



EARLY INTENSIVE DEVELOPMENTAL AND BEHAVIORAL INTERVENTION (EIDBI) BENEFIT

Atrezzo Provider Portal Submission Training and Requirements

Objectives

Kepro's role as the MRA

MHCP'S CURRENT MEDICAL REVIEW AGENT IS KEYSTONE PEER REVIEW ORGANIZATION (KEPRO). MHCP CONTRACTS WITH KEPRO TO PROCESS EIDBI SERVICE AUTHORIZATION REQUESTS.

Registration & Submissions

REVIEW THE REGISTRATION AND SUBMISSION PROCESS FOR EIDBI AND CMDE REQUESTS VIA THE ATREZZO PROVIDER PORTAL

Certification Outcomes

TO INCREASE EFFICIENCY AND CERTIFICATION OUTCOMES FOR THESE REQUESTS.

EIDBI BENEFIT PROCESS

Information in this section pertains to fee-for-service MHCP members only.**

Note the following timelines in the EIDBI service authorization process:

- Each EIDBI service authorization request cannot exceed a 180-day time span.
- Complete and submit a person's annual CMDE at least 30 days, but no more than 60 calendar days, before the end date of the current service authorization period.
- The ITP and CMDE may be signed on the same day, but the ITP must not be signed prior to the CMDE being completed.
- KEPRO may retroactively approve up to 180 days for services that require authorization. The qualified providers and legal representative must sign the ITP and CMDE prior to delivering any of these services.

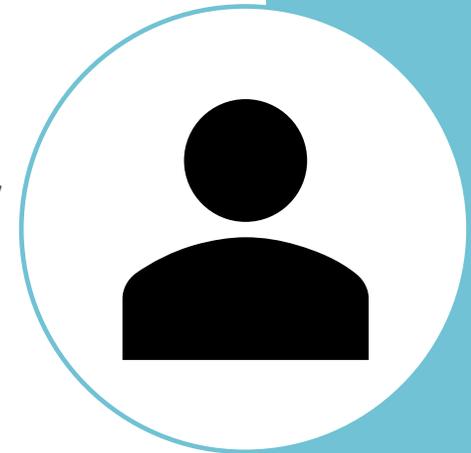
EIDBI BENEFIT - PROVIDER RESPONSIBILITIES

The **comprehensive multi-disciplinary evaluation (CMDE) provider** is responsible to:

- Check eligibility in MN-ITS to determine whether the member is receiving EIDBI benefits through fee-for-service or is enrolled in a prepaid health plan
- Submit the completed CMDE Medical Necessity Summary Information (DHS-7108) (PDF), including the CMDE signature page, to the web-based KEPRO Atrezzo portal.
- Ensure that all documentation in the CMDE is complete and accurate prior to submission.

The **Qualified Supervising Professional (QSP)** is responsible to:

- Receive medical necessity approval before submitting the ITP
- Submit the completed Individual Treatment Plan (ITP) and Progress Monitoring (DHS-7109) (PDF), including the ITP signature page to the web-based KEPRO Atrezzo portal



Continued...

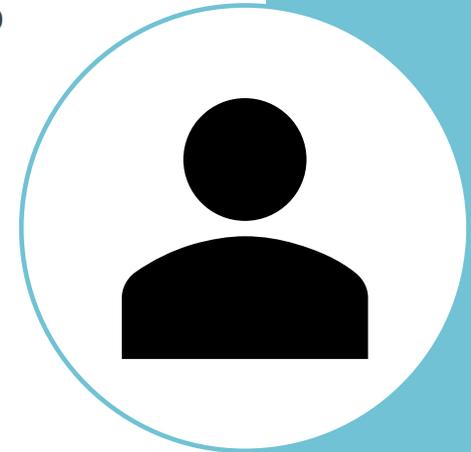
EIDBI BENEFIT - PROVIDER RESPONSIBILITIES

The **Qualified Supervising Professional (QSP)** is responsible to:

- Ensure that all documentation is complete and accurate prior to submission
- Coordinate other health, mental health, and home and community-based services to ensure that the person receives services that are the most appropriate and effective in meeting the person's needs

In general, the **EIDBI provider agency** is responsible to:

- Use the [KEPRO Atrezzo portal](#) to submit information to and communicate with KEPRO. KEPRO will not accept documentation sent via fax or mail, and the MN-ITS message screen has limited space.
- Reference the [KEPRO Atrezzo Portal](#) to check the status of the CMDE. Since the annual CMDE does not require authorization, a SA is not created, and a notification will not be sent via MN-ITS.



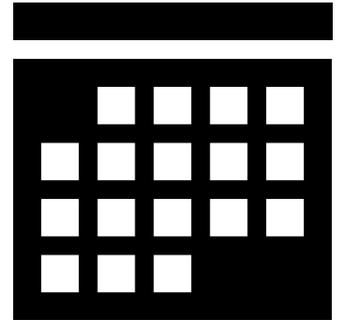
EIDBI BENEFIT RESPONSIBILITIES

KEPRO will do the following within **five** business days of receiving the CMDE:

- Verify that all the required components of the CMDE are present
- Pend the case and notify providers through the Atrezzo message inbox if additional information is needed
- Review the documentation and make a medical necessity determination

KEPRO will do the following within **ten** business days of receiving the ITP:

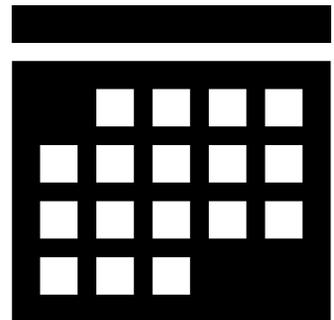
- Enter information from the ITP and CMDE into Medicaid Management Information System (MMIS)
- Verify all required components of the ITP are present
- Put the case in pending status and notify providers through the Atrezzo message inbox if more information is needed
- Complete an integrated review process of the CMDE, ITP and other MHCP-covered services the person receives in order to determine authorization for EIDBI services



EIDBI BENEFIT RESPONSIBILITIES

If **KEPRO** puts the case in pending status in the Atrezzo portal and requests additional information:

- The provider has **15 Calendar days** to upload the requested information or make the requested corrections. The provider must submit **all** the additional information requested at one time to KEPRO.
- Failure to respond may result in denial and require a new Authorization to restart the process with all documentation necessary to make a determination.
- KEPRO has **three business days** from when it receives the additional information to review and make an approval or denial determination.



Atrezzo Provider Portal

Advantages of using the Provider Portal:

- Secured access to the Provider Portal
- Access letters via Case/ Request
- Respond / Send messages To/From Kepro
- Track case status & upload clinical documentation.



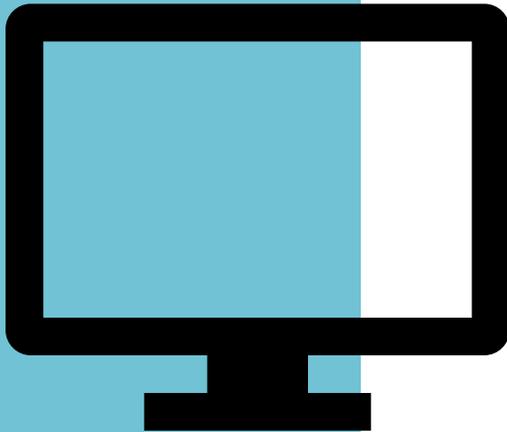
Accessing the Atrezzo Provider Portal

Website Address: <https://mhcp.kepro.com>

Select “Atrezzo Login”

To Register for the Atrezzo Provider Portal:

- Enter your 10-digit National Provider Identifier (NPI) number and Provider Registration Code (DHS PA# located in MN-ITS mailbox)
- *The Provider must contact Kepro for the registration code (Kepro #1-866-433-3658)*
- Select unique Username/ Password & complete the required user information



Atrezzo Provider Portal New Case Creation

Provider Pointers:

- CMDE and EIDBI requires two separate case creations. Kepro does not recommend submitting both on the same day.
- Responding to additional information does not require a new case to be created. A New CMDE/EIDBI case should be created when a request is denied/rejected.

Atrezzo Provider Portal New Case Creation

Provider Pointers:

- Minnesota Department of Human Services created **EIDBI transition and/or discharge summary form (DHS-7109A)** based on feedback from stakeholders to support EIDBI provider agencies in notifying the medical review agent and other parties of a transition or discharge from EIDBI services.
- Adjustments should be made to an existing case if additional codes or unit modifications are being requested during the same authorization period- Place a note in the Clinical information section on the Request overview page citing the additional codes, requested/adjusted units and the affected date span.
- **Template for location change requests:**
“This member moved to our 1234 Street location (NPI # XXXXXXXXXXX) from our 5678 Street location (NPI # XXXXXXXXXXX) on 04-29-21. Please see attached ITP (page 2) showing the allocation from XX-XX-XXXX to XX-XX-XXXX for old location and the allocation from XX-XX-XXXX for new location.”

Atrezzo Provider Portal New Case Creation

Successful completion of setup/login takes you to the Home Page

Click "New Request" to start your case creation



The screenshot shows the Atrezzo Provider Portal Home Page. At the top left is the logo for KEPRO | Atrezzo, with the tagline "Intelligent Value". To the right of the logo is a box containing the text "Contract: Minnesota Medicaid". Further right is a box with the text "[Update Counts] Total (work-in-progress) Requests: 5, Total Saved (not submitted): 0, Total Submitted: 5". Below these is a "Logout" link. A navigation bar contains the following links: HOME, REQUESTS, SEARCH, MANAGEMENT, MY ACCOUNT, and HELP. The main content area features a "MESSAGES" section with the text "You have 0 unread messages - Go to Message Center" and a "REQUESTS SAVED BUT NOT SUBMITTED" section. A "New Request" button is located in the bottom left corner of the main content area, with a blue arrow pointing to it. The footer contains the text "Privacy Policy/Terms of Use | Powered by KEPRO | Copyright © 2011 KePortal | All Rights Reserved | Version 1.7.3.7986 (Atrezzo_Train)".

Atrezzo Provider Portal New Case Creation

Complete member search utilizing the Members Minnesota Medicaid ID # or Last name and Birthdate

2

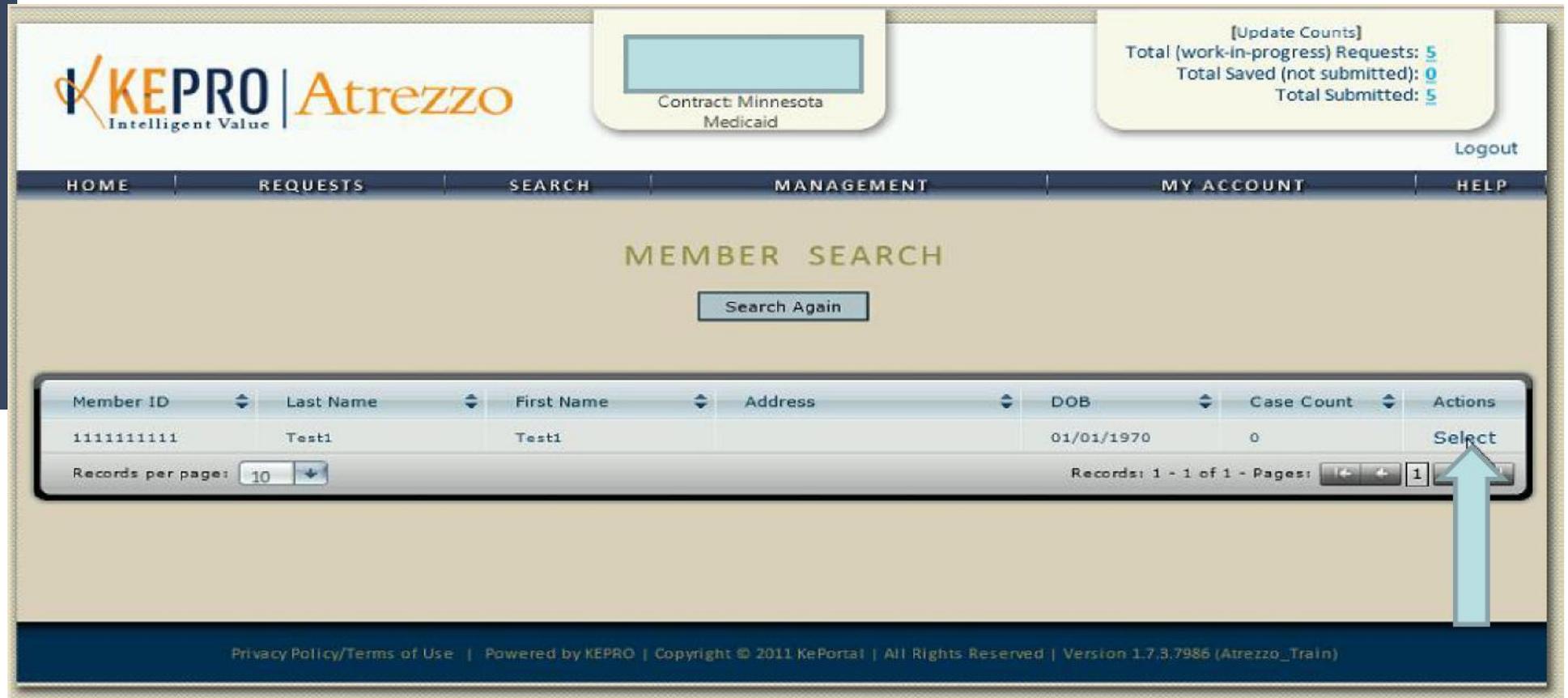


The screenshot shows the Atrezzo Provider Portal interface. At the top left is the logo for KEPRO | Atrezzo with the tagline "Intelligent Value". To the right of the logo is a box containing the text "Contract: Minnesota Medicaid". Further right is a summary box titled "[Update Counts]" with the following data: "Total (work-in-progress) Requests: 5", "Total Saved (not submitted): 0", and "Total Submitted: 5". A "Logout" link is located in the top right corner. Below the header is a navigation menu with the following items: HOME, REQUESTS, SEARCH, MANAGEMENT, MY ACCOUNT, and HELP. The main content area is titled "MEMBER SEARCH" and includes the instruction "Search for a member using the criteria below." Below this is a search form with the following fields: "Member ID:" with a text input containing "1111111111", "or", "Member Last Name:" with an empty text input, and "Member Birthdate:" with an empty text input. A "Search" button is positioned below the form, with a mouse cursor hovering over it. At the bottom of the page, there is a footer containing the text: "Privacy Policy/Terms of Use | Powered by KEPRO | Copyright © 2011 KePortal | All Rights Reserved | Version 1.7.3.7986 (Atrezzo_Train)".

Atrezzo Provider Portal New Case Creation

Upon verification of the members First Name, Last name and Date of Birth, Click "Select" under the ACTIONS column

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KEPRO | Atrezzo
Intelligent Value

Contract: Minnesota
Medicaid

[Update Counts]
Total (work-in-progress) Requests: 5
Total Saved (not submitted): 0
Total Submitted: 5

Logout

HOME | REQUESTS | SEARCH | MANAGEMENT | MY ACCOUNT | HELP

MEMBER SEARCH

Search Again

Member ID	Last Name	First Name	Address	DOB	Case Count	Actions
111111111	Test1	Test1		01/01/1970	0	Select

Records per page: 10

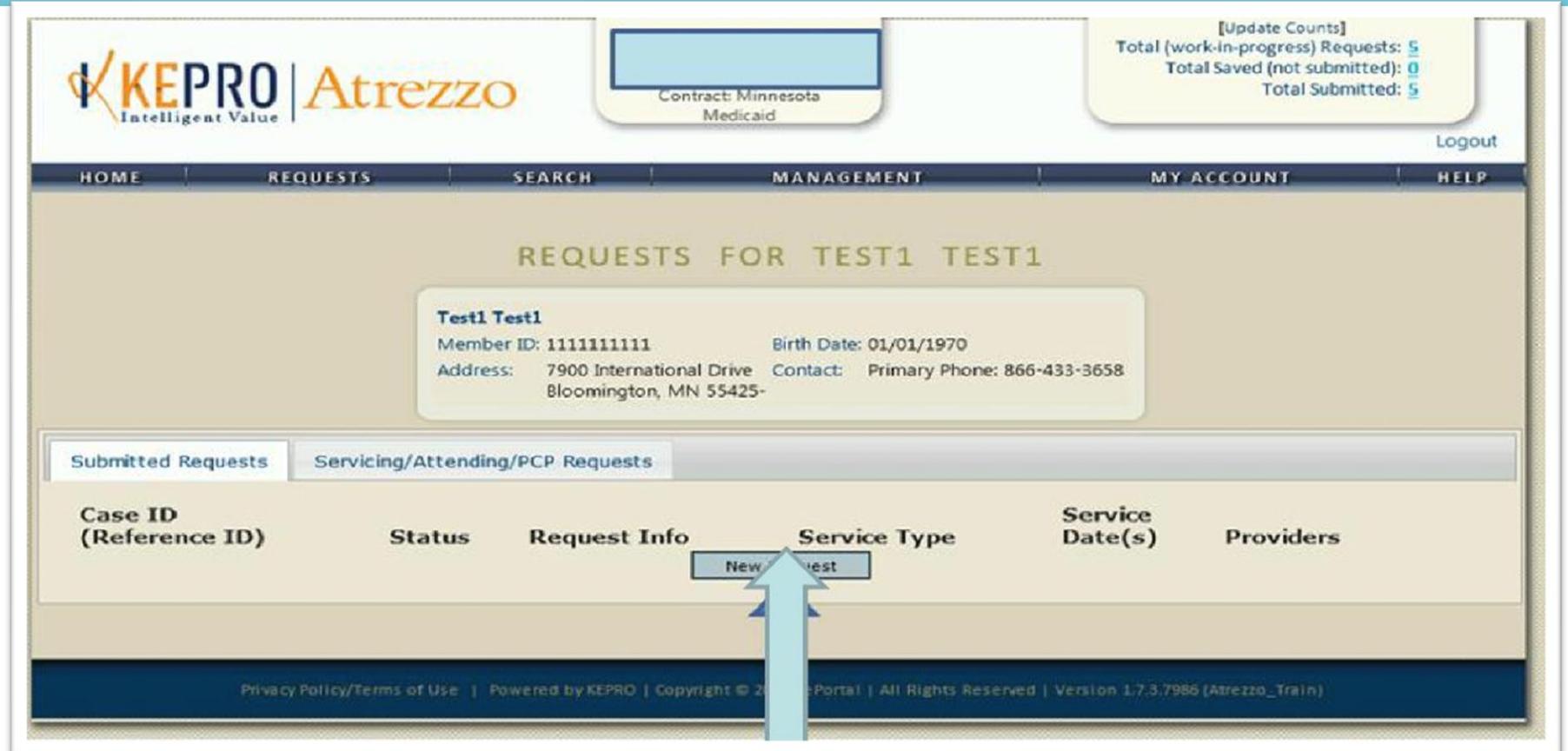
Records: 1 - 1 of 1 - Pages: 1

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Atrezzo Provider Portal New Case Creation

Click "New Request"

4

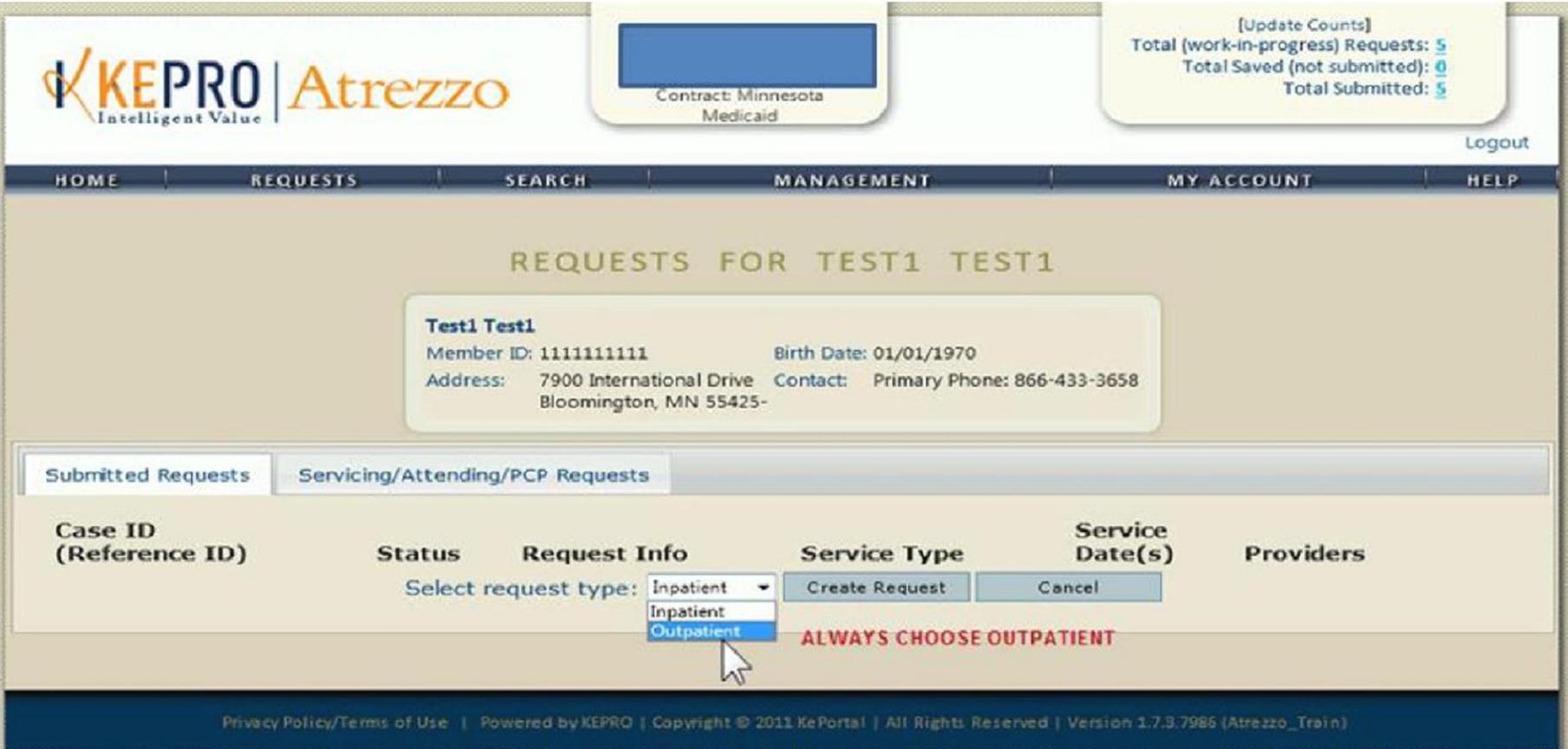


The screenshot displays the Atrezzo Provider Portal interface. At the top left is the KEPRO | Atrezzo logo with the tagline 'Intelligent Value'. To the right, a box shows 'Contract: Minnesota Medicaid'. Further right, a summary box contains: [Update Counts] Total (work-in-progress) Requests: 5, Total Saved (not submitted): 0, Total Submitted: 5. A 'Logout' link is in the top right. A navigation bar includes HOME, REQUESTS, SEARCH, MANAGEMENT, MY ACCOUNT, and HELP. The main content area is titled 'REQUESTS FOR TEST1 TEST1' and features a profile card for 'Test1 Test1' with details: Member ID: 111111111, Birth Date: 01/01/1970, Address: 7900 International Drive, Bloomington, MN 55425, and Contact: Primary Phone: 866-433-3658. Below this are two tabs: 'Submitted Requests' and 'Servicing/Attending/PCP Requests'. A table header is visible with columns: Case ID (Reference ID), Status, Request Info, Service Type, Service Date(s), and Providers. A 'New Request' button is located under the 'Request Info' column, and a blue arrow points to it. The footer contains: Privacy Policy/Terms of Use | Powered by KEPRO | Copyright © 2018 Kepro | All Rights Reserved | Version 1.7.3.7986 (Atrezzo_Train)

Atrezzo Provider Portal New Case Creation

Request type must reflect "OUTPATIENT"

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KEPRO | Atrezzo
Intelligent Value

Contract: Minnesota Medicaid

[Update Counts]
Total (work-in-progress) Requests: 5
Total Saved (not submitted): 0
Total Submitted: 5

Logout

HOME | REQUESTS | SEARCH | MANAGEMENT | MY ACCOUNT | HELP

REQUESTS FOR TEST1 TEST1

Test1 Test1
Member ID: 1111111111 Birth Date: 01/01/1970
Address: 7900 International Drive Contact: Primary Phone: 866-433-3658
Bloomington, MN 55425-

Submitted Requests | Servicing/Attending/PCP Requests

Case ID (Reference ID)	Status	Request Info	Service Type	Service Date(s)	Providers
		Select request type: Inpatient Inpatient Outpatient	Create Request	Cancel	

ALWAYS CHOOSE OUTPATIENT

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Atrezzo Provider Portal New Case Creation

Member Detail Information will display.
Ensure accuracy of the Member's Name & Medicaid ID prior to proceeding.
Once verification is complete, click "Next" to continue.

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OUTPATIENT SERVICES REQUEST

- Patient Detail**
- Service Provider
- Attending Physician
- Service Detail
- Procedures
- Diagnoses
- Clinical Information
- Attached Documents
- Questionnaires

PATIENT DETAIL

Name	Test1 Test1
Member ID	1111111111
DOB	01/01/2001
Address	7900 International Dr. Flemington MN 55425--

Next

Atrezzo Provider Portal New Case Creation

Requesting Provider information will automatically default to the provider listed in the change context section (Top center of your screen). The requesting provider information can only be changed if you have more than 1 NPI number registered to your Atrezzo Provider portal account.



The screenshot shows the 'OUTPATIENT SERVICES REQUEST' form in the Atrezzo Provider Portal. The top navigation bar includes 'HOME', 'REQUESTS', 'SEARCH', 'MANAGEMENT', 'REPORTS', and 'MY ACCOUNT'. The 'REQUESTS' tab is active, showing options for 'View Requests', 'Create New Request', and 'Message Center'. The main form area is titled 'OUTPATIENT SERVICES REQUEST' and features a sidebar with expandable sections: 'Patient Detail', 'Requesting Provider' (highlighted in yellow), 'Service Provider', 'Attending Physician', 'Service Detail', 'Procedures', 'Diagnoses', 'Clinical Information', 'Attached Documents', and 'Questionnaires'. The 'REQUESTING PROVIDER' section contains fields for 'Name', 'Provider ID', 'Provider Type', 'Address', 'Phone', and 'Fax *'. A note states: 'Official communication of service authorization will be sent to the fax number entered here unless otherwise specified.' A footer note indicates '* denotes required field'.



Atrezzo Provider Portal New Case Creation

The Servicing provider information will automatically default to reflect the providers name listed in the change context section (Top Center of your screen). If the listed provider is not applicable to the requested authorization click “Find” to complete a provider search.



OUTPATIENT SERVICES REQUEST

- Patient Detail
 - Requesting Provider
- Service Provider**
 - Attending Physician
 - Service Detail
 - Procedures
 - Diagnoses
 - Clinical Information
 - Attached Documents
- Questionnaires

SERVICE PROVIDER

Use the search below to change the selected Service Provider.

Name
Provider ID
Location

Atrezzo Provider Portal New Case Creation

****Attending Physician Section is optional****

OUTPATIENT SERVICES REQUEST

- Patient Detail
 - Requesting Provider
- Service Provider
 - Attending Physician**
 - Service Detail
 - Procedures
 - Diagnoses
 - Clinical Information
 - Attached Documents
- Questionnaires

ATTENDING PHYSICIAN

Optional: Use the search below in order to add an attending physician to this request.

Atrezzo Provider Portal New Case Creation

Select the applicable service type from the drop-down listing (Selection of the incorrect service type may adversely affect case review)

- EIDBI= 048-EIDBI & CMDE= 048a-CMDE
- Request Type= Prior Auth
- FIPS Code= Does not apply (Leave option blank)

OUTPATIENT SERVICES REQUEST

Patient Detail
Requesting Provider

Service Provider
Attending Physician

Service Detail

Procedures

Diagnoses

Clinical Information

Attached Documents

Questionnaires

SERVICE DETAIL

Service Type *

Request Type

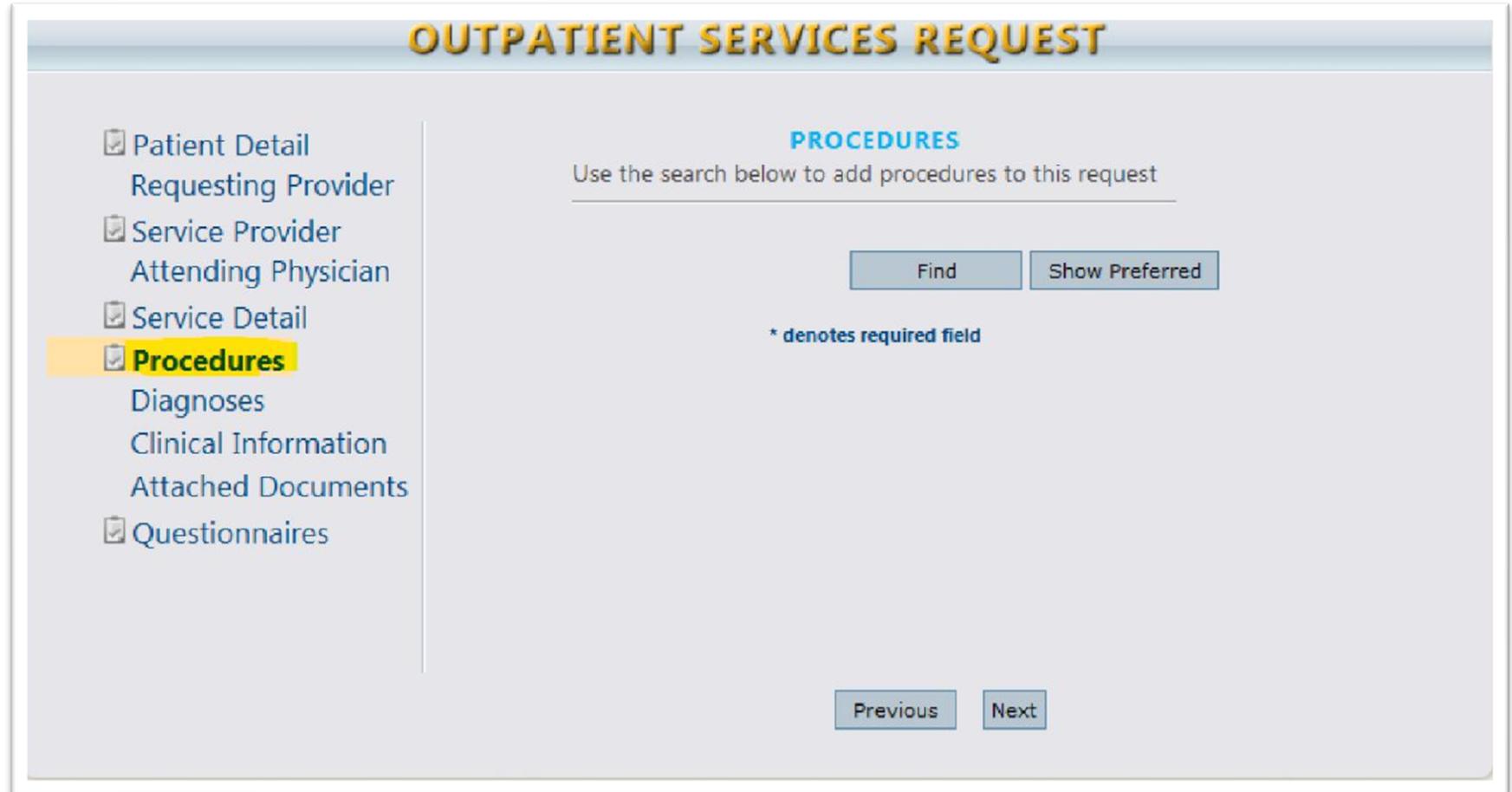
FIPS Code

* denotes required field

Atrezzo Provider Portal New Case Creation

Click "Find" to complete Procedure code search.

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OUTPATIENT SERVICES REQUEST

- Patient Detail
 - Requesting Provider
- Service Provider
 - Attending Physician
- Service Detail
- PROCEDURES**
- Diagnoses
- Clinical Information
- Attached Documents
- Questionnaires

PROCEDURES

Use the search below to add procedures to this request

* denotes required field

Atrezzo Provider Portal New Case Creation

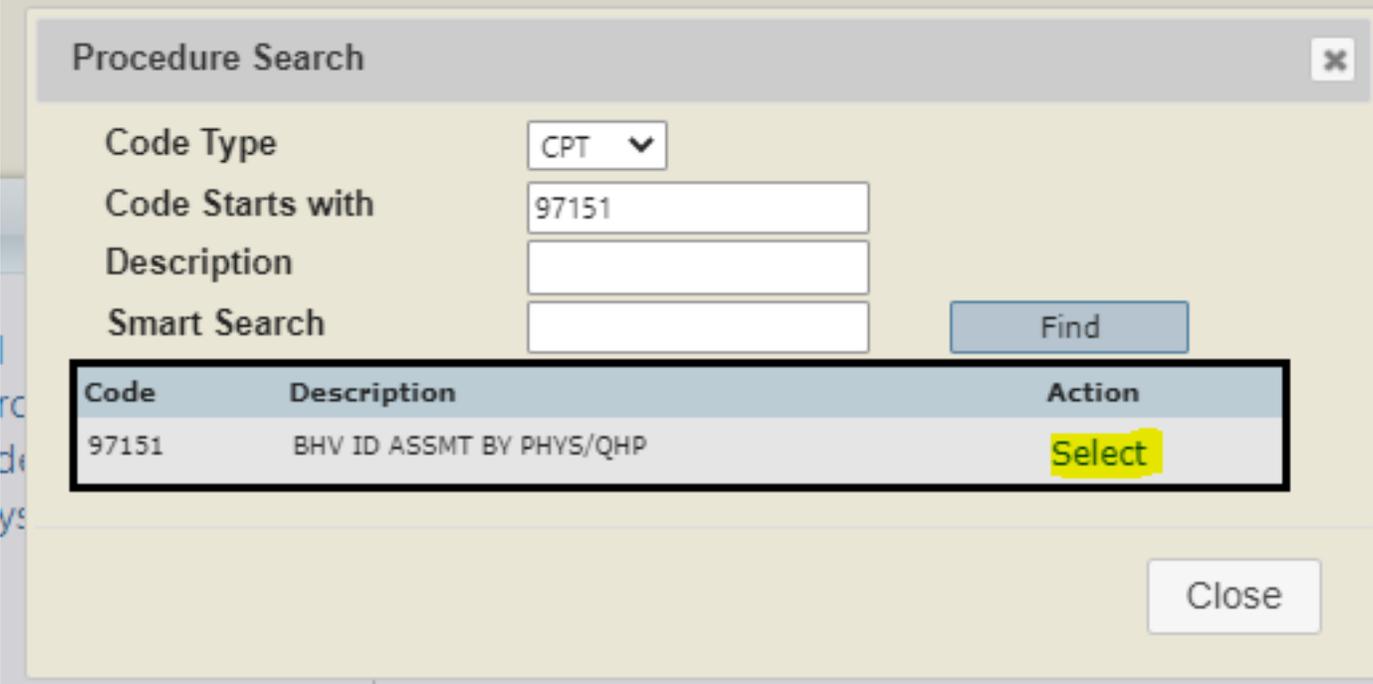
Procedure codes:

CMDE Procedure code: 97151 only

ITP/EIDBI Procedure codes: 97153, 97154, 97155, 97156, 97157, H0032 and H0046

Click "Select" under the Actions column which places the preferred code on the case entry.
Code usage should be specific to what is being requested on the treatment plan.

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Procedure Search

Code Type: CPT

Code Starts with: 97151

Description:

Smart Search:

Find

Code	Description	Action
97151	BHV ID ASSMT BY PHYS/QHP	Select

Close

Atrezzo Provider Portal New Case Creation

- Enter the requested date span utilizing the calendar dropdowns
 - Effective 10/1/2020: EIDBI requested dates of services cannot exceed 180 days
- Enter the quantity (Frequency = Units). Please enter the total units requested for that date range.
- Select the applicable modifier from the drop-down listing (UB Modifier)
- Request containing more than 1 procedure code requires you to repeat the above steps

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OUTPATIENT SERVICES REQUEST

PROCEDURES

Use the search below to add procedures to this request

0368T - BEHAVIOR TREATMENT MODIFIED [remove]

Date: * to

Qty: * [-Frequency-] Rate:

MOD(S): [-MOD-]

Find Show Preferred

* denotes required field

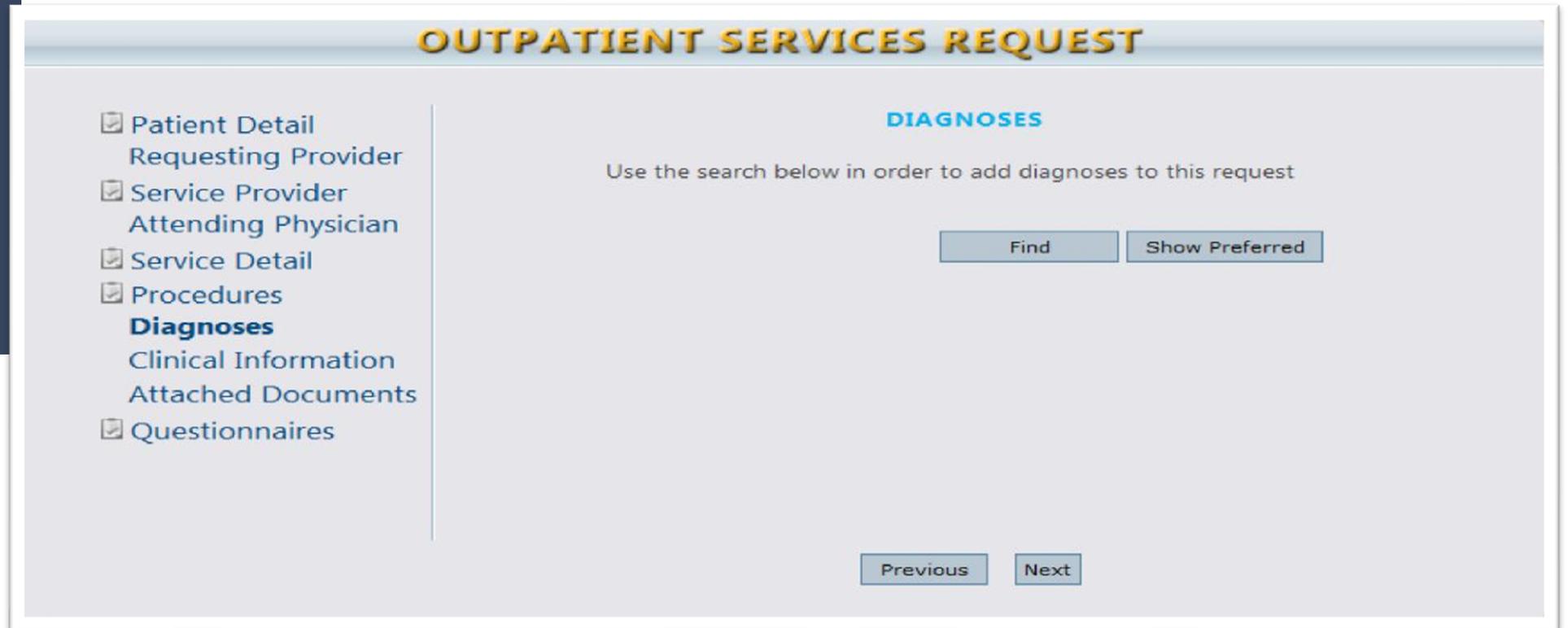
Previous Next

Atrezzo Provider Portal New Case Creation

Enter the Diagnosis code by clicking “Find”

Recommendation: Complete Diagnosis Code Search utilizing the Diagnosis Code versus the code description to reduce search results

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OUTPATIENT SERVICES REQUEST

- Patient Detail
Requesting Provider
- Service Provider
Attending Physician
- Service Detail
- Procedures
- Diagnoses**
- Clinical Information
- Attached Documents
- Questionnaires

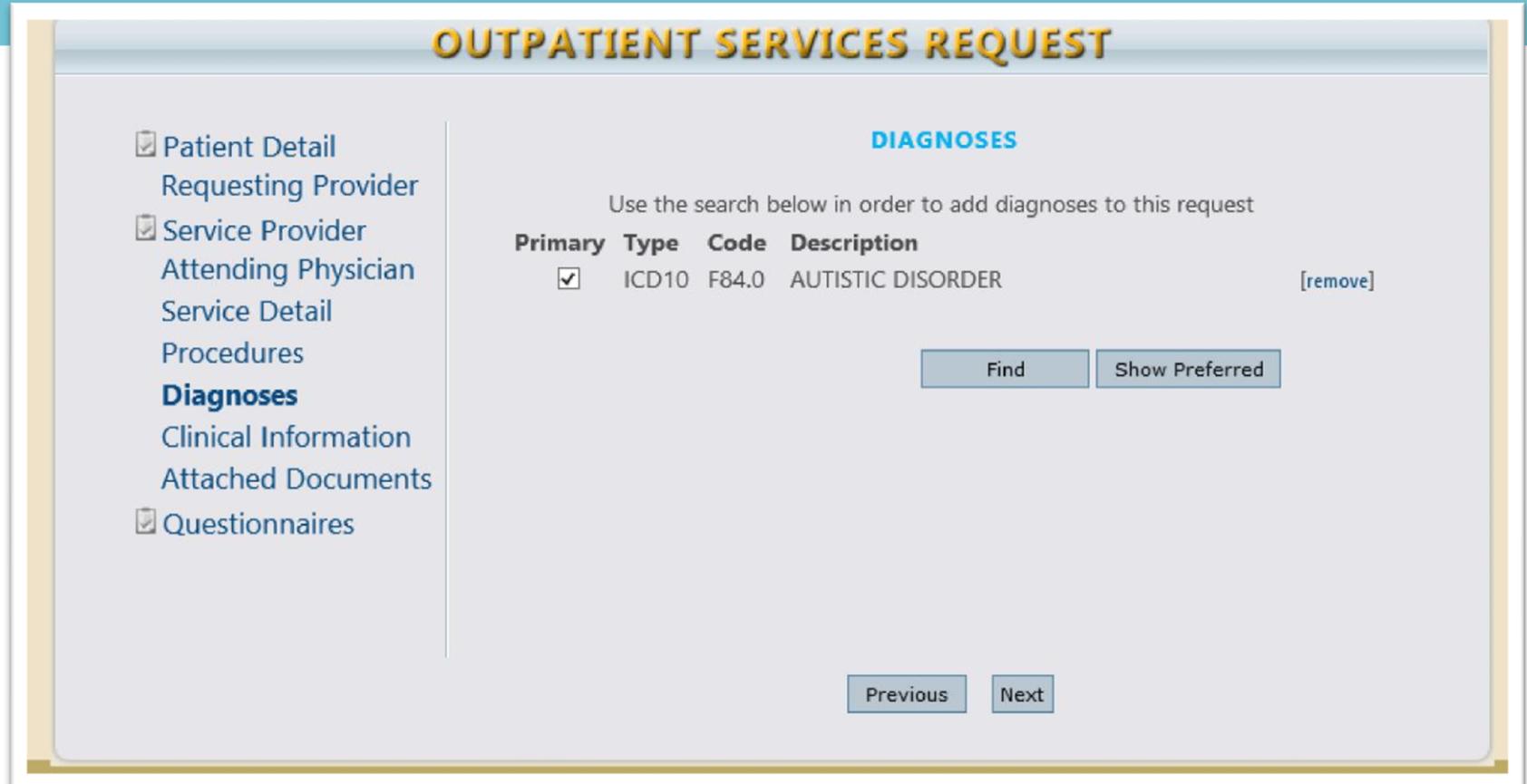
DIAGNOSES

Use the search below in order to add diagnoses to this request

Atrezzo Provider Portal New Case Creation

- The first diagnosis code entered is automatically deemed as the primary diagnosis.
- Entering more than 1 diagnosis code requires repeating the above steps

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OUTPATIENT SERVICES REQUEST

Patient Detail
Requesting Provider

Service Provider
Attending Physician
Service Detail
Procedures

Diagnoses
Clinical Information
Attached Documents

Questionnaires

DIAGNOSES

Use the search below in order to add diagnoses to this request

Primary	Type	Code	Description	
<input checked="" type="checkbox"/>	ICD10	F84.0	AUTISTIC DISORDER	[remove]

Find Show Preferred

Previous Next

Atrezzo Provider Portal New Case Creation

- Insert case specific details into this area for reviewers' attention (i.e., change requests, noting documents uploaded, etc.)
- Please note this is a medical record and subject to audit. Please be mindful of this fact when entering communications.
- Please do not use this area to submit inquiries as to the case status, instead refer to the case overview for status details



OUTPATIENT SERVICES REQUEST

CLINICAL INFORMATION

- Patient Detail
- Requesting Provider
- Service Provider
- Attending Physician
- Service Detail
- Procedures
- Diagnoses
- Clinical Information**
- Attached Documents
- Questionnaires

Previous Next

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Atrezzo Provider Portal: Attaching Documents

Provider Pointers:

- Any one document must be less than 4 MB. There is no limit to the total size of all the documents, so long as each individual document is less than 4 MB.
- If the document size exceeds 4 MB, compress the file
 - Instructional information regarding file compression depends on your individual program settings. Consult your IT representative within your facility for assistance. OR
 - Split your document into two separate files to meet the maximum size limit.
- Atrezzo accepts files with the following extensions: PDF, DOCX, XLS, GIF, TIF, TXT, XLSX, JPG, DOC, RTF, BMP, JPEG





- Select “Choose file” to locate the file and click open to attach. The file Name will appear when it is successfully uploaded (refer to steps 2-4).
- Providers must submit the required DHS forms for CMDE and EIDBI requested services.
- Clinical Documentation must support the requested services.

OUTPATIENT SERVICES REQUEST

- Patient Detail
 - Requesting Provider
- Service Provider
 - Attending Physician
 - Service Detail
 - Procedures
 - Diagnoses
 - Clinical Information
 - Attached Documents**
- Questionnaires

ATTACHED DOCUMENTS

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

Attach New Document (4 MB size limit):
 No file chosen

Acceptable File Types: pdf, tif, doc, docx, xls, xlsx, txt, rtf, gif, jpg, jpeg.

Document Type (required):

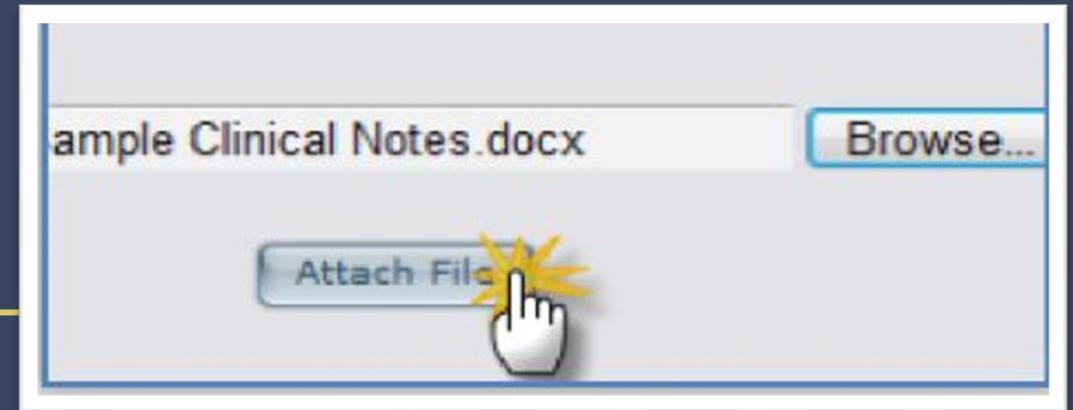
(Select a file and document type to activate 'Attach Selected Document' button)

Larger files will take longer to upload/download. Please be patient.

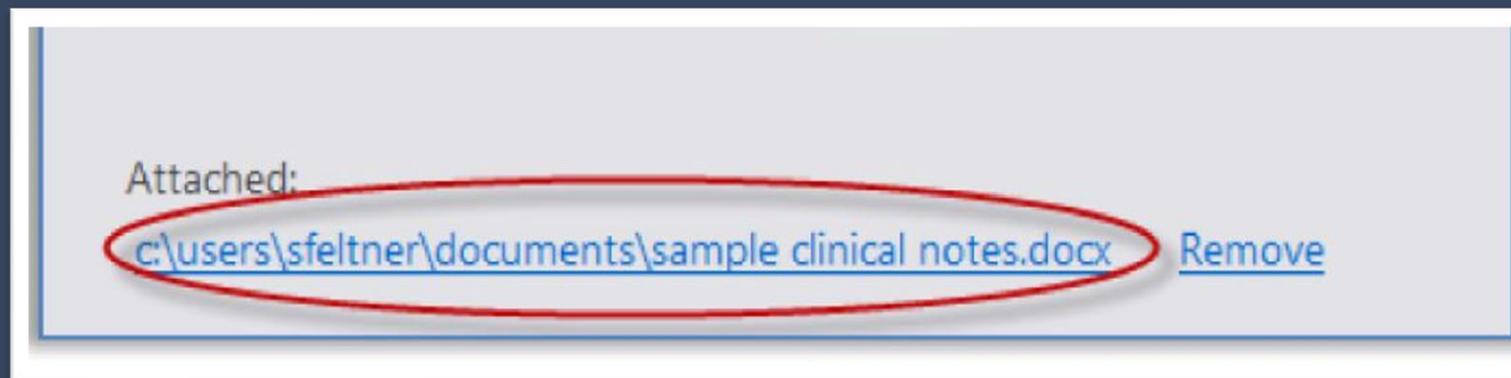
Step 2



Step 3



Step 4



Atrezzo Provider Portal New Case Creation

The Questionnaire is not applicable to CMDE/EIDBI, please skip this step.

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OUTPATIENT SERVICES REQUEST

<ul style="list-style-type: none"><input type="checkbox"/> Patient Detail<ul style="list-style-type: none">Requesting Provider<input type="checkbox"/> Service Provider<ul style="list-style-type: none">Attending PhysicianService DetailProceduresDiagnosesClinical Information<input type="checkbox"/> Attached Documents<input checked="" type="checkbox"/> Questionnaires	<h3>QUESTIONNAIRES</h3> <p>There are no questionnaires to fill out for this request at this time</p> <p>Previous</p>
--	--

Atrezzo Provider Portal New Case Creation

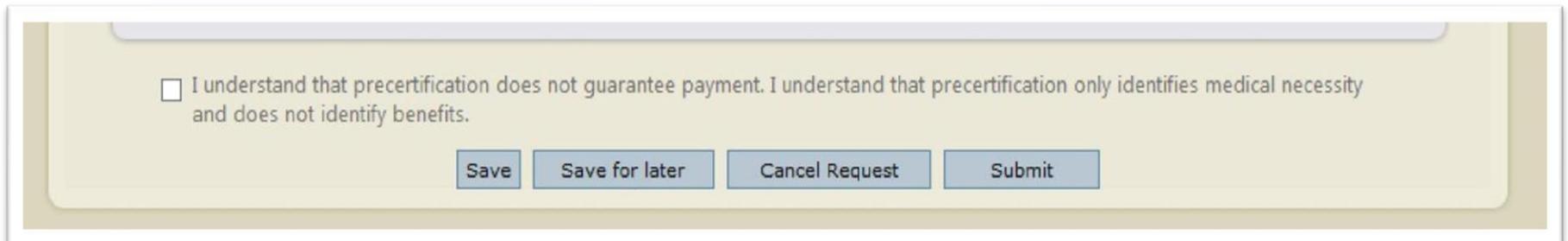
Click the check box on the case entry page acknowledging the below statement.

You are now ready to submit your Atrezzo Provider Portal Case

Click “ Submit”. Request overview page will now display your case entry and KEPRO case ID number.

If you are unable to complete your case submission, you have the option of Selecting “Save for Later”. Selecting this option saves the data entered up to the current completion point. The case will display on the Atrezzo Provider Portal home page awaiting final submission.

Note: Case Submittal is confirmed by receipt of KEPRO case ID on the Request Overview page.



I understand that precertification does not guarantee payment. I understand that precertification only identifies medical necessity and does not identify benefits.

Save Save for later Cancel Request Submit

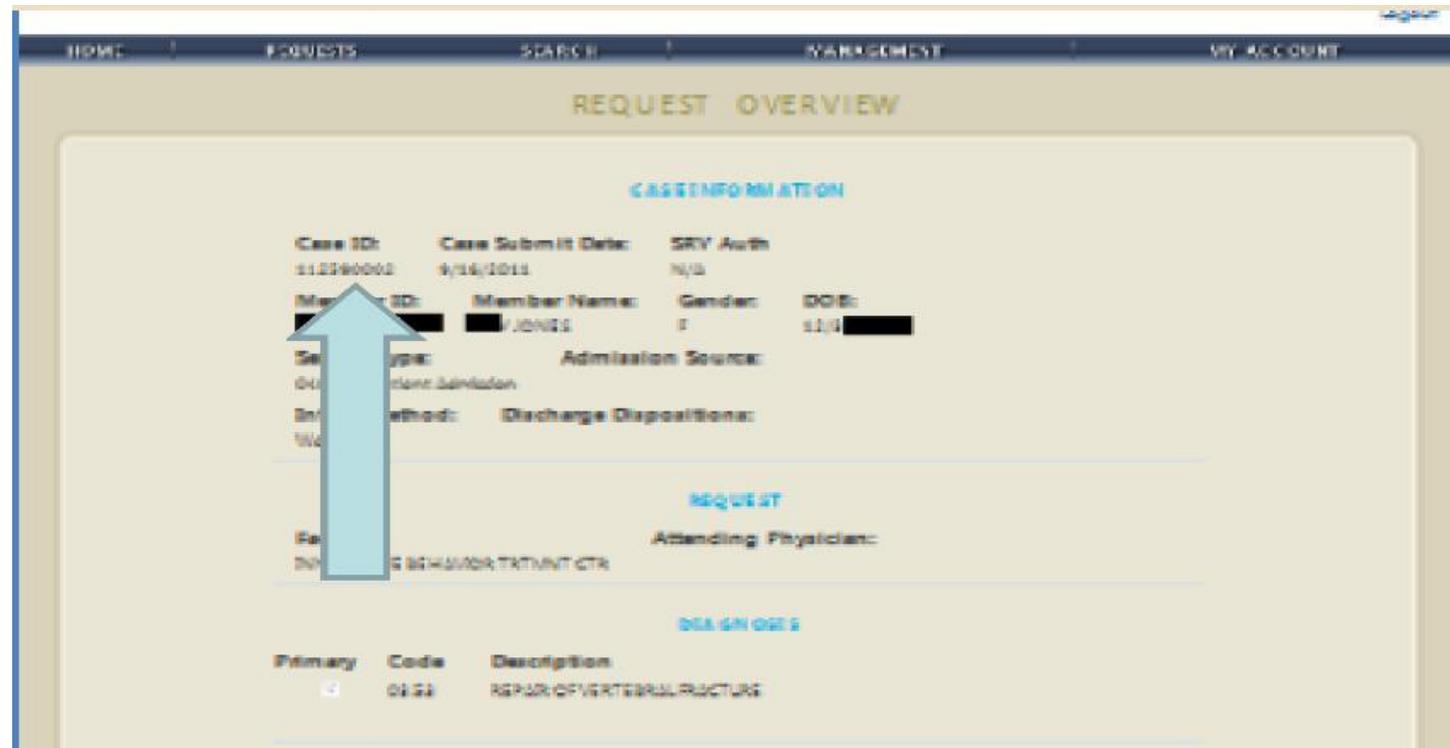


Atrezzo Provider Portal New Case Creation

YOUR ATREZZO PROVIDER PORTAL CASE ENTRY IS NOW COMPLETE

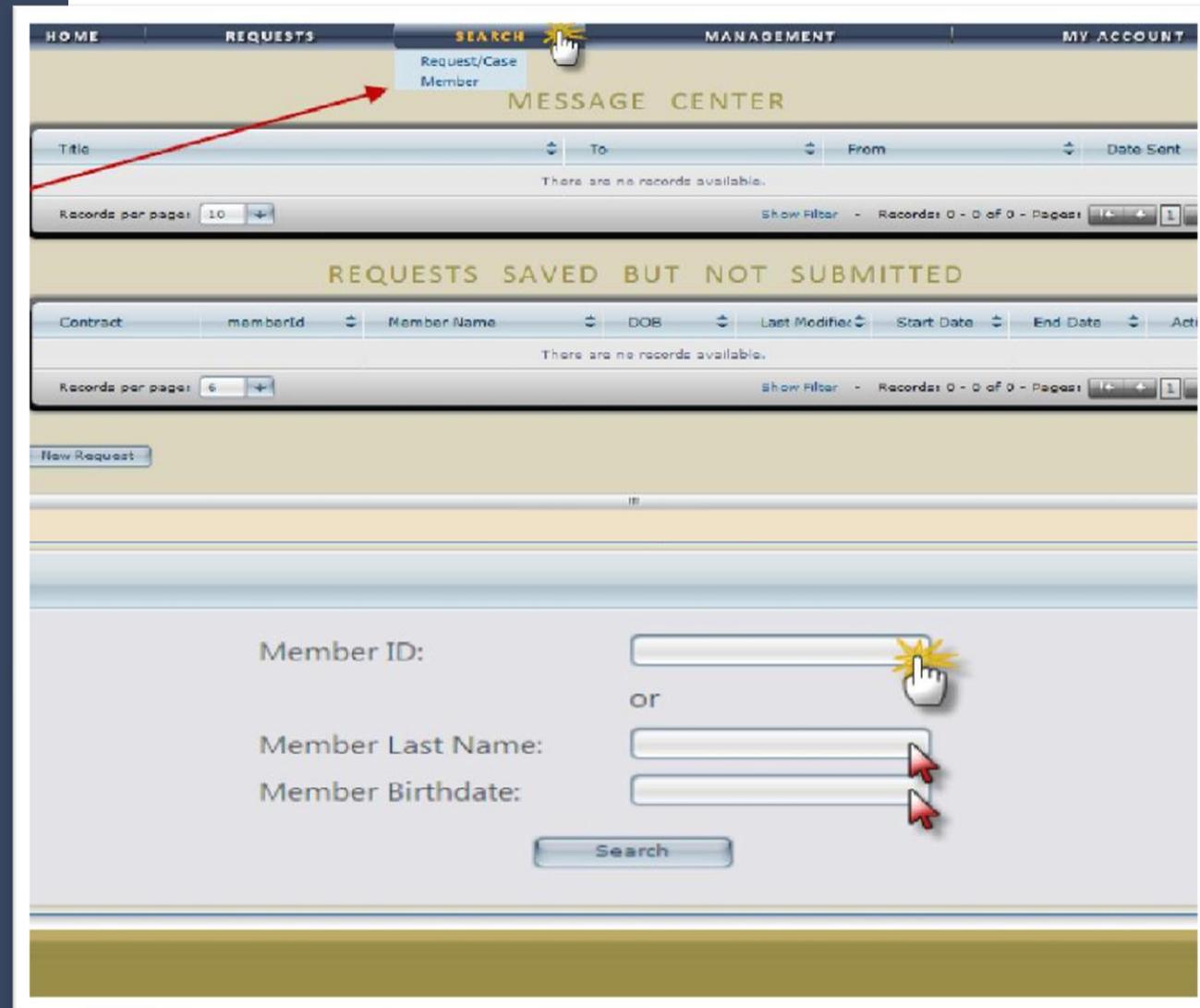
KEPRO case ID number is in the upper left corner of your screen

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Atrezzo Provider Portal: Submitted Case Inquiry

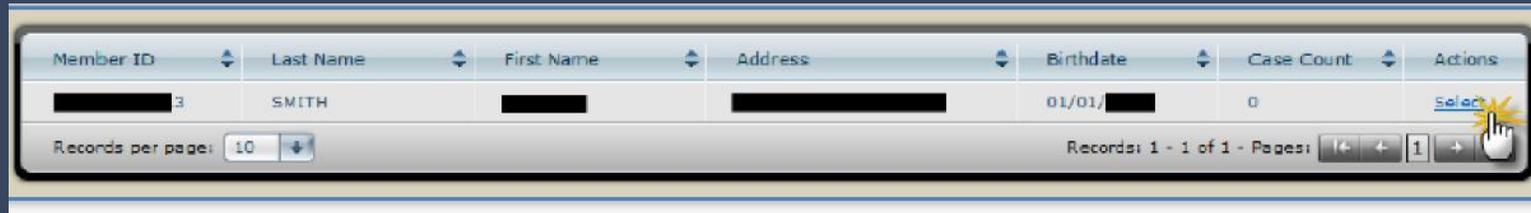
1. Complete Member Search
2. Search by Member ID or Last Name and Date of Birth





ATREZZO PROVIDER PORTAL : SUBMITTED CASE INQUIRY

1. Select the Member from the search results by clicking on the **SELECT** Link (Located under the Actions Column)



2. Always Select the Minnesota Medicaid Contract

Member ID	Last Name	First Name	Address	DOB	Case Count	Contract	
██████	██	██████		09/19/2010	4	Minnesota Medicaid	Select
██████	██	██████		09/19/2010	0	Minnesota EMA	Select
██████	██	██████		09/19/2010	0	Minnesota Transportation	Select



ATREZZO PROVIDER PORTAL: SUBMITTED CASE INQUIRY

1. Verify the member's information and click Select next to the applicable request

REQUESTS

Member ID: Birth Date:
Address: Contact:

Submitted Requests | Servicing/Attending/PCP Requests

Case ID (Reference ID)	Status	Request Info	Service Type	Service Date(s)	Providers	
(N/A) [Procedures] [Diagnosis]	Un-Submitted Approved: 0 Denied: 0 Pending: 0 Void: 0	Outpatient Letters: 0 Messages: 0				[Select] [Extend] [Copy]
163431334 (N/A) [Procedures] [Diagnosis]	Submitted Approved: 0 Denied: 0 Pending: 1 Void: 0	Outpatient Letters: 0 Messages: 1	048a - CMDE	11/14/2016 - 11/14/2016	[Servicing]	[Select] [Extend] [Copy]

Note: Un-Submitted Status indicates your request has not been submitted to KEPRO. View all Un-Submitted request on your home page

ATREZZO PROVIDER PORTAL: SUBMITTED CASE INQUIRY

- Request Overview page will display all case information:
 - Member Information
 - Requested and Certified CPT codes
 - Requested and Certified Quantity
 - Current Status (Pending- Add information, Submitted, Approved or Denied)
 - All Case Messages
 - Ability to send a new messages
 - Attached Documents (All clinical information previously attached for KEPRO Review)
 - Ability to attach additional documentation
 - Clinical Information- View all Clinical notes submitted by KEPRO internal staff members and Providers via the Atrezzo Provider Portal System
 - Ability to add Additional Clinical Information

ATREZZO PROVIDER PORTAL: SUBMITTED CASE INQUIRY

REQUEST OVERVIEW

[PRINT CASE](#) 

CASE INFORMATION

Case ID:	Case Submit Date:	SRV Auth:	Reference ID:
<input type="text" value="34"/>	12/8/2016 4:12 PM	N/A	N/A
Member ID:	Member Name:	Gender:	DOB:
<input type="text" value="74"/>	<input type="text" value="UR"/>	M	<input type="text" value="010"/>

PROCEDURES

0359T	BEHAVIORAL ID ASSESSMENT	Status: Pending	Reason: Additional Info - Pend
Quantity:	Requested	Certified	Freq: N/A
Start Date:	11/14/2016	N/A	Mod: UB
End Date:	11/14/2016	N/A	Rate: N/A
Errors:			

PROVIDER INFORMATION

Servicing Provider:

Attending Physician:

DIAGNOSIS CODES & OTHER CASE INFORMATION

Primary	Code	Description
<input checked="" type="checkbox"/>	F84.0	AUTISTIC DISORDER

Request Type: Prior Auth Intake Method: Web Discharge Dispositions:

MESSAGES AND ATTACHMENTS

MESSAGES
View Messages (1)
Send New Message

LETTERS
No Letters exist for this request

ATTACHED DOCUMENTS

Attach New Document (4 MB size limit)

QUESTIONNAIRES
No Questionnaires exist for this request

CLINICAL INFORMATION

Receiving Provider Notification

Upon review of the submitted clinical documentation KePRO will make a medical necessity determination. Provider notification regarding Approvals, Denials and request for additional documentation or corrections is viewable via the **Atrezzo Provider Portal Message Center**.

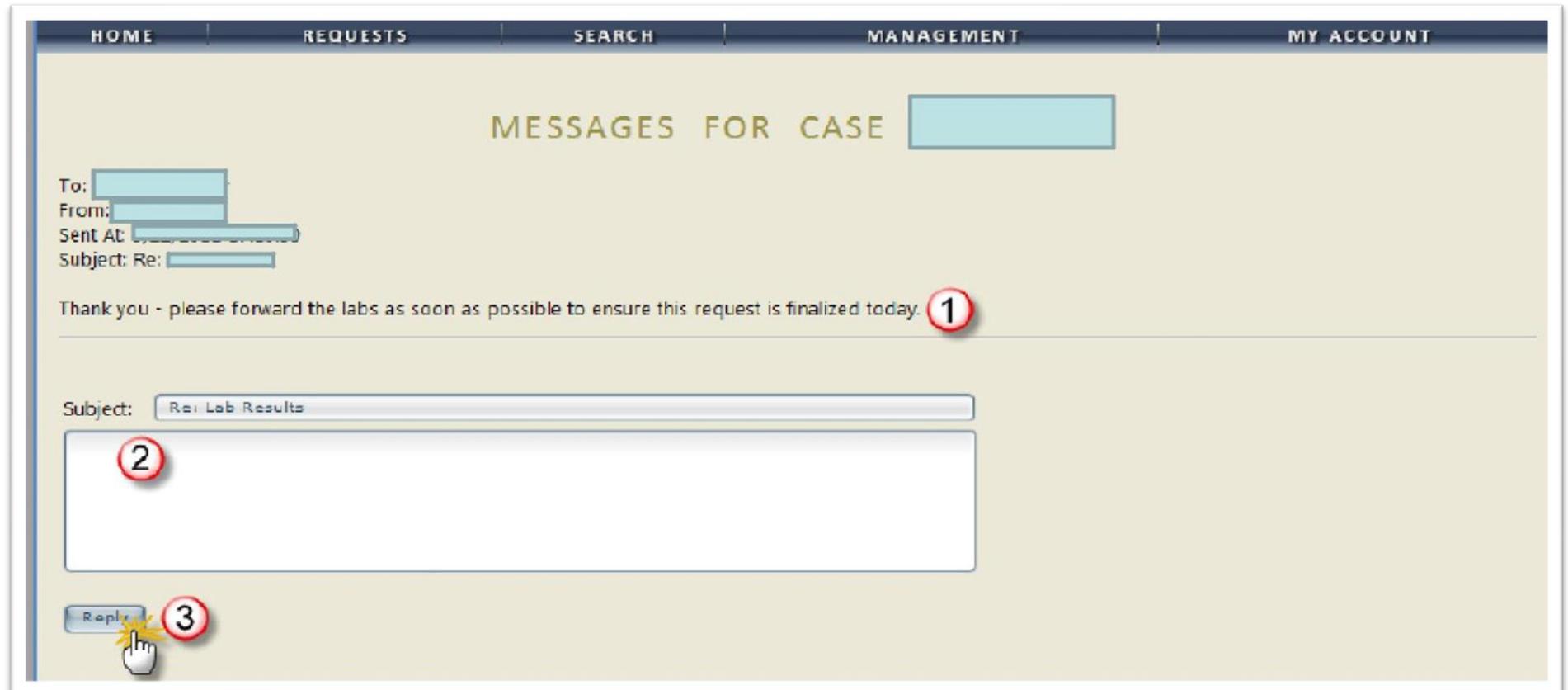
The purpose of the messaging center is to communicate requests for additional information and Provider responses, and determination outcome.

To READ a message sent, go to the Home Screen and click on the message located in the Message Center.

MESSAGE CENTER			
Title	To	From	Date Sent
Approval	<input type="text"/>	KePRO	<input type="text"/>
Approval	<input type="text"/>	KePRO	<input type="text"/>

Receiving Provider Notification

1. The message appears
2. To REPLY to the message, type the reply in the space provided
3. Click the REPLY button



HOME REQUESTS SEARCH MANAGEMENT MY ACCOUNT

MESSAGES FOR CASE

To:
From:
Sent At:
Subject: Re:

Thank you - please forward the labs as soon as possible to ensure this request is finalized today. 1

Subject:

Reply 3

DHS MHCP MANUAL

To access the above material and obtain full access to the MHCP Manual, please visit:

[Early Intensive Developmental and Behavioral Intervention \(EIDBI\) Benefit \(state.mn.us\)](https://state.mn.us/early-intensive-developmental-and-behavioral-intervention-eidbi-benefit)



Atrezzo Provider Portal

For additional assistance, please contact KEPRO Customer Service Department at (866) 433-3658

Refer to the Atrezzo Provider Portal User Guide located under the Help tab on the Home page in the Atrezzo Provider Portal.

<https://atrezzo.kepro.com/HelpDocs/Minnesota/Atrezzo%20Connect%20User%20Guide.pdf>

<https://atrezzo.kepro.com/HelpDocs/Minnesota/AtrezzoFAQ.pdf>



Question & Answers



Keipro[®]

**Thank you for
your attendance
and
participation.**