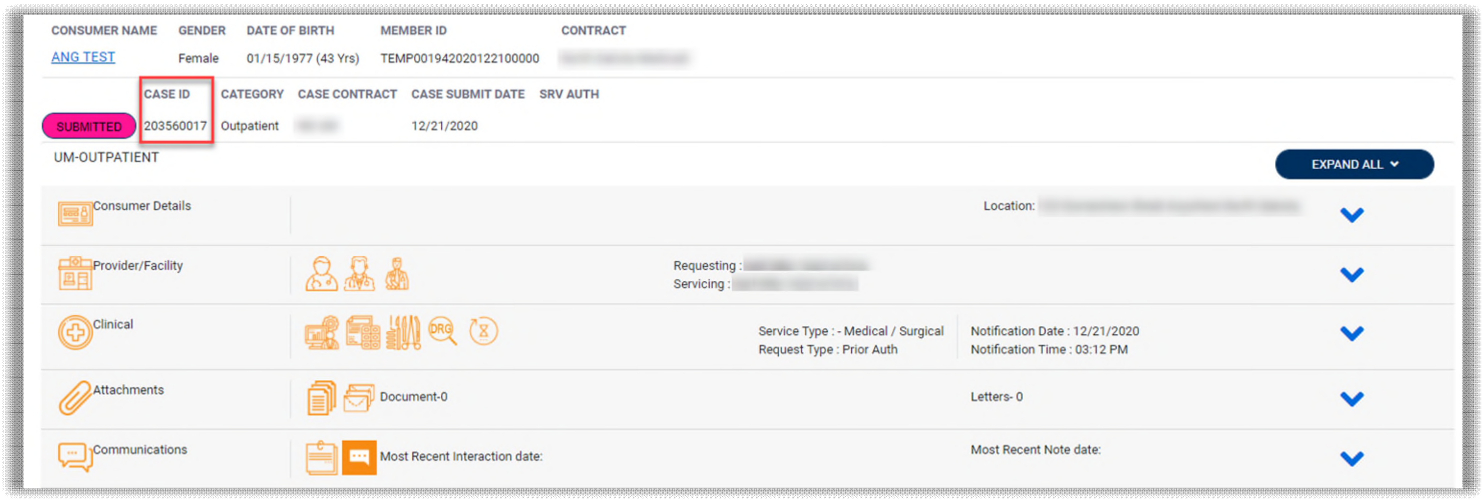
After all information is entered and uploaded, read and check the box of the disclaimer at the bottom of the page. Then click **SUBMIT**.



The case will be assigned a Case ID and the status will change from Un-Submitted to Submitted. If any errors or warnings are found, a pop up will display. Click **OK** to acknowledge.

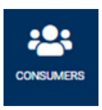


If no errors or warnings are noted, the case will be submitted. A Case ID will be generated which is a unique numerical identifier that can be used for identification purposes and status updates. The Case Page will identify the status along with an overview of the request submitted.



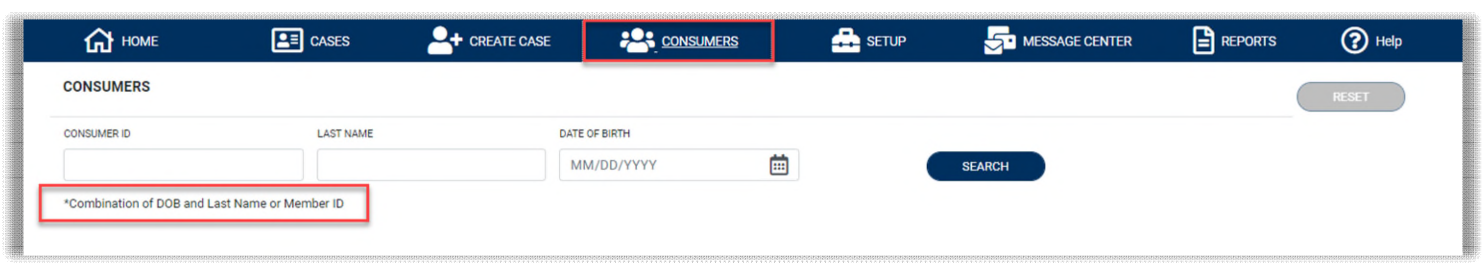
NOTE: For information on the types of messages received, see the [Informational Error/Warning Messages] section under Tips & Tricks.

Consumers

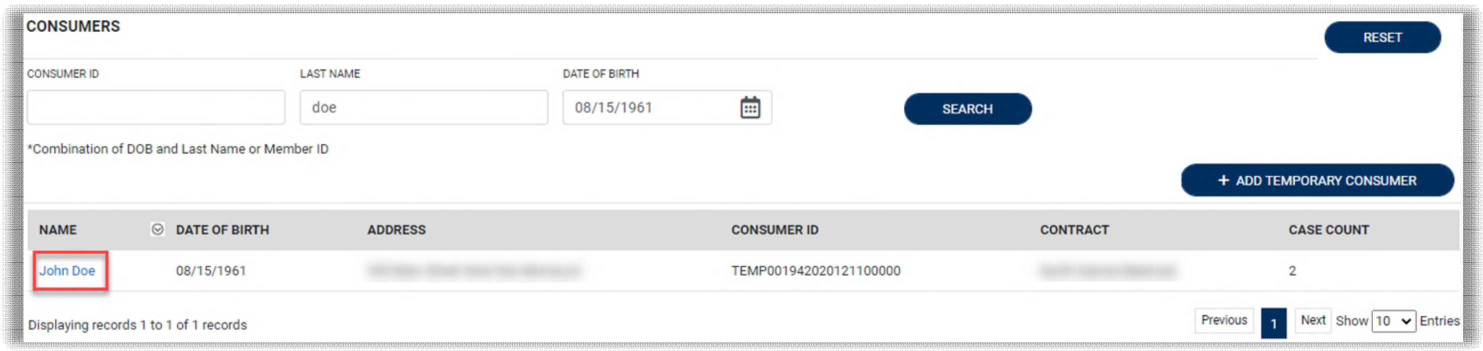


To search by Consumer (Member), click Consumer on the navigation pane. The Consumer default screen will appear providing options to search for a Consumer. This process is the same as searching the Consumer when creating a case.

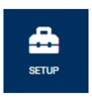
To search By Consumer, enter the required Member information. For results to render, user must enter Last Name and DOB or Member ID.



Search results will render below. To view the Consumer page, click on the Consumers Name which is a hyperlink.



Set Up

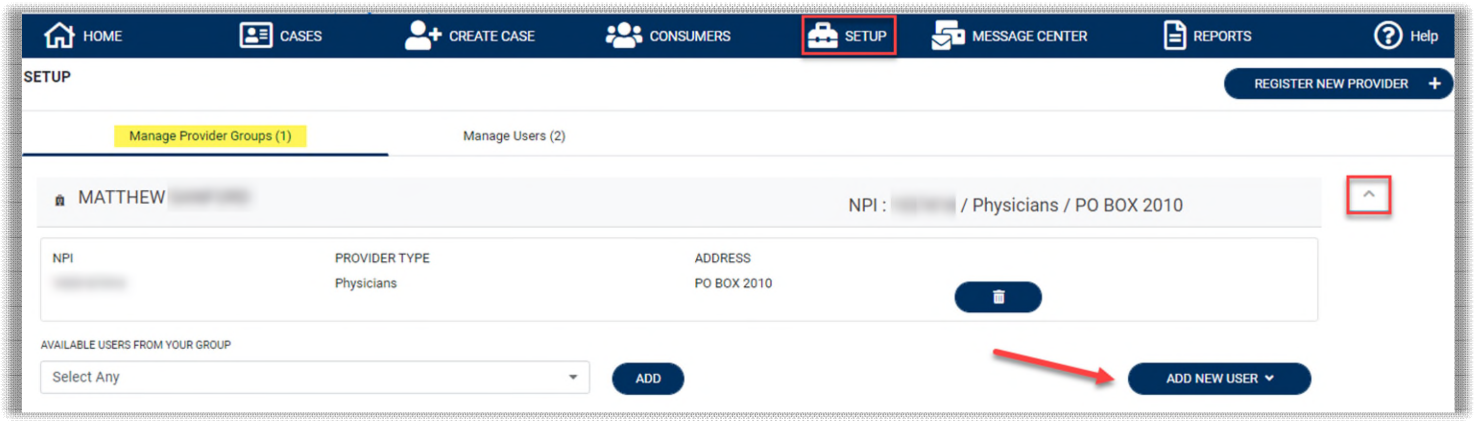


This section will identify the steps for Provider Group Administrators to add and manage additional users within the portal. **Only users set up as Provider Administrators will see this tab.** For all other users, the tab will be hidden.

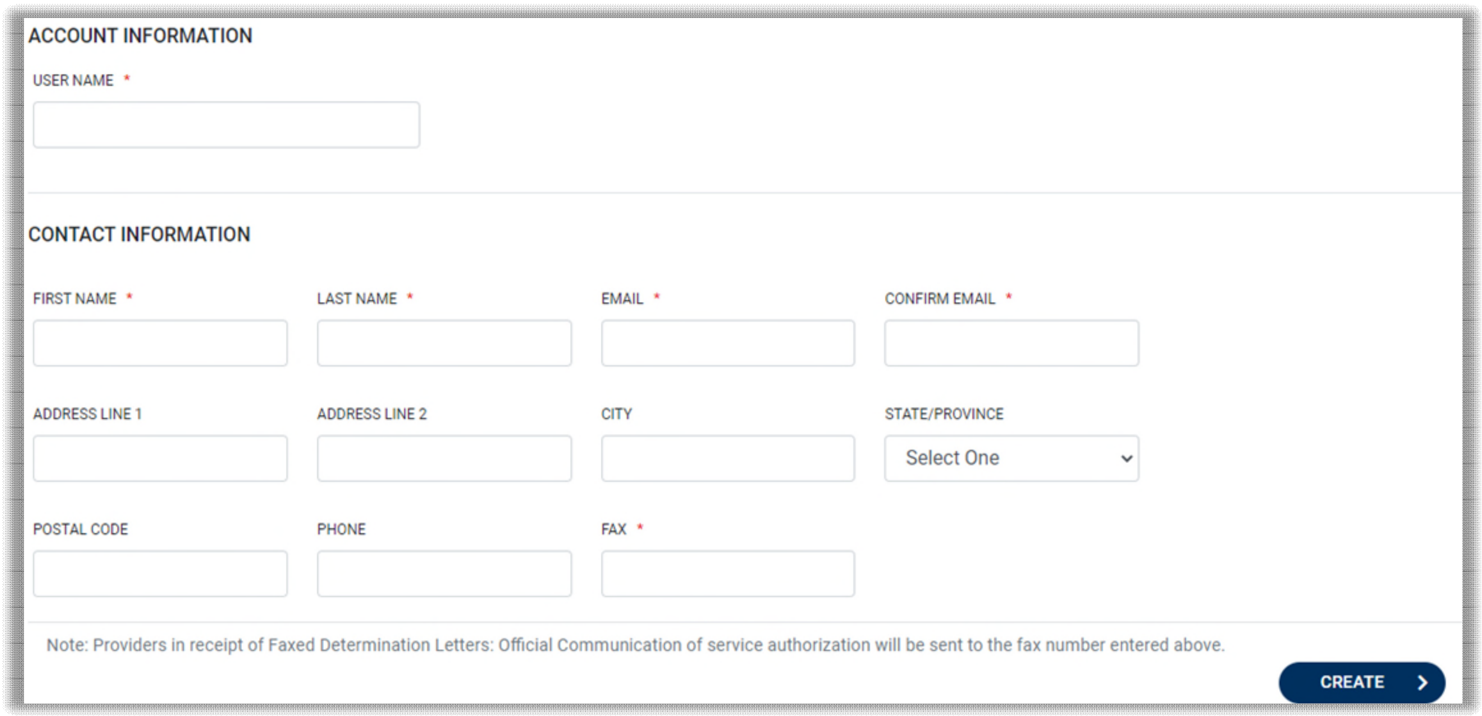
Add New User

As a Provider Group Administrator, users within your facility can be added and managed locally once the group account has been registered.

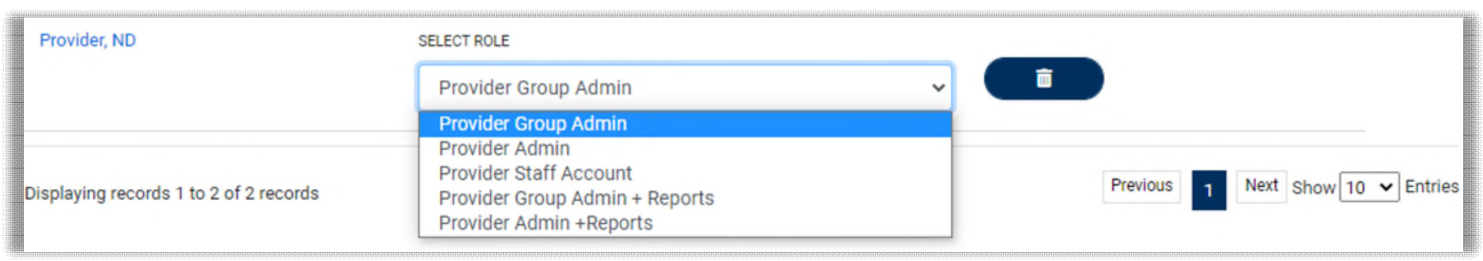
Click Setup in the navigation pane. Always stay within the Manage Provider Groups tab/section to add users. Click the caret in the far right to expand the group section.


HOME
CASES
CREATE CASE
CONSUMERS
SETUP
MESSAGE CENTER
REPORTS
Help
SETUP
REGISTER NEW PROVIDER
Manage Provider Groups (1)
Manage Users (2)
MATTHEW
NPI : / Physicians / PO BOX 2010
NPI
PROVIDER TYPE
Physicians
ADDRESS
PO BOX 2010
AVAILABLE USERS FROM YOUR GROUP
Select Any
ADD
ADD NEW USER

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



NOTE: A new user will receive an email with a link to complete the MFA registration process after the Provider Administrator has created their username. As a new user, you must click the link in the email and follow the MFA registration process within 2 days in order to complete the access request.

From: ATREZZO_DoNotReply@kepro.com
Date: April 15, 2021 at 10:50:41 AM EDT
To:
Subject: Atrezzo - Account Registration

Dear User,

Your Atrezzo user profile has been initiated. Please follow the link below and the instructions on that page to register your account.

Atrezzo Registration
This link will expire in 2 days.

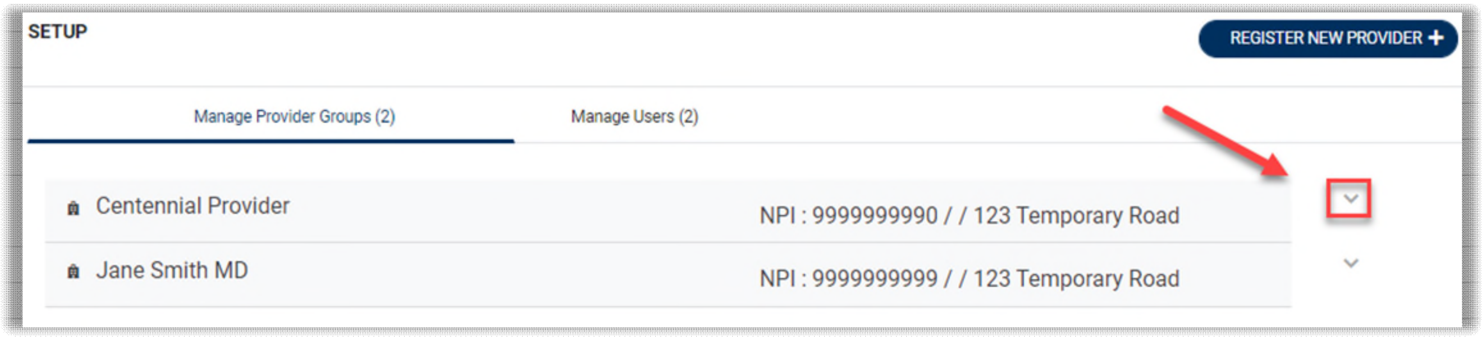
Thank you,
Kepro

Add New Provider Group

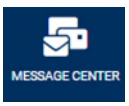
Provider Group Administrators can manage multiple facilities under the same login credentials. After the original account has been created, click **REGISTER NEW PROVIDER**. Enter the NPI and Medicaid ID as the Provider Registration Code. Click **FIND PROVIDER**.

Select the provider to confirm and click **SELECT**.

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.

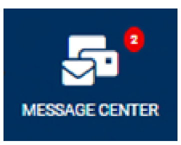


Message Center



This section will identify the steps to view new and unread messages. To send messages, you must be inside a specified case.

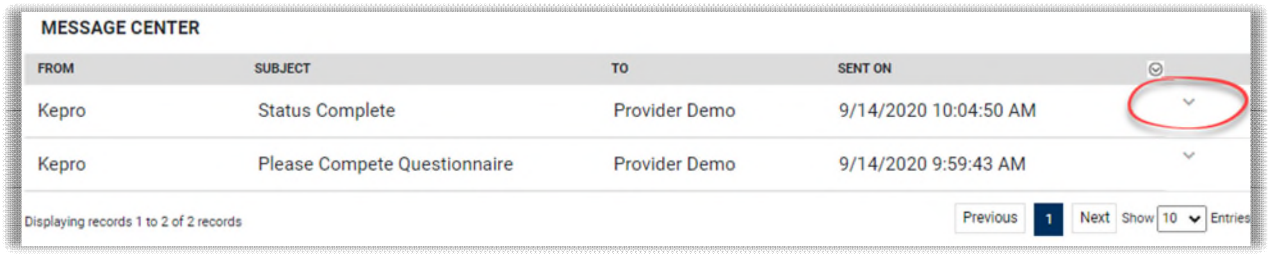
New available messages are displayed in the navigation index menu.



Indicates there are unread and non-responded messages available.

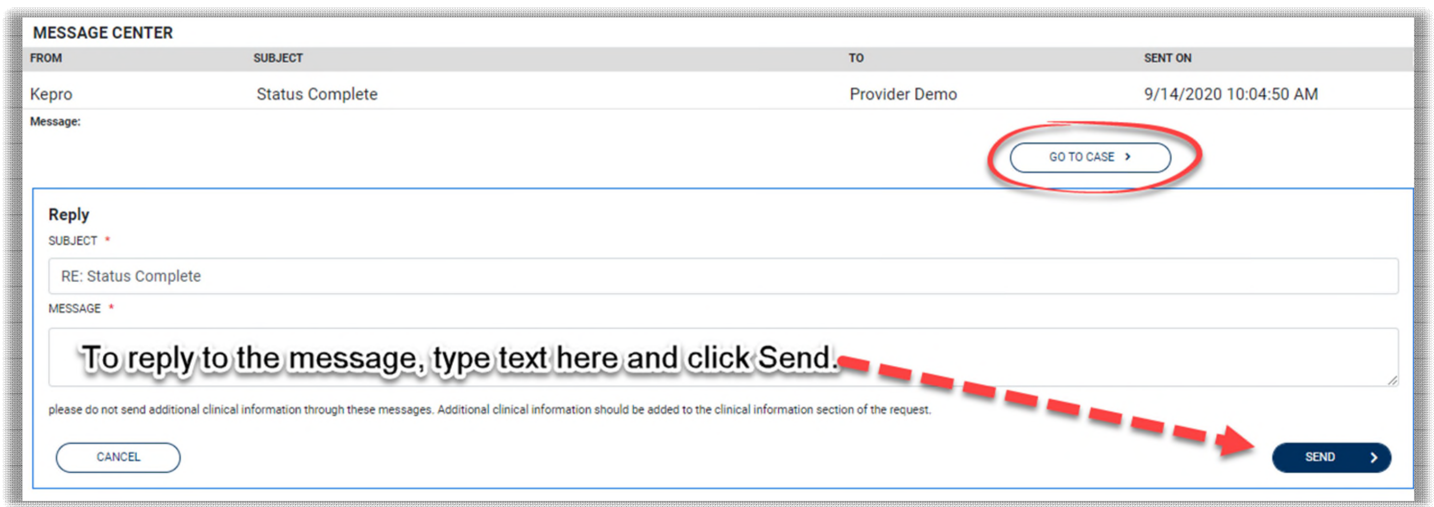
Indicates all messages are read and/or responded; no messages available to view.

Available messages will display in the Message Center.



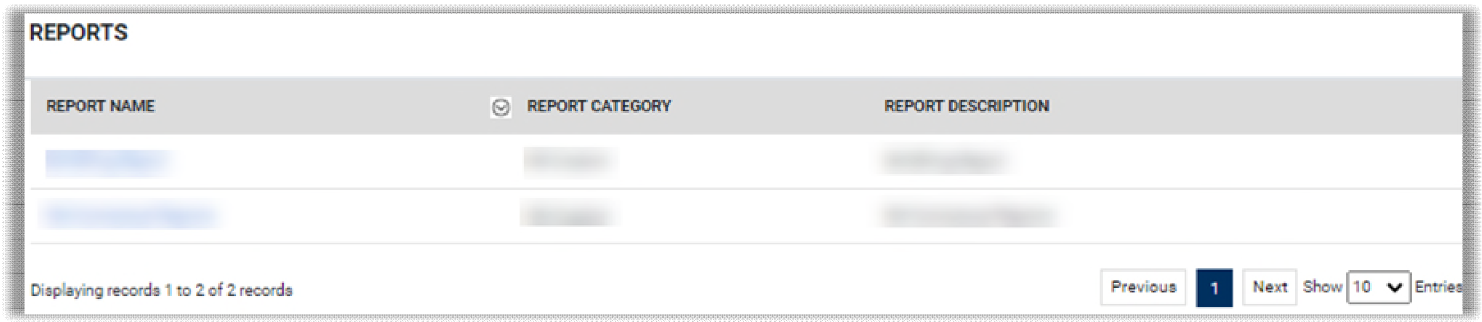
To open/view the message, click the caret in the right had corner of the selected message. To view the selected case, click **GO TO CASE**. You will be directed to the specified case related to the message.

To reply to the message, directly in the Message Center, type text in the Message section, click **SEND**.

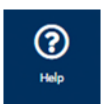


Reports

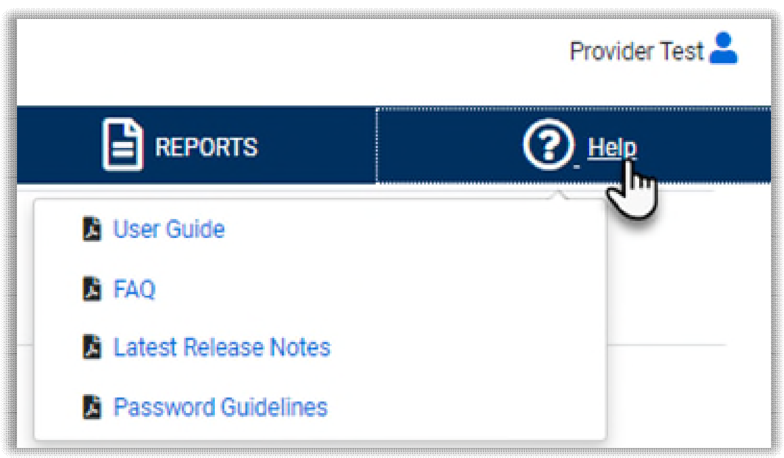
Not all users will have access to reports and availability will vary by user role. Clicking the Reports icon in the navigation pane will open all available reports. The report name will be a hyperlink and open the desired report in a new tab within the internet browser.



Help Guide

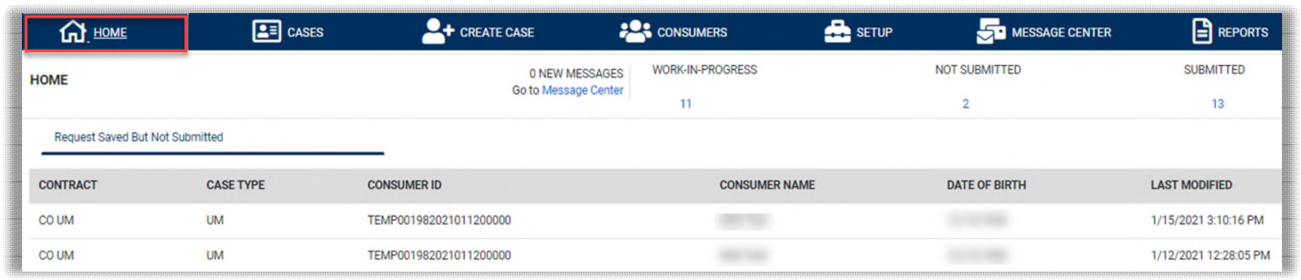


Clicking the Help icon will open a menu of options including the User Guide, FAQ, Latest Release Notes, and Password Guidelines. These items are updated regularly and may change over time.

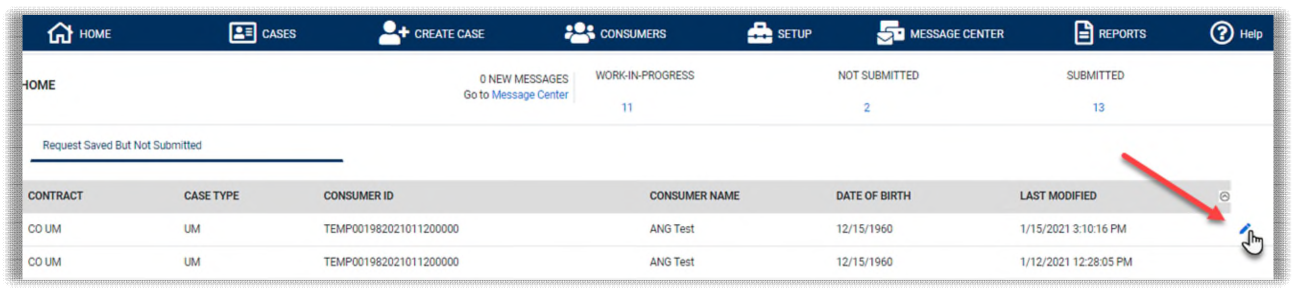


How to Complete a 'Saved But Not Submitted' Request

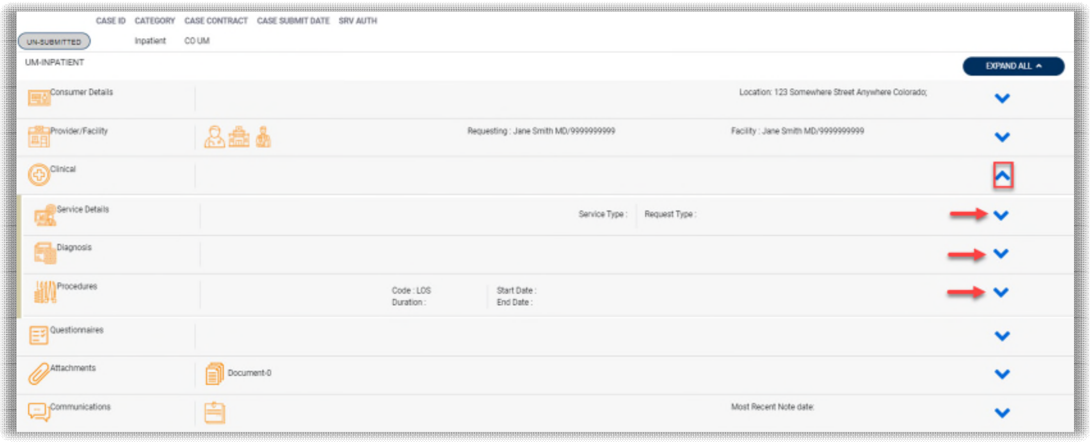
After logging in, the Home page will display any "Saved But Not Submitted Requests". These are requests that have been started, but are incomplete. These are viewable to the submitting provider, but have not been sent to Kepro for review.



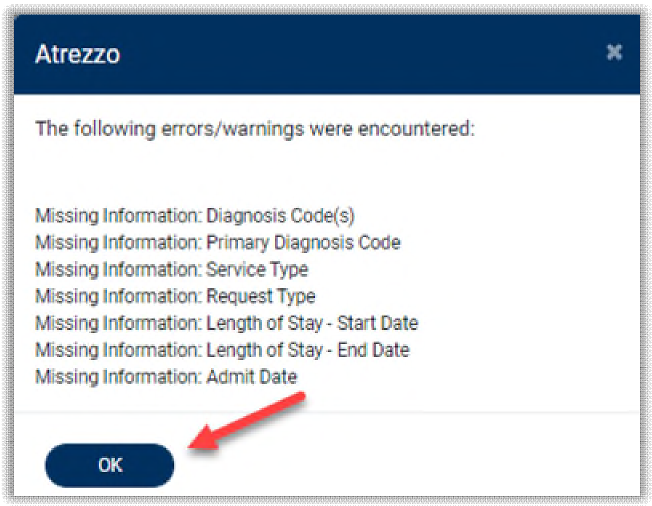
To complete the saved request, hover over the request line and click the edit icon.



The case creation page will display. To continue adding required information, expand clinical and review Service Details, Diagnosis, and Procedure sections to identify information necessary to submit request.



If uncertain what required information is missing, clicking Submit will generate an error/information pop up which will identify what information is missing. Review the pop up and click OK to continue.



The case creation page will display a red exclamation point which will identify which sections required information is missing. Expand each section with a red exclamation point displayed.

Once required information is added, the red exclamation point indicator will disappear and case can be submitted. Additional information is needed; refer to other sections for more information on attaching clinical documentation, creating note documentation, and other options.

Once the case has been submitted, it will no longer appear on the Home page under "Saved But Not Submitted Request".

How to View Status of a Submitted Request

Once a request has been submitted, there are a different ways the status can be reviewed. A status check can be completed with a Case ID or Consumer Name and DOB. Below you will find step by step instructions for each method.

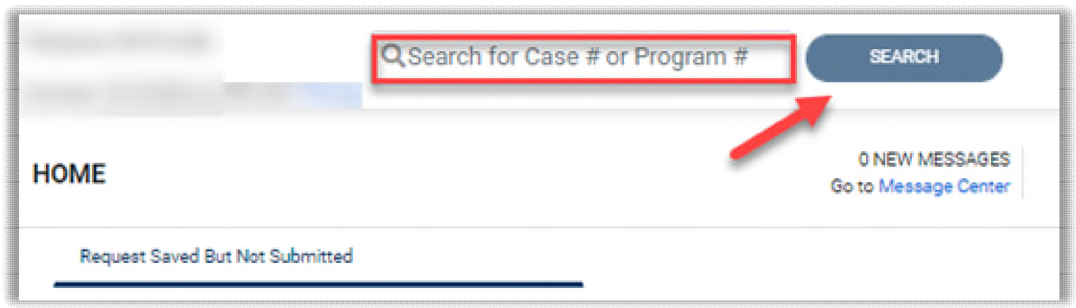
The UM program status options are color coded for quick and easy identification.

Status	Description of Status
UN-SUBMITTED	Unsubmitted identifies a case that has been started, but has not been completed or officially submitted. This case will not have an associated Case ID until it is submitted. Once all information is entered, the case will move to Submitted or Insufficient Information if any required information is incomplete or missing.
SUBMITTED	Submitted identifies a case that has been submitted, but has not yet been reviewed. Once the case is assigned to a clinical reviewer, the status will change to Active Review.

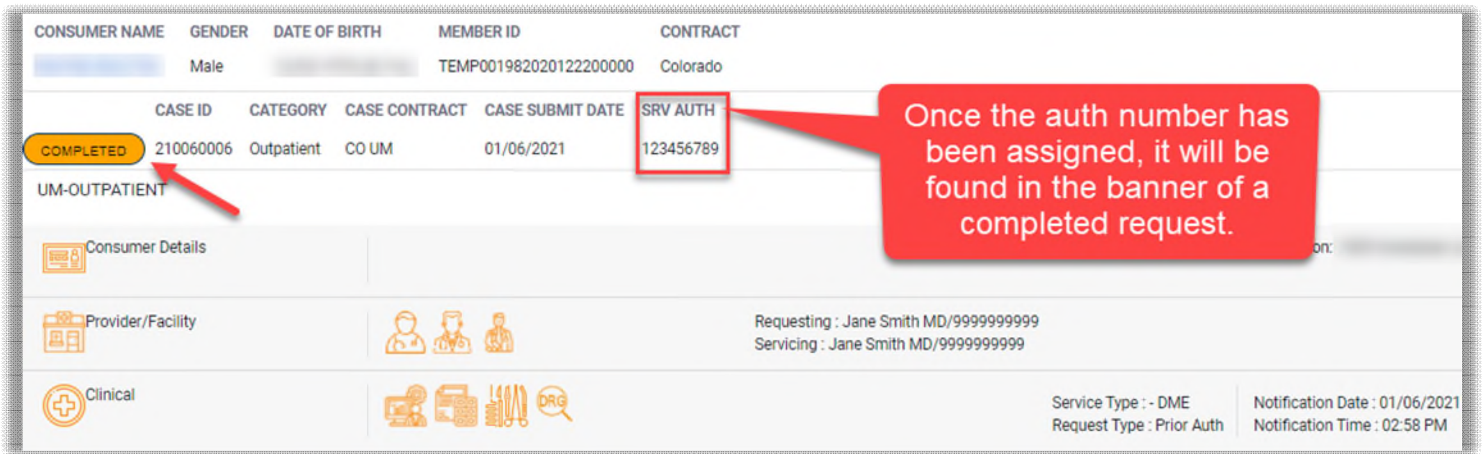
COMPLETED	Completed identifies a case that has been submitted, reviewed, a determination made, and is complete. A Complete case status does not identify the outcome of the clinical review (ie. Approved, denied, partial approval, etc).

View Status by Case ID

To view the status of a request using a Case ID, you will enter the Case ID in the search bar at the top of the screen and click Search.



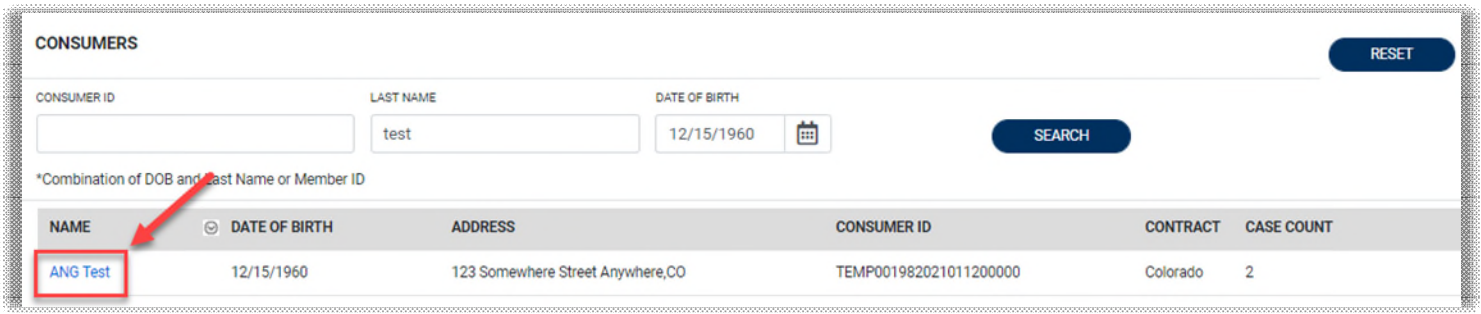
The case page will display and provide the status at the top. For cases that display as Completed, you can review the determination letter by following the steps in the section titled: How to View a Determination Letter.



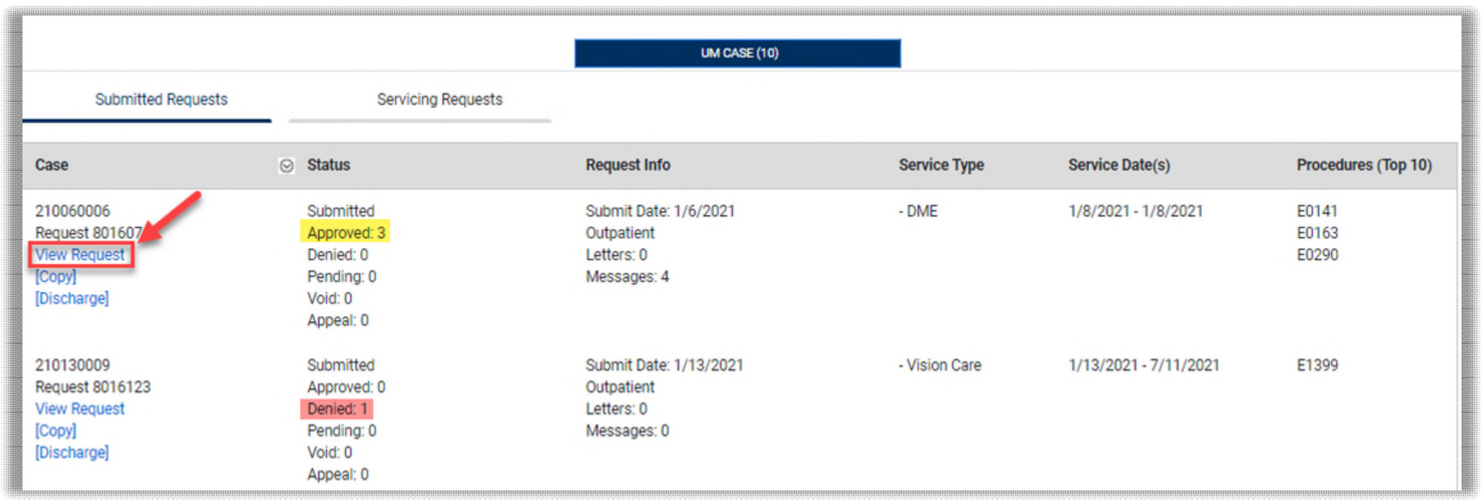
View Status by Consumer

To view the status of a request by Consumer, you will search by the individual name. Click Consumers in the navigation pane and enter Consumer ID or Last Name and Date of Birth, then click Search.

The result will render below. Click the Consumer Name to view available requests. The case count will identify how many requests have been submitted.



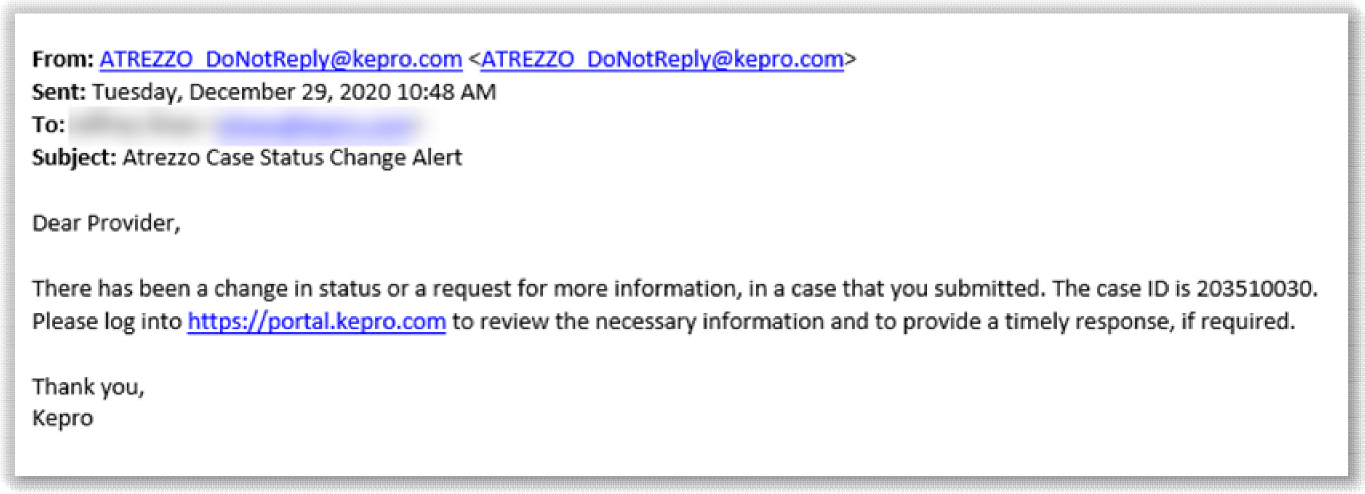
The member requests will display. To view the details of the request, click View Request. For a quick snapshot of the request, you will see the number of codes Approved, Denied, Pending, Void, or Appeal. If a determination letter is available, follow the steps on How to View a Determination Letter.



Email Notification

When a change has been made to a submitted request, you will receive an email notification to the email address provided when setting up the user account. The email notification will provide the Case ID to direct you to the specified request. No PHI will be included in the email for security purposes.

Below is a sample of the email you would receive when a change is made to a submitted request.



From: ATREZZO_DoNotReply@kepro.com <ATREZZO_DoNotReply@kepro.com>
Sent: Tuesday, December 29, 2020 10:48 AM
To:
Subject: Atrezzo Case Status Change Alert

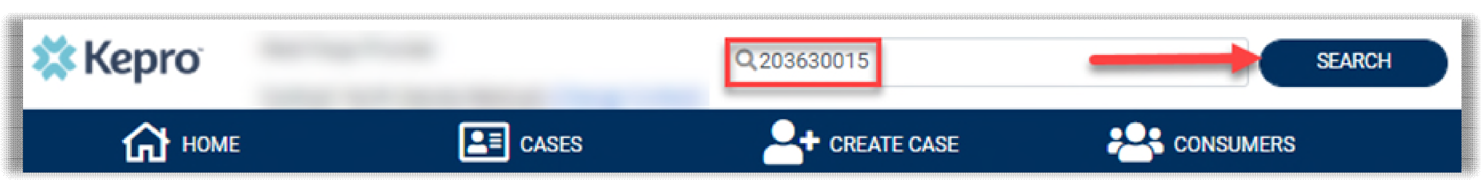
Dear Provider,

There has been a change in status or a request for more information, in a case that you submitted. The case ID is 203510030. Please log into https://portal.kepro.com to review the necessary information and to provide a timely response, if required.

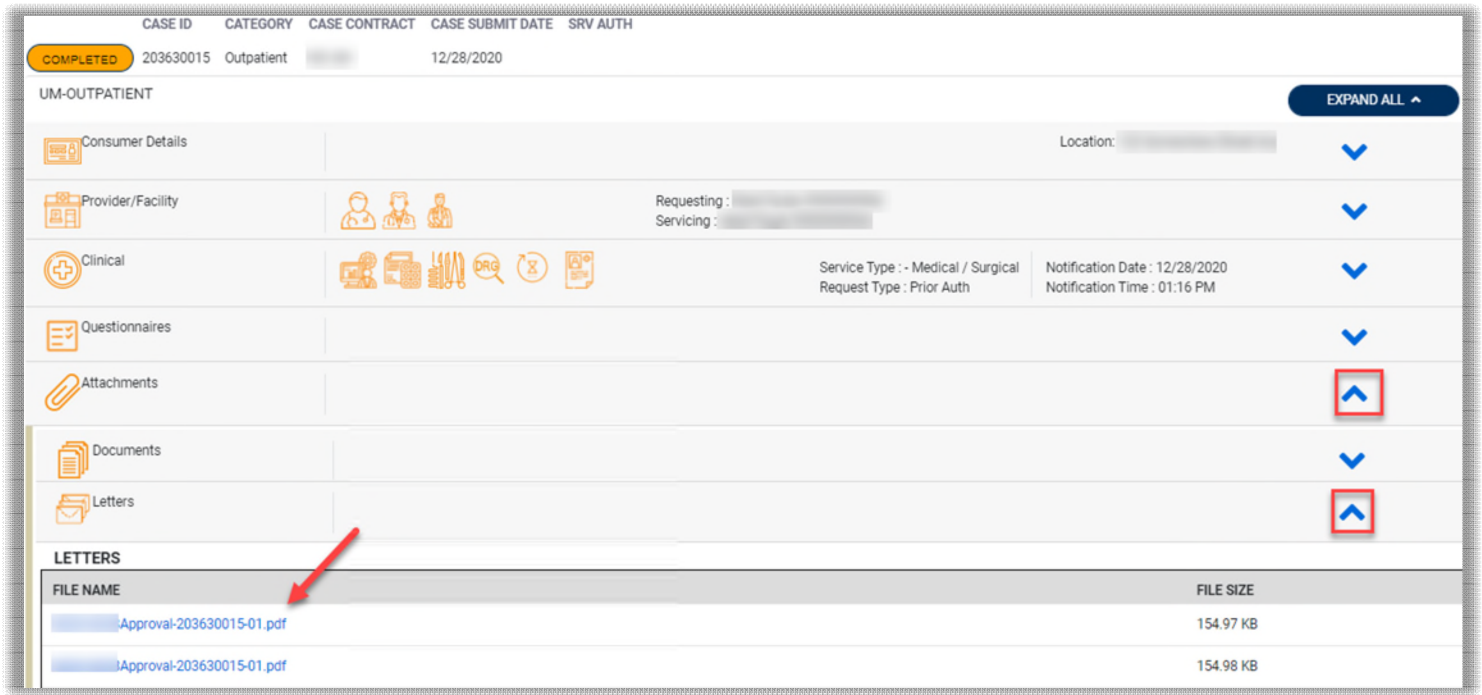
Thank you,
Kepro

How to View a Determination Letter

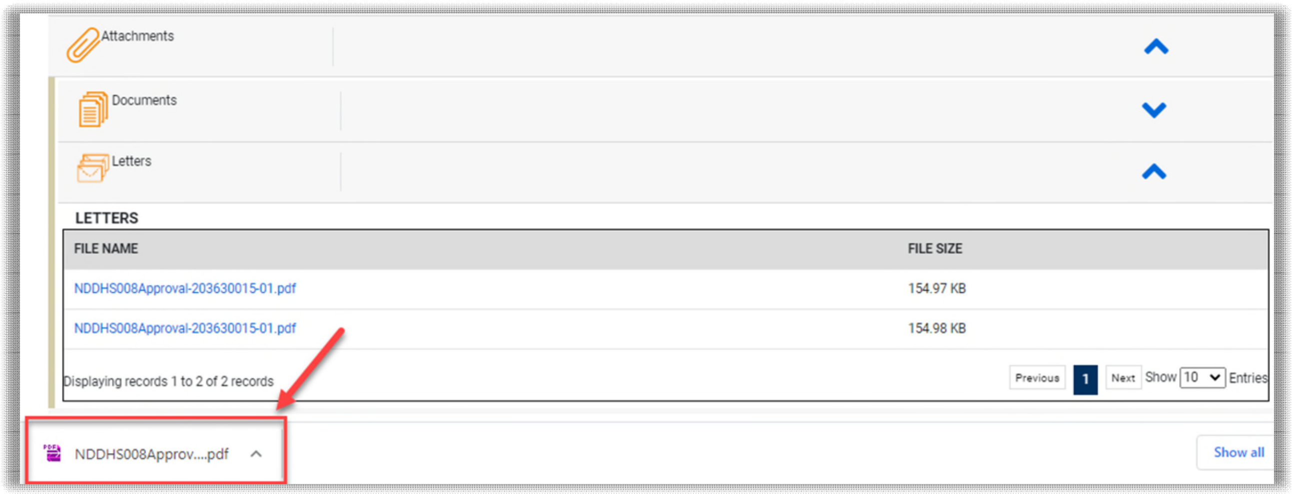
This section will identify how to view a determination letter once a decision has been entered. When a change has been made to the submitted request, you will receive an email notification. The email notification will provide the Case ID to direct you to the specified request. To view the determination letter, enter the Case ID once logged into the Provider Portal.



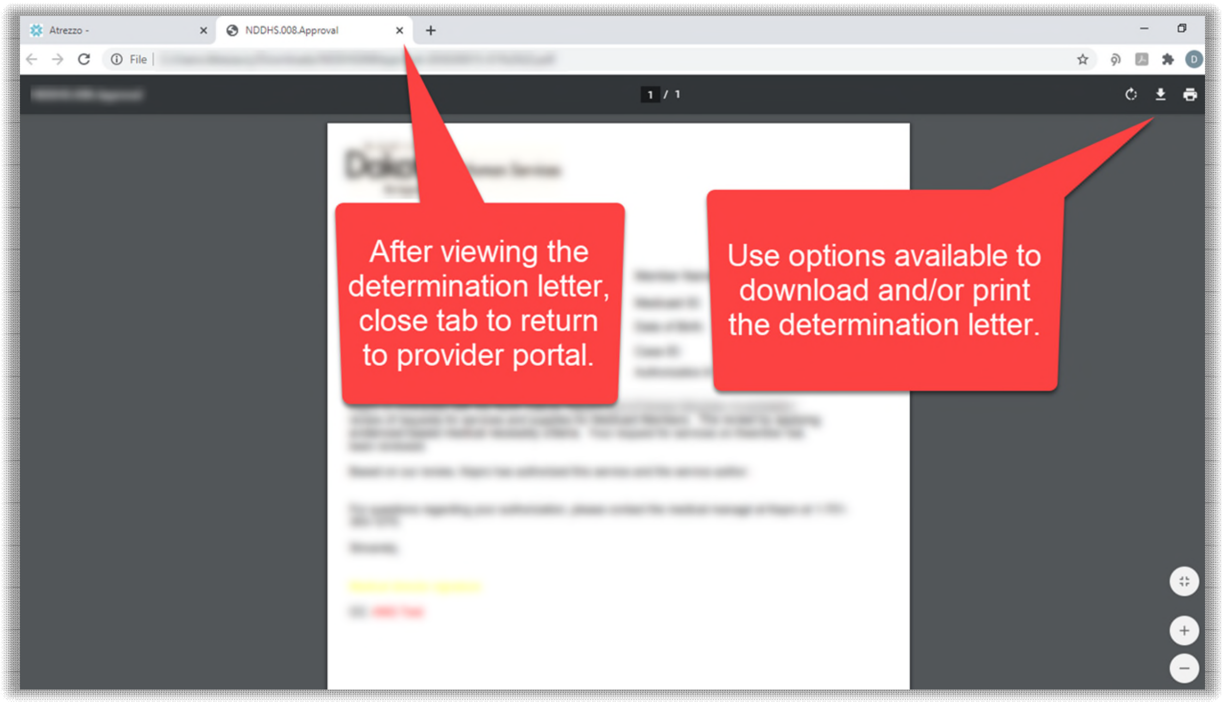
Once the case displays, expand Attachments, then expand Letters. The available determination letters will be hyperlinks.



To view the determination letter, click the file name hyperlink. The file will open outside of the Provider Portal for viewing, downloading/saving, and/or printing if needed. In most instances, the file will be visible in the bottom banner, you will need to click the file to view the document.



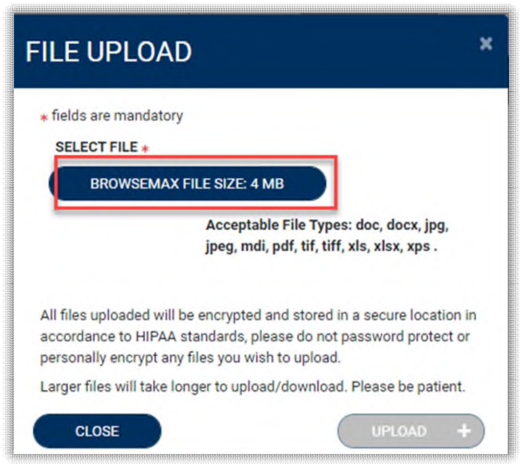
After clicking link, the document will be viewable in an internet browser tab separate from the Provider Portal. Once view is complete, close tab to return to the Provider Portal.



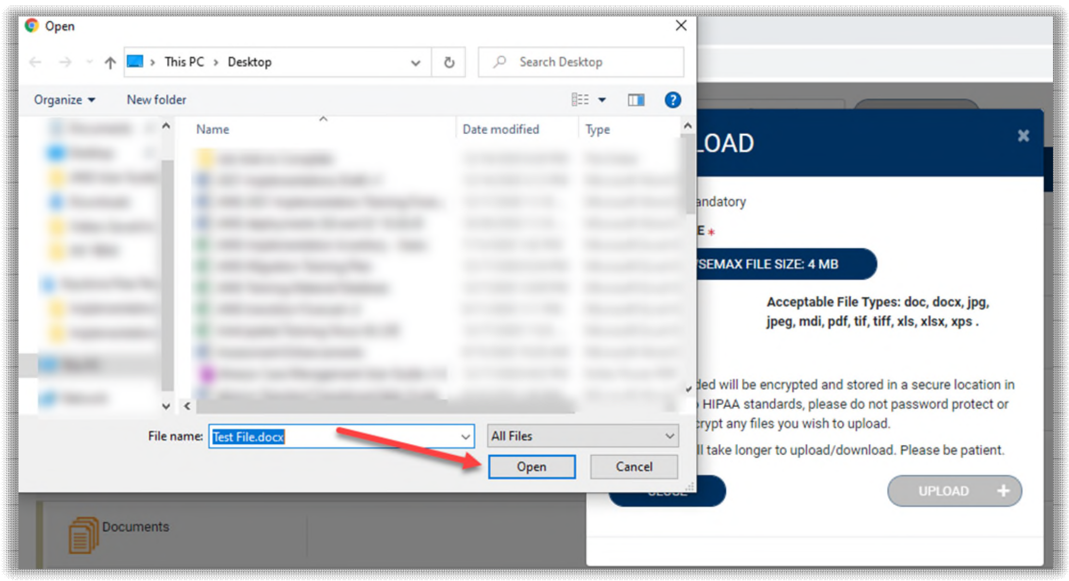
How to Add Additional Clinical Documentation

If additional supporting documentation needs to be uploaded after the request has been submitted, you will need to return to the specified request.

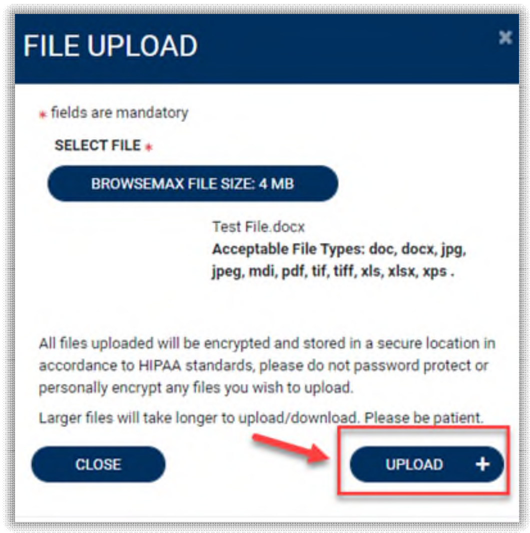
Within the request, expand attachments, expand Documents, and then select **CLICK HERE TO UPLOAD FILE**. A pop up will display, click Browse to search for the supporting documentation.



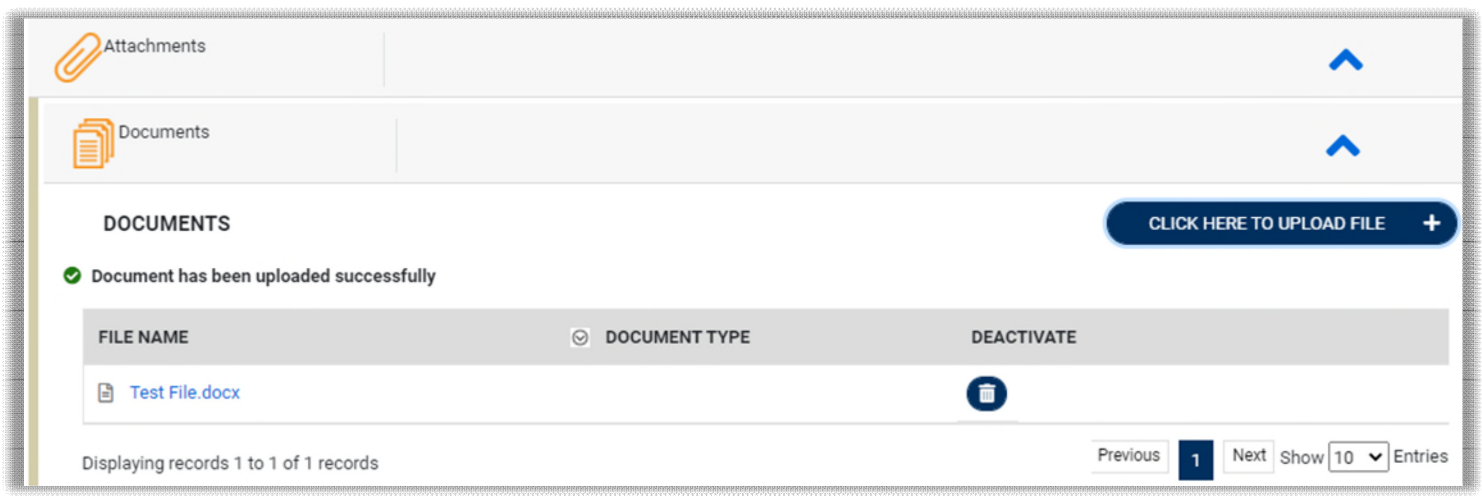
Select the file and click Open.



Repeat the above steps until all supporting documentation is uploaded. Then click **UPLOAD**.



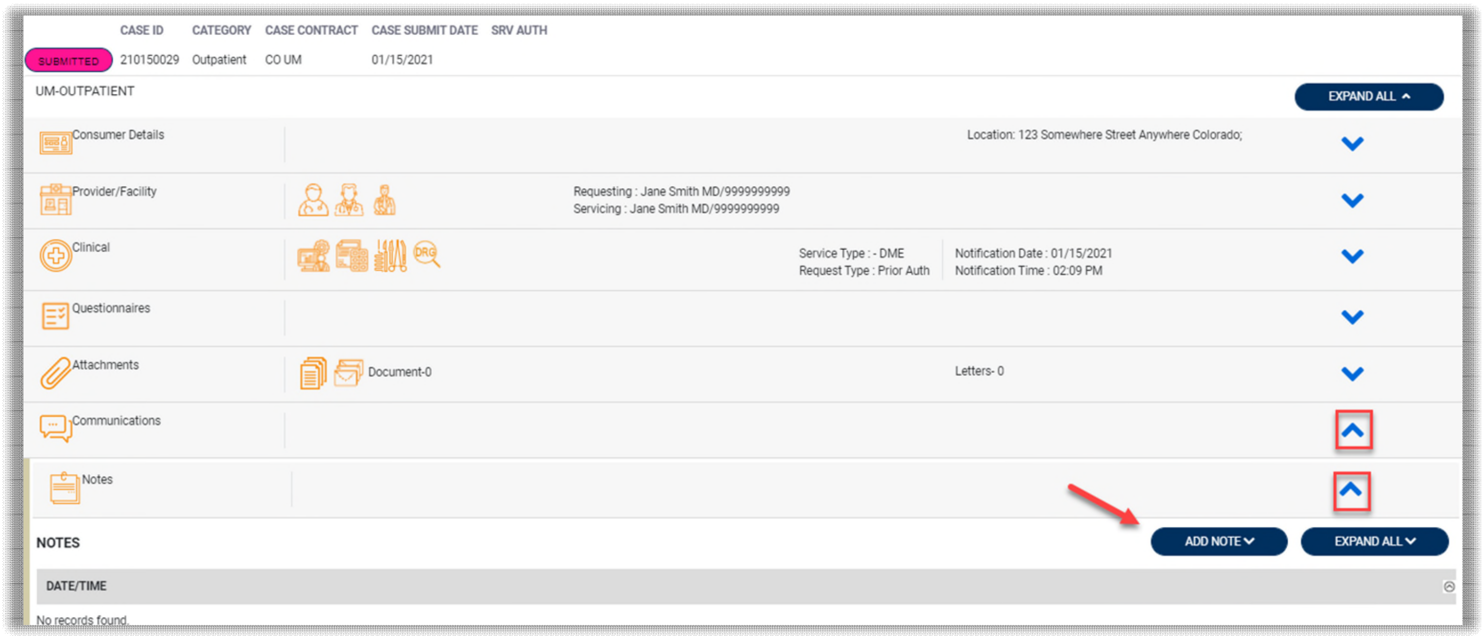
All uploaded documents will be visible in the Documents section for review.



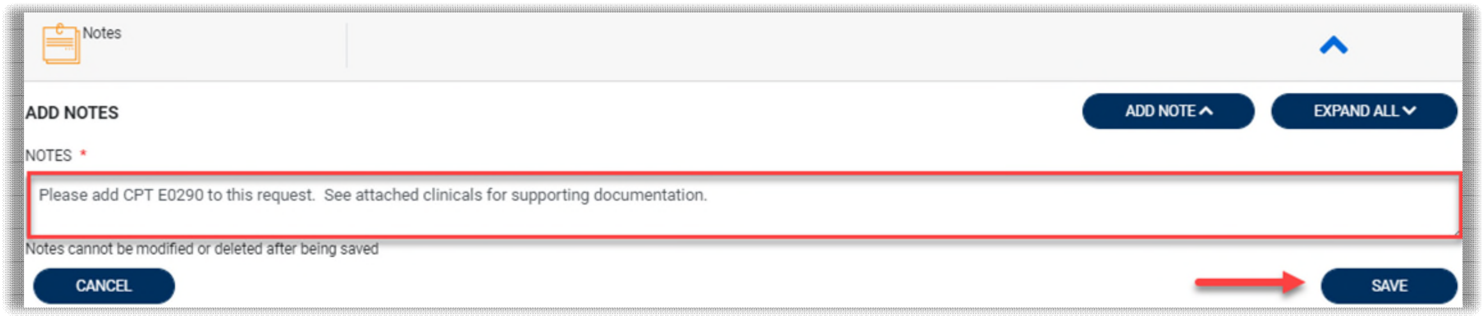
How to Add Revisions to a Submitted Request

Once a request has been submitted, you will not be able to make changes or additions manually. You will need to add a Communication – Note to the submitted request and Kepro will update the request for you.

To make revisions or add an additional code, you will need to open the request. On the request page, expand Communications, then expand Notes and click **ADD NOTE**.



Once the note section expands, enter a note with what information is requested (i.e. what code(s) to add, what needs to be changed). Then click **SAVE**. This will send a note to Kepro to make the revision(s) to the submitted request.



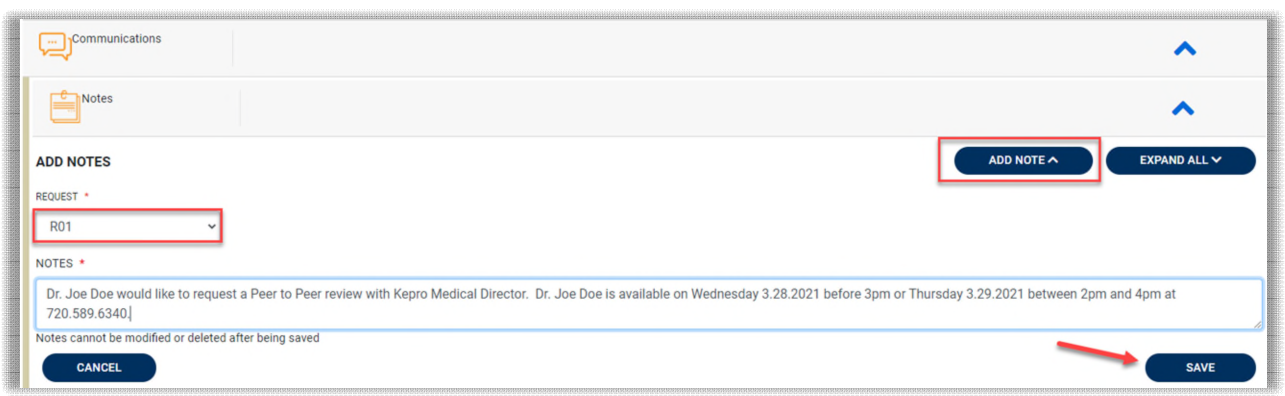
Provider Options Following Adverse Decisions

This section will outline the steps necessary to request a peer-to-peer review, a reconsideration, or member appeal for an adverse decision to a submitted review.

How to Request a Peer-to-Peer Review

After an adverse decision, an ordering provider may request a Peer-to-Peer review within 10 business days from the date of the medical necessity adverse determination. To request a Peer-to-Peer review in the provider portal, go to the specified case. Expand Communication, expand Notes, click ADD NOTE, select which request the Peer to Peer is being requested, and then enter a note requesting a peer-to-peer review. The note must include:

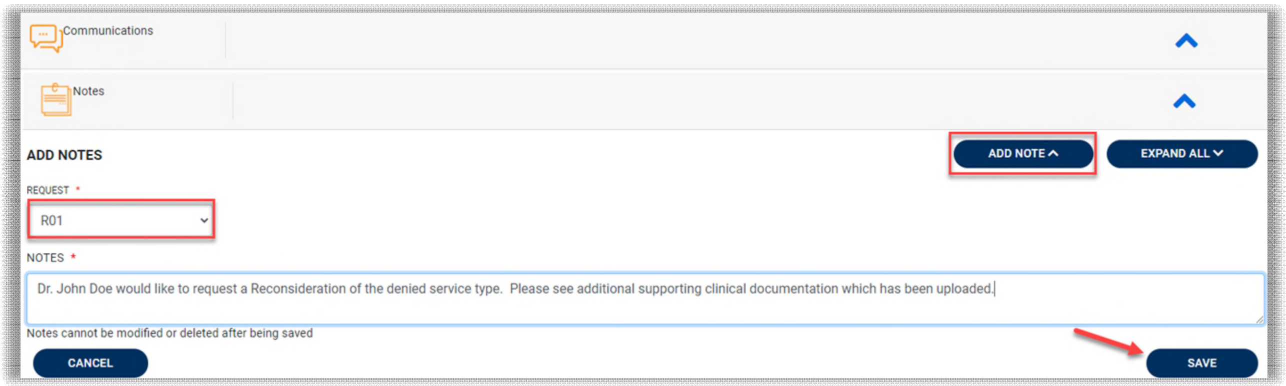
- Requesting providers name and contact information
- A minimum of 3 preferred dates and times for the Peer to Peer conversation.



NOTE: Any supporting clinical documentation not already submitted to the case should be uploaded at this time.

How to Request a Reconsideration

A Reconsideration request must be submitted to Kepro within 10 business days of the initial denial. To request a Reconsideration, go to the specified case. Expand Communication, expand Notes, click ADD NOTE, select which request the Reconsideration is being requested, and then enter a note requesting a Reconsideration. Additional supporting clinical documentation must be uploaded to the provider portal.



How to File an Appeal

A member has the right to file an appeal on any PAR determination, and their Appeal Rights will be included in their determination letters. A member will file an appeal with the Office of Administrative Courts, and the Department will be notified.

Before an appeal can be submitted, the provider may request reconsideration and/or peer-to-peer. A Provider may request a reconsideration and/or P2P at the same time that a member is filing an appeal. It is not required in any way that a Reconsideration and/or P2P must be requested and completed in order for a member to request an appeal.

All member appeals should be submitted in writing to:

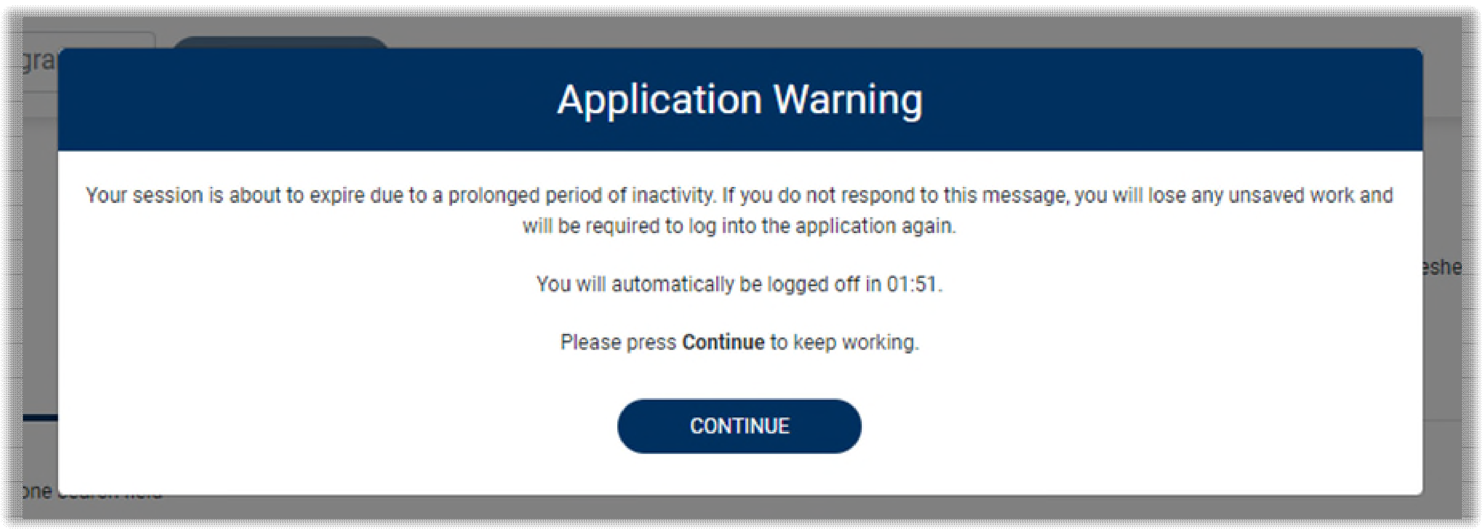
Office of Administrative Courts
1525 Sherman Street, 4th Floor Denver,
Colorado 80203
Phone: 303-866-2000
FAX: 303-866-5909

Troubleshooting Tips and Tricks

This section will identify a few troubleshooting tips and tricks to help make navigation of the system easier.

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. As long as 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.

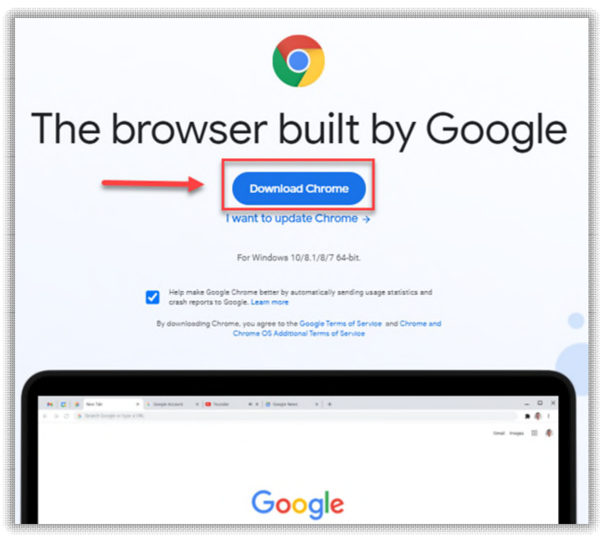
Internet Browser

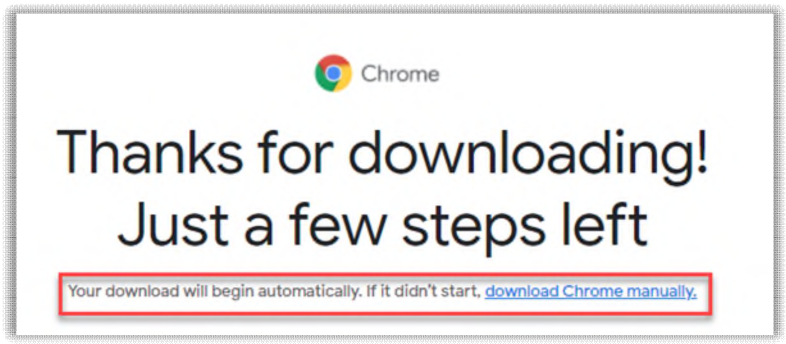
Atrezzo is configured to function in all internet browsers; however, Chrome is best. Chrome users will have the best system and functionality performance over other browsers.

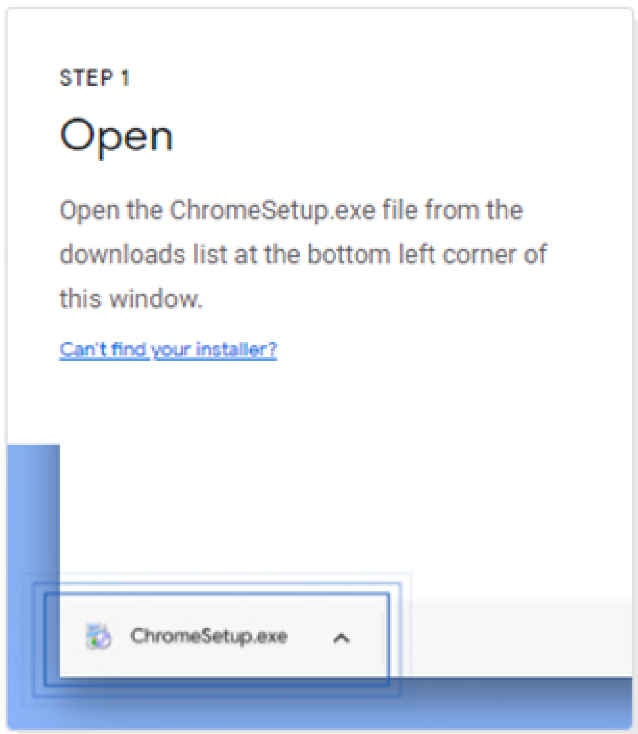
How to Add Google Chrome to Computer

Google Chrome is the preferred internet browser for Atrezzo. A user can do a search for “Google Chrome Download” or click [Download](#) to access the available link.

On the Google Chrome Download page, click Download Chrome, then follow the prompts.



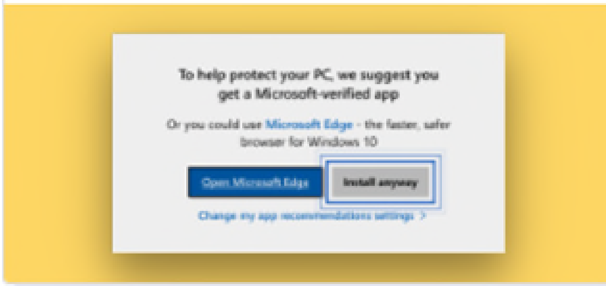

Chrome
Thanks for downloading!
Just a few steps left
Your download will begin automatically. If it didn't start, download Chrome manually.


STEP 1
Open
Open the ChromeSetup.exe file from the downloads list at the bottom left corner of this window.
Can't find your installer?
ChromeSetup.exe

STEP 2

Allow

If promped, click **"Install anyway"** and **"Yes"** on the system dialogs.

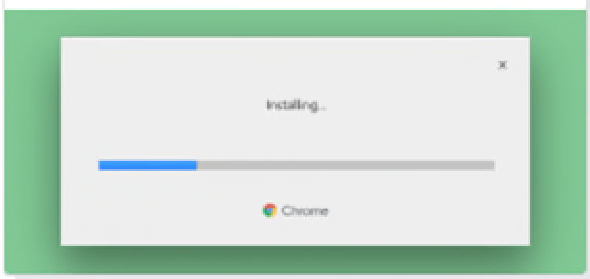


STEP 3

Install

Wait for the installation to finish. Chrome will open automatically when it's done.

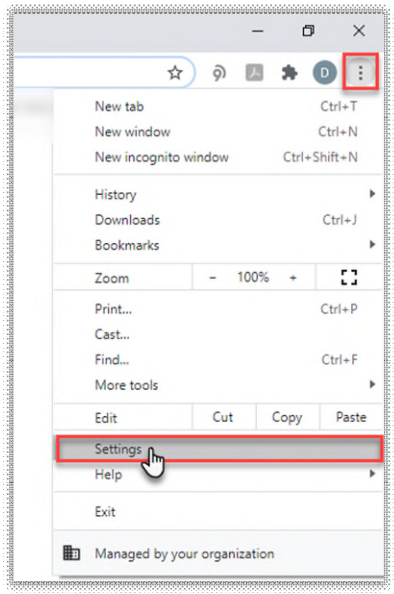
Need more help?



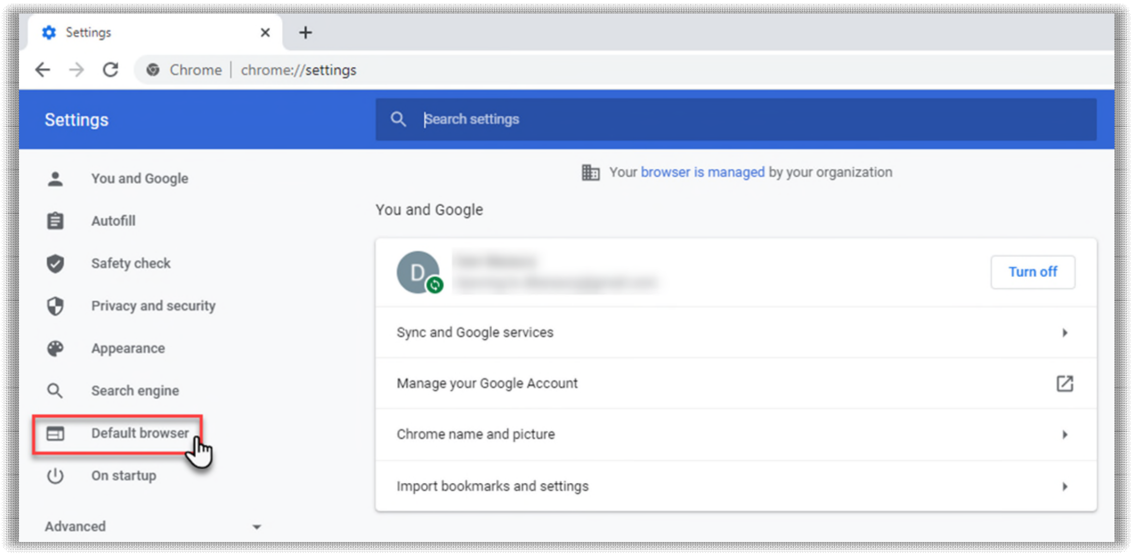
Once installed, Chrome can be set as a default browser for all applications, or you can simply create a shortcut for Atrezzo within the application.

How to set Chrome as Default Browser

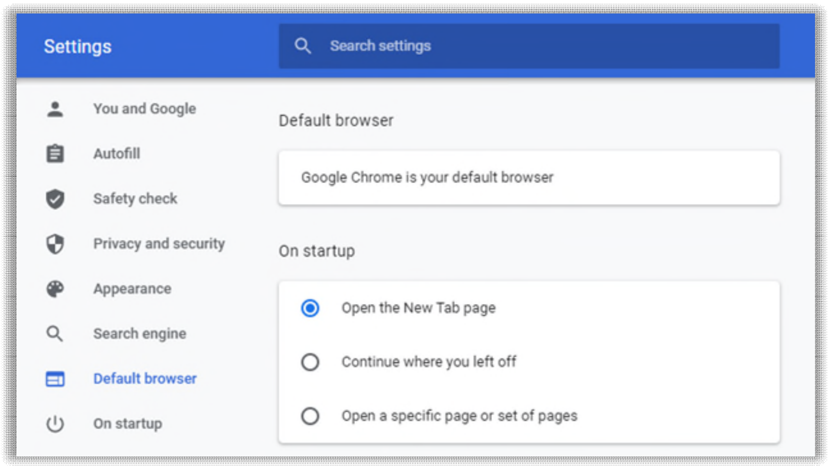
To set as the default browser, click the in the three dots in the upper right-hand corner, the select Settings from the drop down.



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

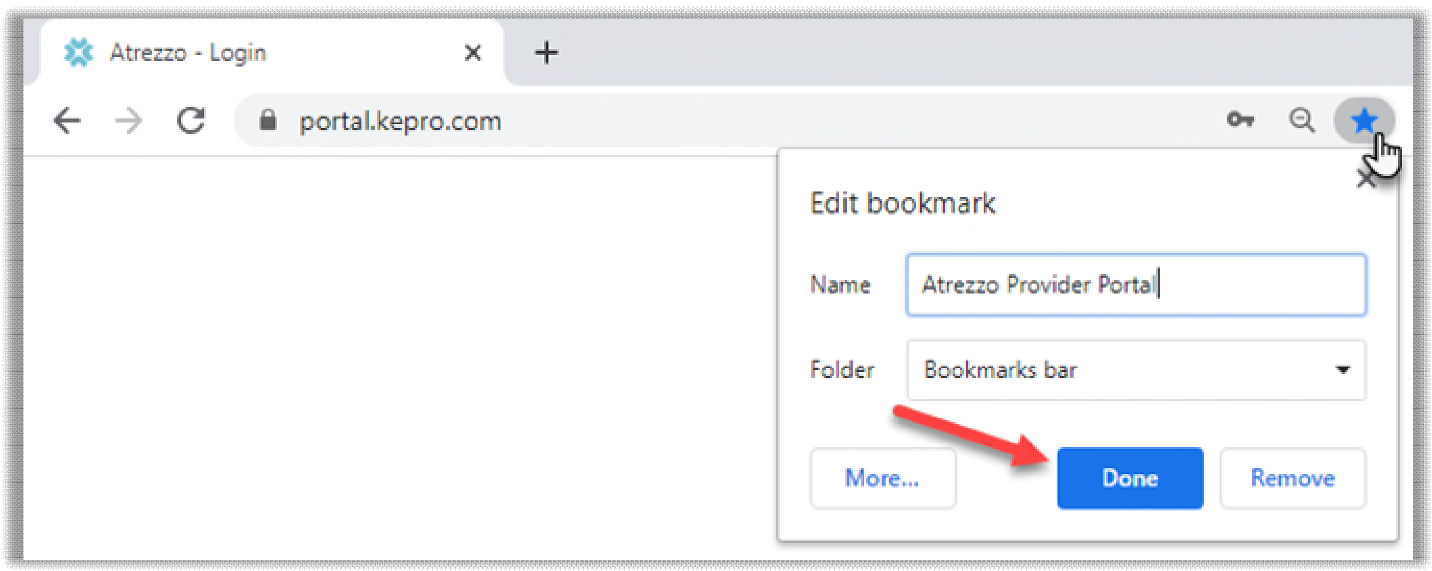


Select Make Default under Default browser.



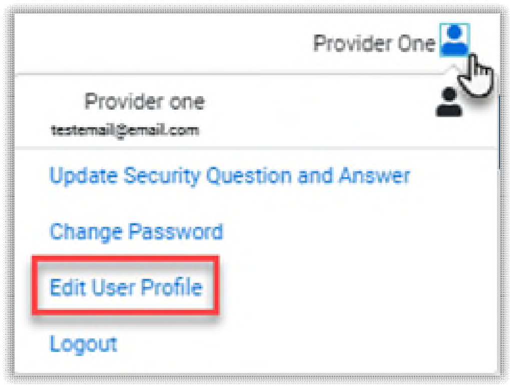
How to Set Atrezzo Bookmark in Chrome

After entering the Atrezzo portal link 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.

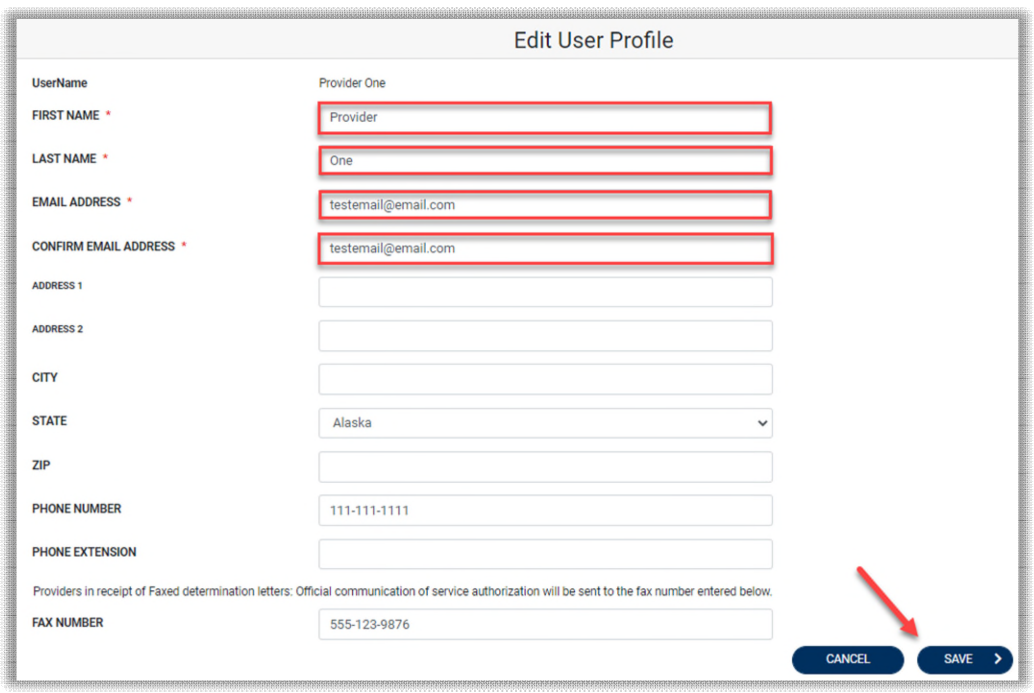


Updating User Profile

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**.



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.
Missing Information	The case cannot be submitted until all required information is submitted. Review specific fields with missing information, then click Submit.

How to Access Technical Assistance

For technical assistance, please contact the **Colorado Customer Support Center at 720.689.9630 or via email** COproviderissue@kepro.com**.**