Using Qualitrac – Transcript of Recording

Slide 1

Hi everyone. Welcome to our provider portal training webinar. Today I'm going to take you on a walk through our Qualitrac provider portal.

There are screenshots of each page for you to have as a reference and we'll be posting this recording into the long-term services training page and I have a link to that later in the slides.

My name is Stephanie Wilson. I work at Telligen as an implementation specialist, and I will be leading the training today. I can also be a resource, if you have any questions about the system or how to get registered to have an account in the system.

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For today's agenda, we're going to walk through how to submit a review through the portal.

We'll also talk about how to view the status of requests and any outcomes.

I will walk you through how to submit an extension, which you may currently call continuation of services or continued stay.

We'll talk about how to submit a first level appeal which you may call a reconsideration.

And finally, how to reopen a case that is in a technical denial status.

At the end, I'll provide some details on where to go for assistance and then we'll answer as many questions as we can.

We'll also be posting an FAQ document on the website so that you can check on any other questions that were asked or get those answers.

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So, let's start by walking through the process of submitting review through the portal.

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Starting March 1ˢᵗ, case management agencies will begin submitting reviews through the portal. If you have not submitted the online registration packet to set up the authorized officials for your organization, you can do that at any time.

Once registered, we'll send out usernames and links to authorize those accounts starting the week of February 22nd.

And the website to find the portal registration packet and training information is listed here and that's that long term services and supports training site/page on the Colorado Department of Health website.

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If you follow that link it will take you to the long-term services and supports training page and once you're on this page you'll want to scroll down towards the bottom.

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Until you find the Telligen Qualitrac Review and Provider Portal panel.

You can click on that panel to open it, either on the name or on the plus sign.

And once you open that panel and access it, you'll see the authorized official registration link and you'll see any of our training information that's posted out there and you'll also see the link to actually take you to the Qualitrac's portal.

That link will be available on March 1st and it should be called Telligen provider portal.

Once you click on it, it will take you to the login screen.

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So, this is what our login screen looks like. You'll enter the username that you were assigned in was emailed out to you.

You'll also enter the password that you established when you activated your account.

And then you'll click on that sign in button down below.

The first time that you log in, you'll see a question below the sign in button that says need help signing in.

This will assist you, the first time that you tried to login to see if you need any help or having troubles getting your password established. After the first time that link will say reset password and you can click on that link to reset your password.

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One thing I want to point out is that we do not want you to bookmark the login page.

We've developed multiple layers of security around this page, to make sure that the person logging in is who they say that they are.

And if you bookmark the actual login page, the next time you go to it you'll get a bunch of errors and you won't be able to login. So, I'll show you the page that you can bookmark and a couple more screens, but we just want to point out, please do that bookmark this page.

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Like I said, you'll be able to reset your password at any time. The system will force you to reset your password every 90 days and again you'll click that reset password link.

And that will open our reset password model or this box that you see here you'll enter the username that you've been assigned, and then click the reset via email box.

What that does is the system will send an email to the email address that's associated with the username that's been entered in that box. That email will contain a link and you can click that to reset your password.

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So, once you're actually logged into the system, the first page that you'll land on is what's called our homepage and it looks just like the screenshot I have here.

And this is the page that you can bookmark. If you want to bookmark this that every time you click on that it will take you to our login page.

It'll let you login and then you can get to our homepage and without running into those errors and those problems that you'll have if you bookmark the login page.

So, you'll notice on this page that we have a care management box and Utilization Management box and then our portal bar is across the top.

The training today is going to focus on that portal bar across the top and then the Utilization Management box on the right-hand side.

We do have some clients that use our system that do care management or what we call health management, disease management, health coaching, that kind of stuff.

So, that's why you see the care management box there. You guys will more or less be able to ignore that since everything that we'll be doing in Colorado will be utilizing the Utilization Management pieces of the system.

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So, we'll start off with the portal menu bar, this is the bar across the top of the screen and this bar will be available to you, no matter where you are in the system.

So that Qualitrac logo that's on the left-hand side. You can click on that, it will always take you back to our homepage.

To the right-hand side is a magnifying glass. If you click on that, it will give you our search options, so you can either start a Member Search or a Case Search from that magnifying glass.

The icon next to it with the three lines indicates our task queue. And if you have ever any tasks that come back to you, such as a Request for Information tasks which we'll talk about later in the training, you'll be able to find that task and start it from the task queue.

The next icon is the circle, with the question mark, and this will take you to our knowledge center.

And in the knowledge center, we have user guides. We have tip sheets on using the system. FAQs on the system. Different things like that.

All of the information in the knowledge center is specific to the Qualitrac system itself, so any of these Colorado trainings that we've done will be available on that long term services and support website. Just the information specific to Qualitrac itself is found in our knowledge center.

And then the last icon there, the little circle with the person looking in it, is where you can find and manage your profile. So, if you need to update your phone number, your email address, things like that, you can do that on the My Profile page.

The system does send notifications out to you if there's a change in the status of the review and your reset password email, both of those come through based on the email that's associated with your account.

So, if your email does change, please go into this My Profile section and update that to make sure that you always get those notifications, you're able to reset your password, things like that.

And then the logout button is also available in that blue drop-down arrow next to your My Profile icon.

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In the Utilization Management box, you have a couple of the same options, so that start tasks button will take you to the task queue.

The Search button will give you the option to start either a Member Search or a Case Search.

So again, same things there in the box, as you can find up above in the bar.

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We're going to start by searching for a member. A Member Search is a way you can do almost everything that you need to do in the system. This is where you will start the whole process to submit a new review so that's where we're going to start with the training.

So, you can either click on the search from the magnifying glass up in the bar or you can click Search in that Utilization Management box.

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And that will take you to our Search page. On our Search page, you have two options to search for a member. You can either use the member ID and date of birth or you can use the member first name/last name and date of birth to search for a person in the system.

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So, for the member ID and date of birth, you'll enter the member's Medicaid ID/social security number in that member ID box, and you'll enter their date of birth and click the blue Search button.

Once you click Search, everything does have to be an exact match. So, if you don't receive any results from the search, you may want to check and make sure that all those numbers are entered correctly and then try that search again.

Slide 16

Same thing with member name and date of birth. You'll enter that member's first name/last name and date of birth and click the blue Search button.

Again, it does have to be an exact match, so if there's a hyphen it in their last name, enter a hyphen in the last name box that you're doing for their search and click that Search button.

We do get a regular feed from the state on their members so hopefully for most of these reviews you'll be able to search and find the member that you're looking for to start that review process.

But we do know that sometimes there can be different versions of names and things like that, so please try your best to search and actually find a person and make sure that the information you've entered matches what you have.

Slide 17

If there is a match, the system will return that member's information below your search fields.

And again, you can see here on the screen, that we have that member ID, last name/first name, date of birth, and gender listed here. You can click on any of those blue fields to actually get to the Member Hub to start a new review or to check on the review for that member.

Slide 18

If the member does not exist, you'll get our member not found alert and then you'll have the option to add a member. And you can add a member, by clicking on the orange add member button. Right above the arrow on the screen.

Slide 19

And the system will open our add member page.

A thing to note, whenever you're working in Qualitrac system, if there is a field where we require information to be entered in that field there will be a red asterisk next to that data field name. So, you'll notice there under

demographics that first name, last name, client date of birth, and gender all have red asterisks by them. So, all of those fields will need to be filled in before you'll be able to actually create this member.

Underneath those fields are the identifiers that says social security number and member ID. You'll notice that both of those have red asterisks.

So, if you have both of those, you can fill them in there.

If you only have a social security number, because the person does not have Medicaid or maybe their Medicaid hasn't started yet or they haven't received their information, you can just enter the social security number. And then you can click the small box next to the N/A in the member ID box.

Once you have that information in there, you can finish by filling in the contact information fields and then click the green submit button to actually create that member in the system.

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So, whether you found a member to search, or you've created them to the add member button.

Once you have that information in there, the system takes you to what's called our Member Hub. Again, our system is very member centric.

So, everything that you have access to view about that member will be contained in the Member Hub.

So, you'll notice the members name, their member ID, date of birth is all available there across the top and then underneath that is their Utilization Management box that will contain any information about any reviews that have been submitted for that member.

Slide 21

Here's another look at that Utilization Management panel, you can see that there is a review listed there now.

And we will focus on the orange add button, because we are going to start and build a new request in this demonstration.

So, we'll click the orange add button.

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And the first panel that will need to fill in is what's called the Authorization Request panel.

Notice that that member's information is there across the top you have their name, member ID and date of birth. So, you can always be sure that you're building this review for the correct member or person.

That Date Request Received will default to the current date and time that you started creating this request and then at the very end, when you submit it, that date and time will update to the time that it's actually submitted.

Slide 23

The first piece of information that you'll select is the review type. You'll click on that arrow to get the drop-down box and then you'll select the type of review that you're submitting for this member.

Slide 24

Once you have that selected, you'll be presented with your place of service and type of service options. Again, there's drop-down options for you to select from.

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For most of these reviews, the place of service and type of service will automatically default and so you won't have to click on those drop-down arrows to make a selection. It will just go ahead and pre-populate those for you.

Slide 26

And then the last piece of information on that needs filled in in this panel this Authorization Request panel is the timing.

And really what that tells us is when are you notifying us of this request.

So, if you select perspective timing, that means that you're submitting the review to the system prior to the services starting. So, the member is not currently receiving those services. We want them to start receiving them in the future but we're submitting this review now so that we can get authorization to start those services in the future.

If you select concurrent timing, that's a review request for the services that have already started. So, they've started at a date previous to when the review is

being submitted but they're still receiving those services, so the end date is going to be in the future.

In this example we've selected perspective. So, you'll see that as we walk through the next panel but, again, you can select either perspective or concurrent for any of the review types.

Slide 27

Once you have all the fields entered, take a quick minute to review make sure you have everything selected correctly and then you'll click the Add New Request button.

If, for whatever reason you decided you've made a mistake, or you are submitting a review for the wrong member, you can submit that or you can click the cancel button at this time, and that will take you out of this review and back to that Member Hub.

Slide 28

So, once we have everything complete in the Authorization Request panel, we'll move to our dates of service or admission and discharge panel.

For these reviews, you're going to see dates of service so it's going to ask you for the service start date and for the service end date.

If you've selected perspective as your timing mean that the services are going to start in the future, the system will ensure that you put future dates in that service start and end date field. To make sure that it matches up with that perspective timing that you've chosen.

And here you can see in this example, we selected future dates when we were creating this review.

If you select concurrent, the service start date can be in the past and that service end date would still need to be in the future. And you will get an error from the system if you enter dates that don't follow with the timing that you've selected.

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Once you have the dates entered, the next section is what's called our coverage panel, and this is where that you'll see any information related to the member's coverage and eligibility. There are also a couple extra fields that will

default and you can leave those as those are defaulted, you don't need to worry about changing those.

Then, you also may see a message saying that the member does not appear to be eligible.

And then we'll have to enter information into our eligibility comments box to make sure you're aware that the member does not appear to be eligible for services and that you've written a comment to indicate that you're aware of that.

Slide 30

So, here's what that panel looks like it says coverage there at the top. In this example, I've shown you what that member not eligible warning looks like.

You can see the Medicare indicator third party liability have all defaulted.

And then in that eligibility comment box, there's a red asterisk next to that to make sure that you enter a comment in that box letting us know that you're aware that that person is not currently available for eligible for services.

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After that is our provider panel.

In the provider panel, you'll be entering a treating provider and an ordering provider, which are required.

And then you'll have the ability to list other providers or additional providers in that panel as well.

If there are other providers or other agencies that need to be able to view or have visibility into this review, you'll have to make sure that they're included in that provider panel and we'll walk through how you can add those into the system.

Slide 32

So, here's what that panel looks like. We'll click the orange add button on the side to start that search process.

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And then we can either enter an NPI in the NPI number box or we can enter in other ID numbers, such as a Medicaid ID in the other ID number.

You can also search by first and last name or by organization name using those fields. And once you've entered what you want to search by, you'll click the blue Search button to actually ask the system to process that search.

Slide 34

And it will return anything that matches with what it searched on. To actually add it to the review, you'll click the green plus sign button.

Slide 35

And you'll notice now that that organization has been added in that field.

For the ordering provider field, you can copy down from the treating provider or you can click add new and you can start a new search to enter that ordering provider.

For these reviews that you'll be submitting for, other than PASRR, the case management agency will be that treating and ordering providers. So, you'll just search for your agency information and enter them into that field.

Slide 36

You'll notice here in this example that I copied from treating down to ordering. So again, if you find your agency for that treating provider, you can just copy it down to the ordering provider. You don't have to do a new search and find it again.

Over on the right-hand side under the Action is the blue ellipses. And you can click on that if you've entered or selected the wrong one and you need to delete it and do a new search.

Slide 37

Following that is our provider organization visibility panel. So, for the agency that you entered in the treating and the organization that you entered in the ordering, as long as they have users associated to that organization, you can share it across the organization so that anybody that has access to that organization will be able to view and see this review in the system.

And then you, as a user, also have access to an organization and you will need to select or populate your organization to make sure that everyone that is part of your organization can also see it.

Now in some of these instances that may be all three are the same and that's fine, but it will force you to select in those drop-down boxes on each one so that visibility is populated.

Slide 38

After we have all our provider and our visibility set we will enter information about the review itself.

So, the first is our diagnosis panel, and this is where you'll enter any diagnosis information related to this review. Again, you'll select that orange add button to start that process.

Slide 39

You can either search by code or by term. So, if you know the ICD 10 code, you can enter it there in the box or you can click on the search by term fill in that radio button and then you can enter a word such as headache or knee or brain and click the Search button and the system will search against whatever terms that you've entered.

Slide 40

Once you click Search the system will search against all of the information that we have loaded in the system and it will return any results. You'll want to select the radio button next to the result that you want to be the diagnosis for this review.

Slide 41

And then you have the option to either submit and add the diagnosis to the review or you can do submit and add another that will add the diagnosis to the current review and give you the option to go back and search for another one.

Slide 42

If there is more than one diagnosis entered you do have the ability to drag and drop those so that they're in a specific order if you need them to be or, again, you can use that trash can icon to the right of the diagnosis, to delete anything entered incorrectly.

Slide 42

After that is the procedure panel, there will be some suggested procedures, since we're not actually reviewing procedures in this review process but we're

actually reviewing for the services. The system does require that a procedure get entered, so we do have to fill something in here.

Like I said, there will be a provider manual that have suggested ones, or you can enter one that makes the most sense to you.

But to walk you through how you use it, again you'll click on that orange add button.

You can search by code or by term. So, I put a code in for this example and click the Search button. I'll click the radio button next to it and then I will need to enter units for this.

Slide 43

Once I have all that information entered, I can do submit or submit that another and I can add as many procedures as I want to.

We just have to have one for the system to process the review correctly. Again, you can use the trash can off to the right if you've entered any incorrectly and wanted to remove them or delete them from the review.

Slide 44

Then our last panel is our Documentation panel, and this is where you'll upload any related clinical documentation necessary for the review to be processed.

And I think there will be suggestions on each review type of what documentation is needed, but this is where you can add that to the review.

So again, we'll click that orange add button in the top right-hand corner of the Documentation panel, and it will open our file upload modal or file upload box.

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You do have the option to drag and drop or you can use the click here to go through your folder system and find the appropriate file that you want to upload.

You'll notice at the top, that there are file uploaded restrictions. So, we're able to accept pdfs and word docs to be uploaded through the system and the size does need to be less than or equal to three hundred megabits. Three hundred megabits is a pretty big file. I know we've had ones that have been close to a thousand pages in length which hopefully we won't need for your review types, but those have been able to be added into our system on review.

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Once you have your file selected, it will populate it under that boxes as file name, size, or remove. So, you'll be able to see there and make sure you have the correct file. You do have the option to rename it so that it's easy for you to know what it is.

Slide 47

When you're looking at it in the review, so you can type in that name box what you want it to be called or you can leave the default name that comes over with the file that you upload.

And then you'll select the category and the topic. You will notice in this example we selected clinical for the category and then medical and treatment history for the topic. And there are drop-down options in each of those for you to select from.

And then you can repeat this process as many times as necessary, so that you can attach all the relevant documentation to the review.

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When you have everything done, all your panels are filled out, all your documentation is attached, there will be a green continue button at the bottom.

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You'll click that and it will take you to our user attestation panel and this is where you'll enter your username that you used to log into the system.

And you're just attesting here that everything you're submitting is true and accurate to the best of your knowledge and that you're doing it in representation for this person's care. Once you do that, you'll click the green submit button, and that means that you've actually completed and have everything ready for the review.

Slide 50

When you're submitting the review, you do have the option to add notes to that review. So, here's our Submit Review comments box and this is where you can add anything that may be relevant or related to this review.

So maybe you have to submit two different reviews for this person or two different types of reviews, you could put a note in here saying you'll also be submitting the other type of review or maybe who to contact with questions or any of that kind of stuff can be entered here in this comments box.

Again, you can see it's not required so you don't have to put anything in the box if there's not anything that you need to share. And once you're done with that, again you click that green submit button.

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And it takes you back to a summary view of that review and here's where you can scroll through all your panels, make sure that all the dates and everything looks correct.

And you should receive an email notification letting you know that we received your request, thank you for submitting it. We will let you know as the status changes.

And that's the whole process for actually submitting review through our system so from here we're going to go through how you can check a status and where you can see outcomes for review.

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So again, like I said at the beginning, everything kind of starts with that member search process. In those notification emails that we send out, we will provide you with the Case ID. So, you'll be able to search using either one of those two things. I'm going to walk you through how to do a Case ID search, since we did the member search earlier.

So, if we would click that Case Search, it would take us to our Case Search page.

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You'll notice here that it says "Search by Case ID" at the top, and then it has the Case ID where you can enter that to the right in the text box and click Search.

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Once you do that, that system will return the review with the Case ID that matches and again, you can click on any of those blue pieces of information in that line to actually go to that summary page and look at that review.

One thing to point out, you may notice in this screenshot that there's a Case ID and a Request ID.

So, each review is provided a Case ID and a Request ID. I'll show you in some later slides how that Case ID can tie reviews or request together.

So, there may be multiple reviews or request with the same Case ID that they will each have their own unique Request ID. And you'll notice the first option for method is to search by Case ID and then the last option is to search by Request ID. So, you can use either of those numbers to actually search for the review.

Authorization ID and claim number won't be applicable to you guys, but the Case ID and the Request ID will.

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You can also use that Member Search function and go to the Member Hub, and here is a screenshot of a review that's available in the Member Hub. And if we click on the ellipses on the right-hand side under Action, we get that drop-down menu, and we can view the request.

Until the review is under review, you do also have the option to delete it. Once it goes under review, you won't see that option in the drop-down menu anymore.

Slide 56

So again, we're going to view an outcome so we're going to do that Member Search and go to the Member Hub. Look in the Utilization Management panel at the review that we want to find. Go over to the ellipses, click on it to get the drop-down menu, and then we're going to select view request.

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Once you're in that review summary page, you'll want to scroll down to the Outcomes panel.

You'll see the determination displayed on the right, and then you can click on the dark brown section of the panel to expand and view the details.

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So, here's our procedure.

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If we click on that and open it up the requested tab will display what was requested.

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And then the final recommendation section will display the determination.

So, that's how you can see an outcome on review.

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The next thing we're going to talk through is the actual Request for Information and we talked about the task queue earlier and I said, you may see a Request for Information task in there.

So how this works is once you submit a review through this system to us, our reviewers will take a look at it and if they notice that some of that clinical information that they need to finalize and process the review is missing, they'll send that back as a Request for Information.

And if you go to the task queue, you can either get to it using the portal bar icon on the top or that start tasks on the Utilization Management box.

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But once you're in the scheduled task panel, you may see that Request for Information task listed there.

There is a blue comments bubble next to the name of the task, where it says Request for Information, and you can click on that to open it and see what information is needed.

But over on the left-hand side is that three blue buttons the ellipses and you'll click on that and select start to actually start the task.

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Once you start the task, it takes you to the review and you'll scroll down to our correspondence panel.

And this is where you can actually view the Request for Information letter and it will tell you what clinical information is being requested, what was missing when you first submitted their review that they need to be able to complete the review.

Once you open that and determine what information is missing,

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You can go up to that Documentation panel and then attach that additional information to the review.

Once you do that you'll click done. You'll notice that that task goes away and that review then goes back to our review staff for completion of the review.

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So again, once you have the necessary information that's being requested for that review, you can scroll to the bottom of the page and click done that will finalize request and send it back to the clinical team to finish the review.

That task will no longer be in your task queue.

And again, the review team will have it and be able to complete their review process.

Anytime you see a Request for Information tasks, please start that task and do not start a new review request.

It's just a lot of extra work for you to build a whole new review with all we need is a couple pieces or some more clinical information so that we can go ahead and complete that review.

So just go ahead and start the task. Attach the extra information and click done and then send it back to us so we can finish it.

Slide 66

So now we're going to talk about extensions, first level appeals, and reopens. Whenever you're in a new system there's always some terminology things. I'll try to make sure that when I say what our system says and what it means for you that I do both of those so that you understand that.

Slide 67

But the first thing we're going to talk about is an extension, and this is when you've submitted a review to us. We've approved either the days or the units or something on that review and you want to extend those units or continue those services.

So, some people call it a continued stay. Some people call it a continuation of services. In our system, it's called extend.

So, when you'll want to submit that, you'll actually do a Member Search and go to that Utilization Management panel.

And find the review that has approved days or units on it. And you'll use that ellipses under the Action menu and you'll click extend in the drop-down menu.

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You'll get an extend outpatient pop up box or modal.

And you'll want to put the new end date. You won't change the start date because we're already providing those services, they've already been approved but you want to extend that end date. So, you'll put the new end date in the box and then you'll add any additional units if it's needed. And then you'll click submit to create that new review.

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Once you click submit the system copies everything over and creates a new request.

It will be tied to the previous one by the Case ID.

But it will have its own Request ID and I'll show you what that looks like in the next slide. There is information that you can edit in the new review, such as if you need to add a different diagnosis. You'll want to attach any additional documentation to support that extension of services or continuation of services. Once you have all that information, you'll go ahead and scroll down and click submit and do your user attestation.

And then you'll see the previous review and the current review for that continuation of services in the Utilization Management panel.

Slide 70

So, here's what that looks like in the Utilization Management panel. You can see the review on the bottom of the panel is complete. It has that Case ID 4534 and then that Request ID.

And up above it, you'll see the new review where it says "Request has been submitted". It has the same Case ID that 4534 as the one below it.

But it has its own unique Request ID and you'll notice under timing that it says perspective extension, so this is where we're extending those services from the previous review that we already submitted and had approved services in it.

Slide 71

So, we'll do the same process for a first level appeal. Again, it's called first level appeal in the system, many of you may know it as a reconsideration.

So anytime a review has days that were denied or units that were denied, you can submit that reconsideration from that previous review.

Slide 72

So again, you'll go to that Member Search and you'll find that review that had those denied days or units on it. You'll click on the ellipses to get the drop-down menu and then you'll select first level appeal from the drop-down menu, which is how you submit the reconsideration.

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Once you do that it'll take you to that review summary page. You'll add that additional documentation to support why those days or units, or services should have been approved. You'll fill in your user attestation.

And click submit for that to come back through the system.

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So again, here we are in that members Utilization Management panel. You'll see that very first review at the bottom is complete.

4534 is that Case ID. It was a prospective review as partially denied.

Then we have the middle line on there where the request has been submitted. Again, has the same Case ID but a unique Request ID and it's that perspective extension.

And then the top row on their request has been submitted. The same 4534 Case ID. Its own unique Request ID. And we'll see that it's a prospective first level appeal on there.

So again, everything is tied together by that Case ID that each one has its own Request ID.

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So, the last thing that I'm going to show you how to do is what's called a reopen.

Only reviews that are in a technical denial status will have the ability, or the option to be reopened. And a review will go into a technical denial status when

the reviewer has submitted a Request for Information. So that Request for Information is out in your task queue, but that additional information doesn't get attached within the time period that is set in the system. And I believe that you guys have 10 business days to submit that documentation once that Request for Information is out there.

So, after those days have passed, the system will automatically put that review on a technical denial status.

And then let's say you get the information that you needed on the 12th day or the 15th day, you do have the option to reopen in that drop-down menu.

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So, you'll follow the same process you'll search for the member go to the Member Hub, find the review that is in a technical denial status.

Click on the ellipses to get the drop-down menu and click on that reopen option.

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So again, they'll tie those two reviews together by the Case ID, each one of them will have their own Request ID. If you need to update any information, such as the diagnosis, providers, that kind of stuff you can go into the review and do that.

Make sure you add that additional information into that Documentation panel. Again, click submit and go through the user attestation.

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And then here in the provider panel, you can see, the very bottom review in this box says, "Request is complete", Case ID 4430, and clear over to the right, you can see that it's in the technical denial status.

And then right above that you can see the Reopen Request for Case ID 4430. Again, it has its own unique Request ID and then under the timing, you can see perspective reopened.

And so that's how that works. You don't have to start and build a brand-new case. You can just go find the review that was in there. Select reopen from the drop-down menu.   Attach that additional documentation and then it can go back to review.

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And that really completes everything that I wanted to walk you through with our system.

Again, this will be posted so that you have all these screenshots and everything for a reference, but I do want to provide you a couple things on where to go for assistance.

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So, again here's that website, the long-term services and supports training page where you can find our FAQs, our training information, user guides, things like that. That provider portal registration link, along with that official training user guide, is currently out there.

And then that Qualitrac provider portal link to actually get to the portal and login will also be available on that same page.

The help desk will start and be available on March 1st. The phone numbers listed there, along with the email address of how you can contact them if you have any questions when the system is live and need assistance getting through submitting a review, getting logged into the system, things like that.

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And that completes our presentation for today. Again, thank all of you for joining us. I really appreciate you taking the time out to walk through the system with us. Let me know if we can answer any questions or provide any assistance as we move forward. Have a great day.