



Atrezzo User Guide Provider Portal

West Virginia Medical



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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.

The screenshot shows the Kepro login page. At the top is the Kepro logo. Below it is the heading "LOGIN OPTIONS". There are two main login sections:

- Kepro Employees:** Includes the text "Use this login button if you have a Kepro domain account." and a "LOGIN" button. Below the button is a checkbox labeled "Remember Me".
- Customer/Provider:** Includes the text "Use this login button if you are a customer or provider user." and two buttons: "LOGIN WITH PHONE" and "LOGIN WITH EMAIL". Below these buttons is a checkbox labeled "Remember Me".

At the bottom of the login area, there are three lines of text:

- "If you don't already have a Kepro account, you can [register here](#)."
- "If this is your first login with multi-factor authentication, [click here](#) to complete your registration."
- "Having trouble logging in? [Click here](#)."



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 portal registration and MFA registration are a one-time process.

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

Kepro

LOGIN OPTIONS

Kepro Employees

Use this login button if you have a Kepro domain account.

LOGIN

Remember Me

Customer/Provider

Use this login button if you are a customer or provider user.

LOGIN WITH PHONE

LOGIN WITH EMAIL

Remember Me

If you don't already have a Kepro account, you can [register here](#).

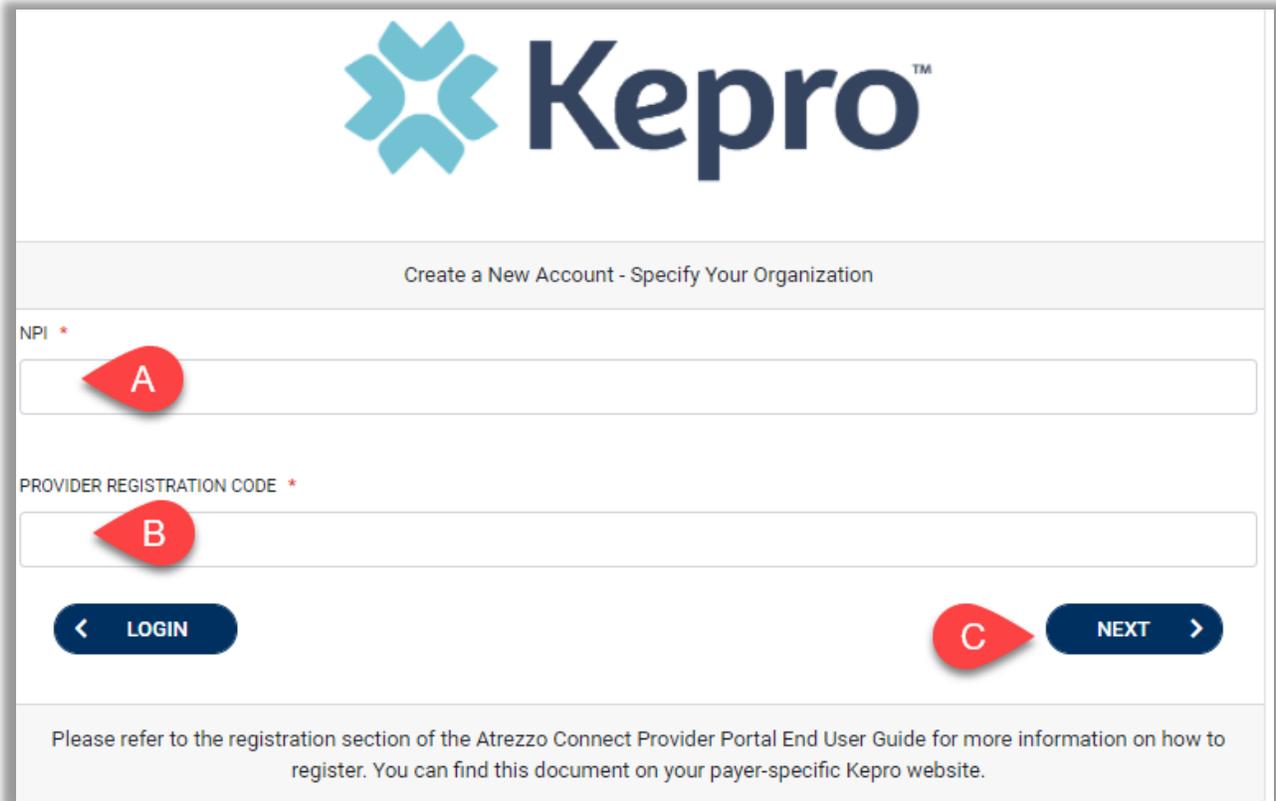
If this is your first login with multi-factor authentication, [click here](#) to complete your registration.

Having trouble logging in? [Click here](#).



Enter your facility NPI in the NPI field (A) and enter the Medicaid ID in the Provider Registration Code field (B), then click **Next**.

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



The screenshot shows the Kepro registration page titled "Create a New Account - Specify Your Organization". It features two input fields: "NPI" and "PROVIDER REGISTRATION CODE". A red teardrop callout labeled "A" points to the NPI field, and another labeled "B" points to the Provider Registration Code field. Below the fields are two buttons: "LOGIN" with a left arrow and "NEXT" with a right arrow. A red teardrop callout labeled "C" points to the "NEXT" button. At the bottom, a footer note reads: "Please refer to the registration section of the Atrezzo Connect Provider Portal End User Guide for more information on how to register. You can find this document on your payer-specific Kepro website."

Create Username, and enter all required fields under Contact Information, then click **Next**.

Create a New Account - Enter User Information

Organizational Information

Please enter the required (*) fields

Account Information

USERNAME *

Contact Information

FIRST NAME *

LAST NAME *

ADDRESS 1

ADDRESS 2

CITY

STATE

Select State ▼

ZIP CODE

EMAIL *

CONFIRM EMAIL *

PHONE

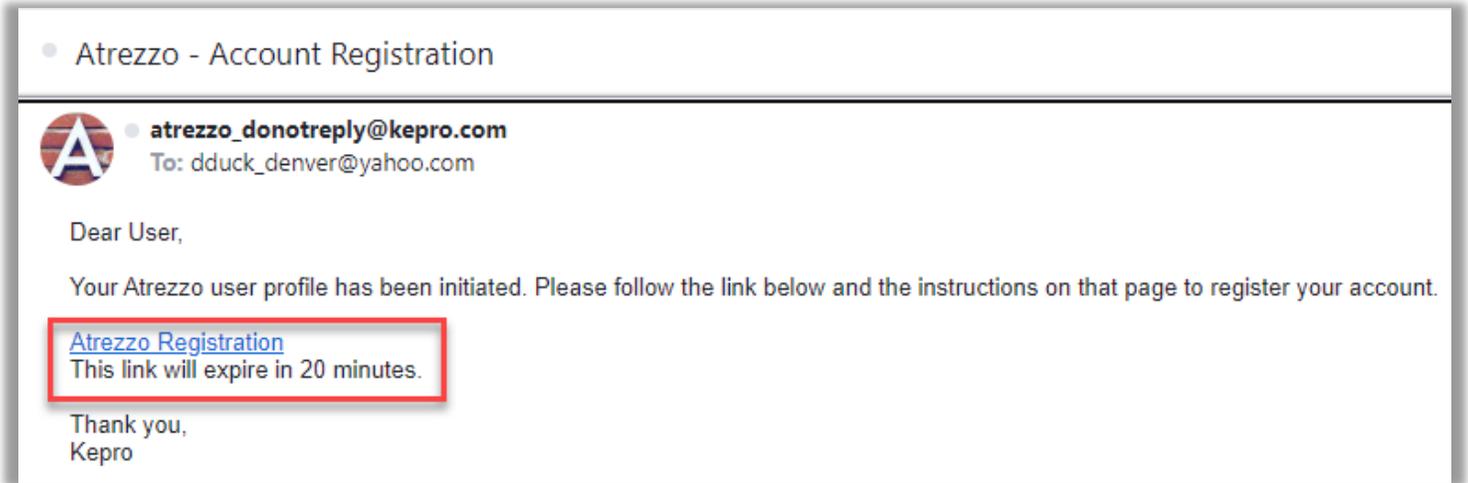
Providers in receipt of Faxed Determination Letters: Official communication of service authorization will be sent to the fax number entered below.

FAX *

[< LOGIN](#) [NEXT >](#)



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.

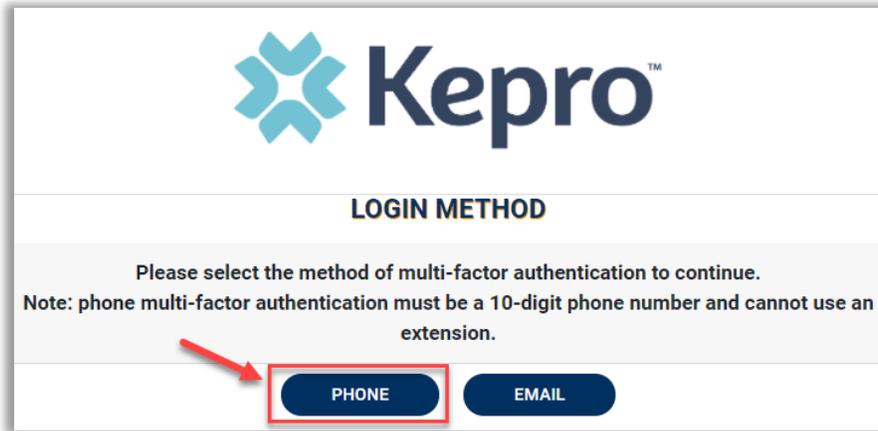


Select the best multi-factor authentication method for you. A phone registration will require a direct line with 10-digits; extensions are not supported.

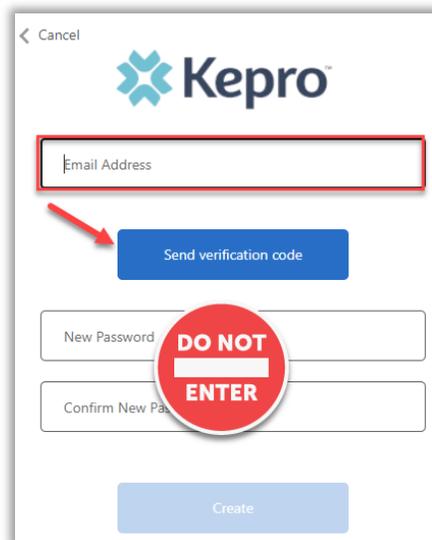
NOTE: When choosing an authentication method, you will be required to enter an email address for both options. Only choose the Email option if you do not have access to a direct phone line (landline or mobile).

Phone Verification

Click the **PHONE** button

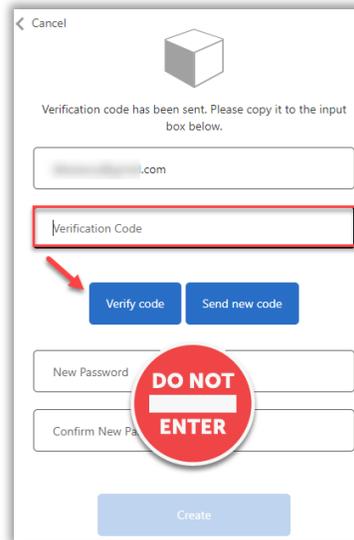


Enter your work email address, then click **Send Verification Code**. A 6-digit code will be sent to your email.



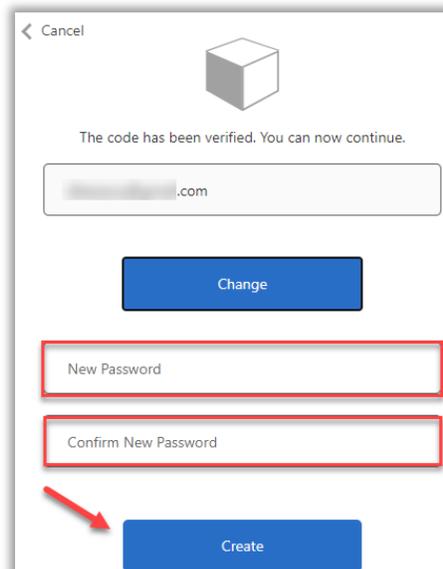
IMPORTANT: Do NOT enter anything in the Password section (this is not needed at this step).

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

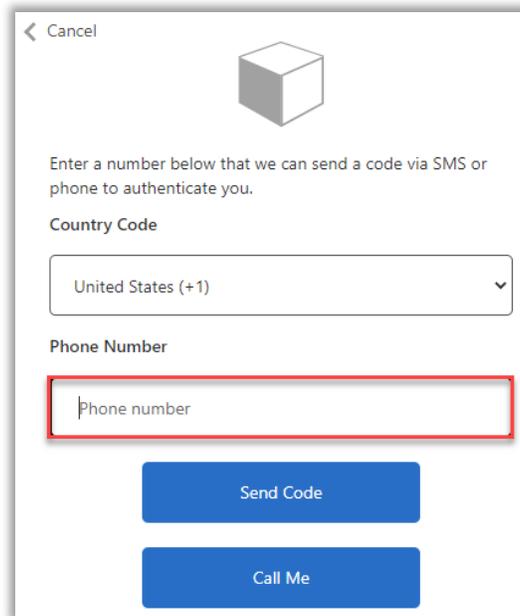


IMPORTANT: Do NOT enter anything in the Password section (this is not needed at this step).

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 and will be used each time you login.



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



A screenshot of a mobile application interface for phone authentication. At the top left is a back arrow and the word "Cancel". In the center is a 3D cube icon. Below the icon is the text: "Enter a number below that we can send a code via SMS or phone to authenticate you." Underneath is a "Country Code" dropdown menu currently set to "United States (+1)". Below that is a "Phone Number" input field with a red border and the placeholder text "Phone number". At the bottom are two blue buttons: "Send Code" and "Call Me".

When phone call is selected, you 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.



A screenshot of a mobile application interface for verification code entry. At the top left is a back arrow and the word "Cancel". In the center is a 3D cube icon. Below the icon is the text: "Enter a number below that we can send a code via SMS or phone to authenticate you." Underneath is a partially obscured phone number starting with "+18". Below that is the text: "Enter your verification code below, or [send a new code](#)". At the bottom is a large empty input field with a red border.

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

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.

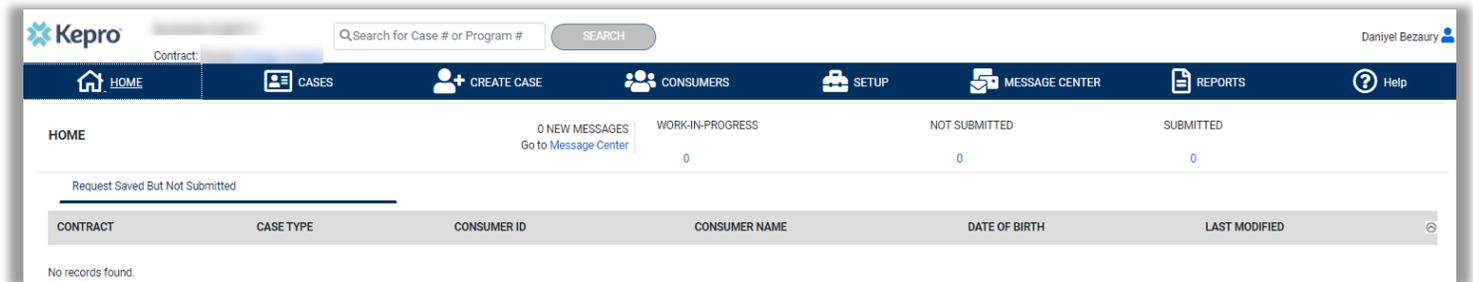
2. Authorized Personnel. This Portal is intended for access solely by physicians and authorized members of their staff. Authorized members include only (a) the personnel permitted to access and use the Portal by Provider ("Standard User(s)") and (b) Standard Users who have been assigned certain administrative 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.

Kepro, Inc. 777 East Park Drive Harrisburg, PA 17111 Toll-free: 800.222.0771 Phone: 717.564.8288 Fax: 717.564.3862 www.kepro.com

I have read and agree to these terms of use.

[CONTINUE >](#)

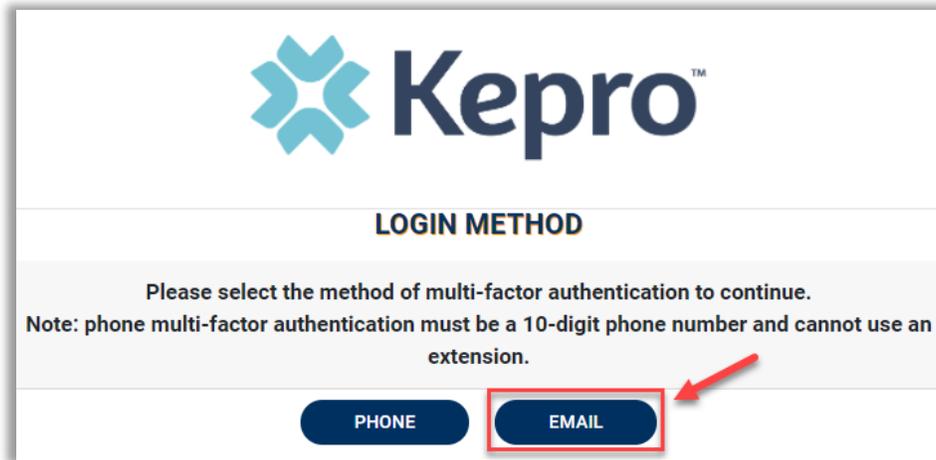
The system will automatically authenticate and display the home page.



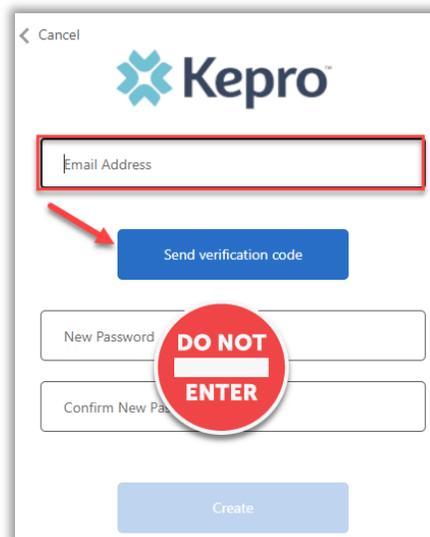
The screenshot shows the Kepro Provider Portal home page. At the top, there is a search bar with the text "Search for Case # or Program #" and a "SEARCH" button. The user's name "Daniyel Bezaury" is displayed in the top right corner. Below the search bar is a navigation menu with icons for HOME, CASES, CREATE CASE, CONSUMERS, SETUP, MESSAGE CENTER, REPORTS, and Help. The main content area shows a "HOME" section with a "Request Saved But Not Submitted" message. Below this is a table with columns: CONTRACT, CASE TYPE, CONSUMER ID, CONSUMER NAME, DATE OF BIRTH, and LAST MODIFIED. The table currently shows "No records found."

Email Verification

Click the **EMAIL** button

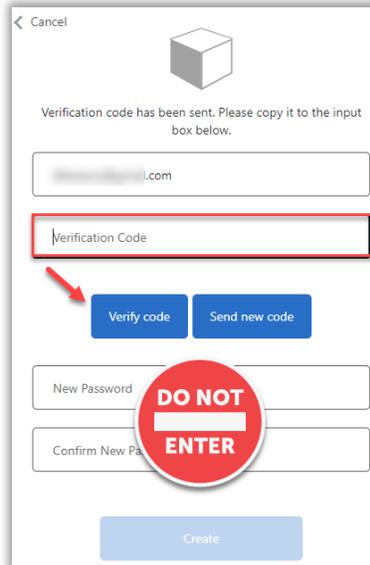


Enter your work email address, then click **Send Verification Code**. A code will be sent to your email.



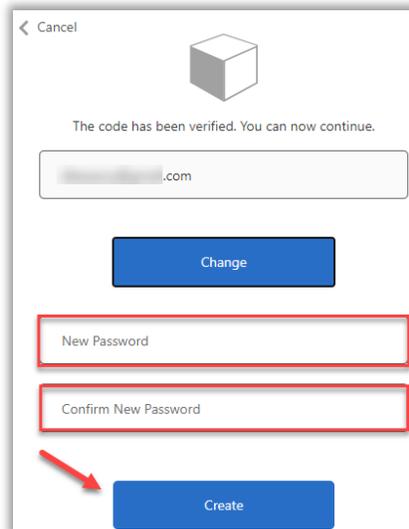
IMPORTANT: Do NOT enter anything in the Password section (this is not needed at this step).

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



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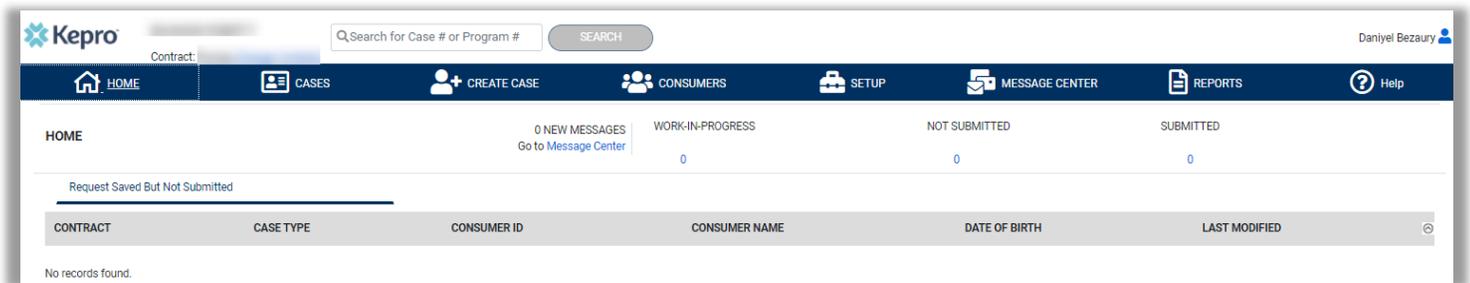
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I have read and agree to these terms of use.

 [CONTINUE >](#)

The system will automatically authenticate and display the home page.

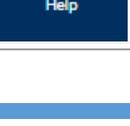


The screenshot shows the Kepro Provider Portal home page. At the top, there is a search bar and a user profile for Daniyel Bezaury. The main navigation bar includes links for HOME, CASES, CREATE CASE, CONSUMERS, SETUP, MESSAGE CENTER, and REPORTS. Below the navigation bar, there are statistics for NEW MESSAGES (0), WORK-IN-PROGRESS (0), NOT SUBMITTED (0), and SUBMITTED (0). A section titled "Request Saved But Not Submitted" is visible. At the bottom, there is a table with columns for CONTRACT, CASE TYPE, CONSUMER ID, CONSUMER NAME, DATE OF BIRTH, and LAST MODIFIED. The table currently shows "No records found."

System Navigation

The navigation pane will remain at the top of the page 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.

	<p>Home</p>	<p>This is the default page upon successful login and will enable you to view submitted cases and any pending submissions.</p>
	<p>Cases</p>	<p>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.</p>
	<p>Create Case</p>	<p>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.</p>
	<p>Consumers</p>	<p>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.</p>
	<p>Setup</p>	<p>Visible to Provider Administrator users only. This section will enable Provider Administrators to manage, edit, and add provider users for the facility.</p>
	<p>Message Center</p>	<p>This section will enable users to communicate directly with the team at Kepro regarding specific Consumers and/or cases.</p>
	<p>Reports</p>	<p>This section will display all available reports for those who have access. User specific reports will be listed on this page, no search required.</p>
	<p>Help</p>	<p>This section will display available information including User Guides, FAQs, Latest Release Notes, and Password Guidelines.</p>

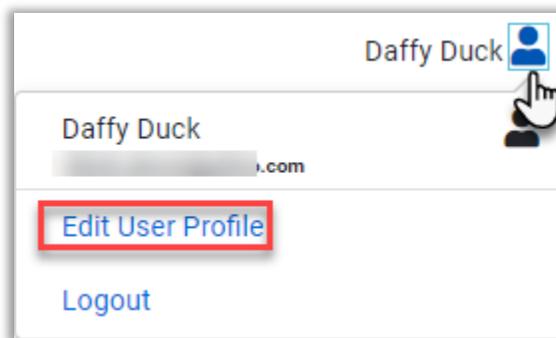
General System Features

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.

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.



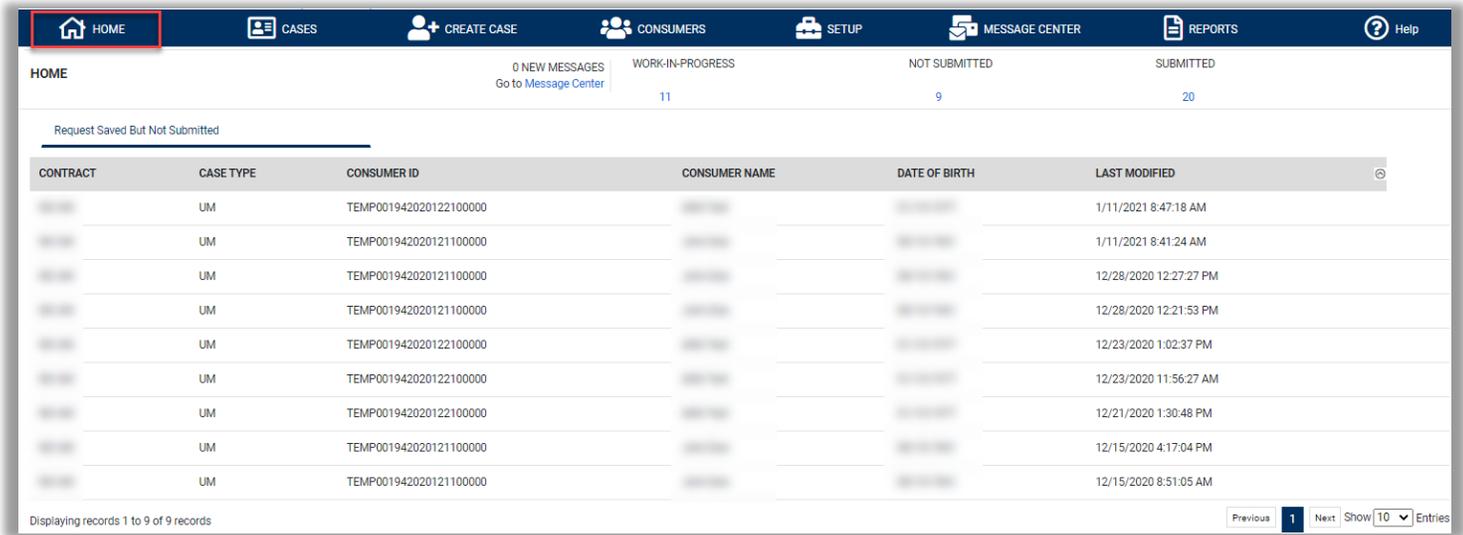
- A. To search by Case ID or Authorization Number, enter the specified information in this box and click **Search** (see [Searching by Case ID](#) for step-by-step instructions).
- B. This section will identify the user logged in. Click on the  icon in the upper right corner to open menu options where you can Edit User Profile or Logout.



Home Screen View

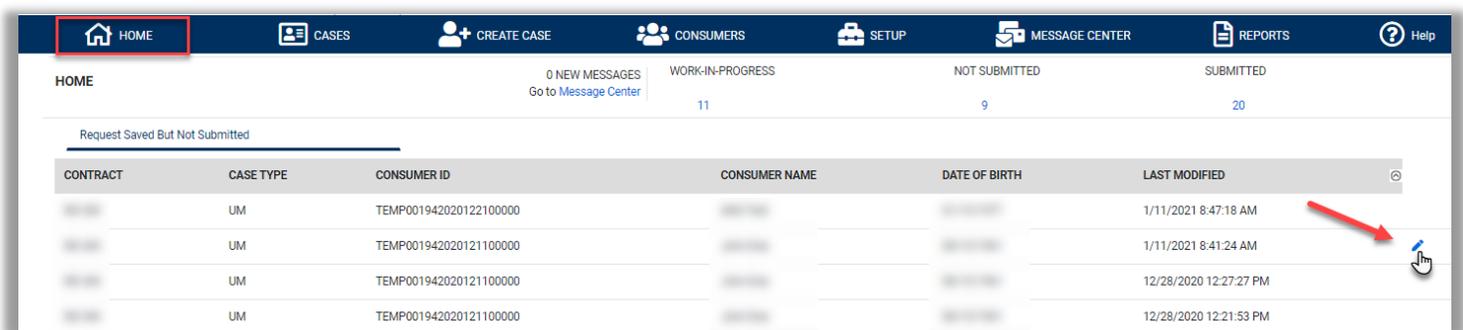


Once successfully logged in, the user will be taken to the Atrezzo Home Screen which will default to display available “Request Saved But Not Submitted”. This will provide a list of Consumers (Members) with cases that have been started, but are incomplete and have not been submitted to Kepro.



CONTRACT	CASE TYPE	CONSUMER ID	CONSUMER NAME	DATE OF BIRTH	LAST MODIFIED
████	UM	TEMP001942020122100000	████	████	1/11/2021 8:47:18 AM
████	UM	TEMP001942020121100000	████	████	1/11/2021 8:41:24 AM
████	UM	TEMP001942020121100000	████	████	12/28/2020 12:27:27 PM
████	UM	TEMP001942020121100000	████	████	12/28/2020 12:21:53 PM
████	UM	TEMP001942020122100000	████	████	12/23/2020 1:02:37 PM
████	UM	TEMP001942020122100000	████	████	12/23/2020 11:56:27 AM
████	UM	TEMP001942020122100000	████	████	12/21/2020 1:30:48 PM
████	UM	TEMP001942020121100000	████	████	12/15/2020 4:17:04 PM
████	UM	TEMP001942020121100000	████	████	12/15/2020 8:51:05 AM

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).



CONTRACT	CASE TYPE	CONSUMER ID	CONSUMER NAME	DATE OF BIRTH	LAST MODIFIED
████	UM	TEMP001942020122100000	████	████	1/11/2021 8:47:18 AM
████	UM	TEMP001942020121100000	████	████	1/11/2021 8:41:24 AM
████	UM	TEMP001942020121100000	████	████	12/28/2020 12:27:27 PM
████	UM	TEMP001942020121100000	████	████	12/28/2020 12:21:53 PM

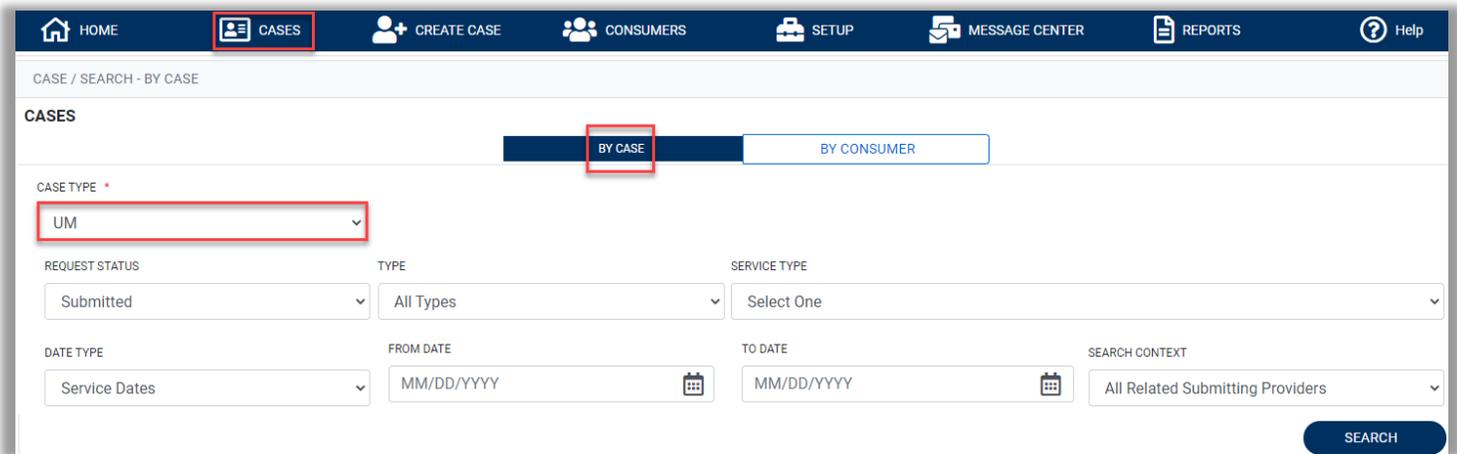
Cases



This section will identify the steps to search for cases based on selected search parameters. This section is searchable by Case or Consumer (Member). 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.



The screenshot shows the 'CASES' search interface. The 'BY CASE' tab is selected. The 'CASE TYPE' dropdown is set to 'UM'. Below it, there are three dropdown menus: 'REQUEST STATUS' (Submitted), 'TYPE' (All Types), and 'SERVICE TYPE' (Select One). At the bottom, there are 'DATE TYPE' (Service Dates), 'FROM DATE' (MM/DD/YYYY), 'TO DATE' (MM/DD/YYYY), and 'SEARCH CONTEXT' (All Related Submitting Providers). A 'SEARCH' button is located at the bottom right.

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



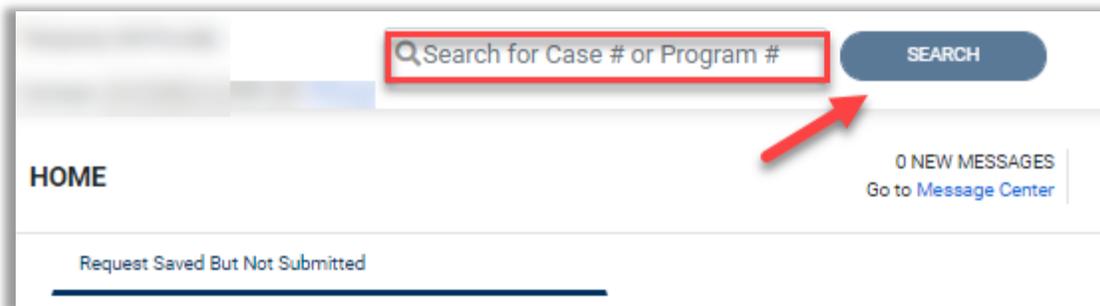
The screenshot shows the 'CASES' search interface with the 'BY CONSUMER' tab selected. There are three input fields: 'MEMBER ID', 'LAST NAME', and 'DATE OF BIRTH' (MM/DD/YYYY). A 'SEARCH CONTEXT' dropdown is set to 'All Related Submitting Providers'. A red box highlights a message: '*Combination of DOB and Last Name or Member ID is required'. A 'SEARCH' button is located at the bottom right.

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

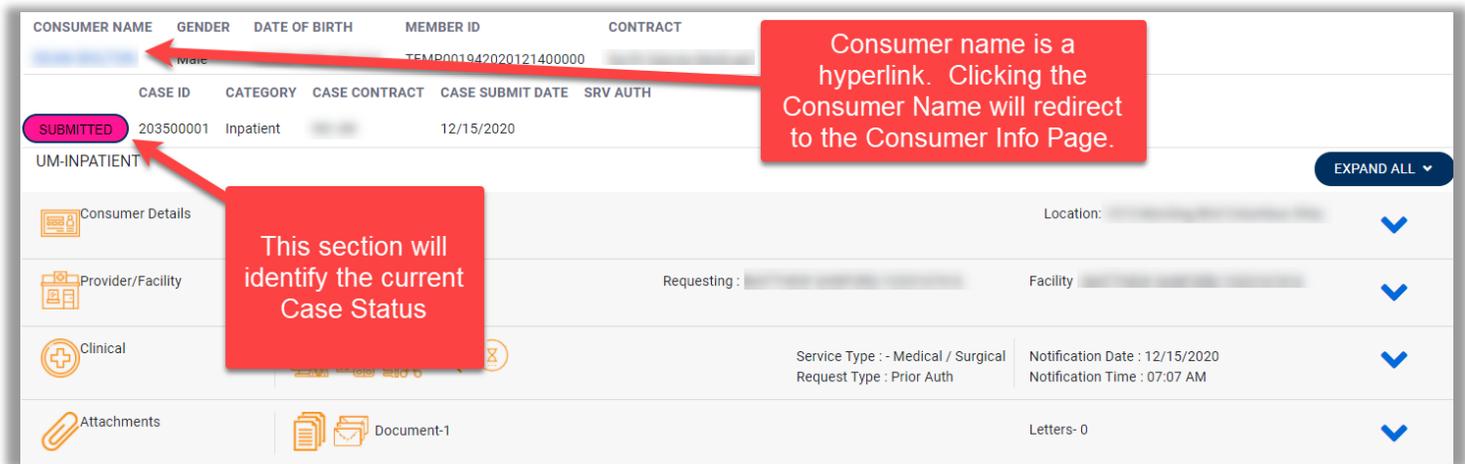
CASE ID	MEMBER INFO	STATUS	REQUEST INFO	SERVICE TYPE	SERVICE DATE(S)	PROCEDURES
203460001 8015979 View Request [Extend] [Copy] [Discharge]	36324343	Submitted Approved: 1 Denied: 0 Pending: 0 Void: 0	Submit Date: 12/11/2020 Outpatient Letters: 0 Messages: 1	- Medical / Surgical	12/31/2020 12:00:00 AM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

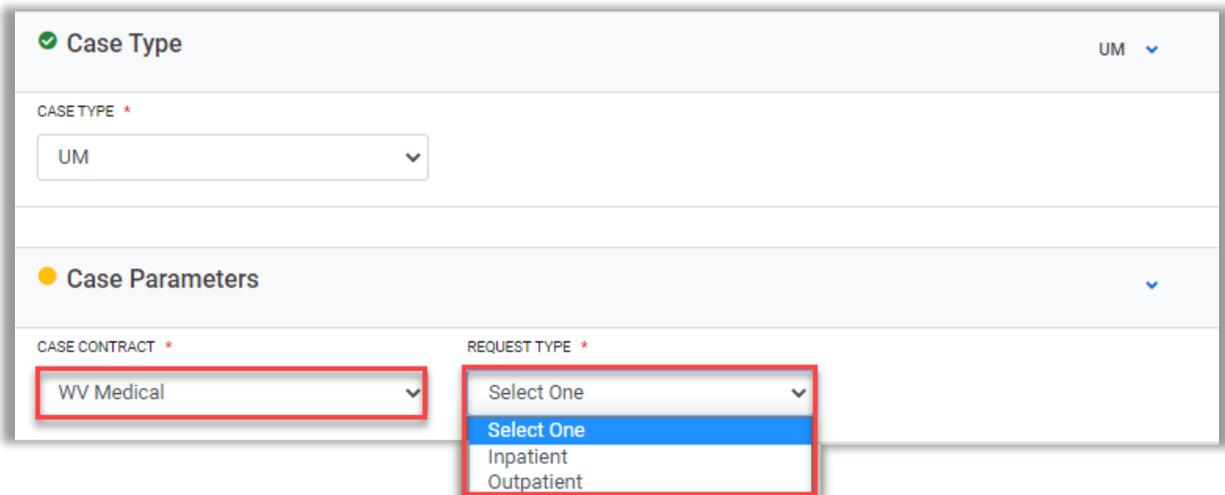
	<p>This identifies a case that has been started, but has not been completed or officially submitted. This case will not have an associated Case ID until it is submitted. Once all information is entered, the case will move to Submitted. These cases will be found on the Home Screen under Requests Saved But Not Submitted.</p>
	<p>This 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.</p>
	<p>This identifies the case has been assigned to a clinical reviewer. The case will remain in this process until a determination has been made.</p>
	<p>This 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).</p>

Create Case



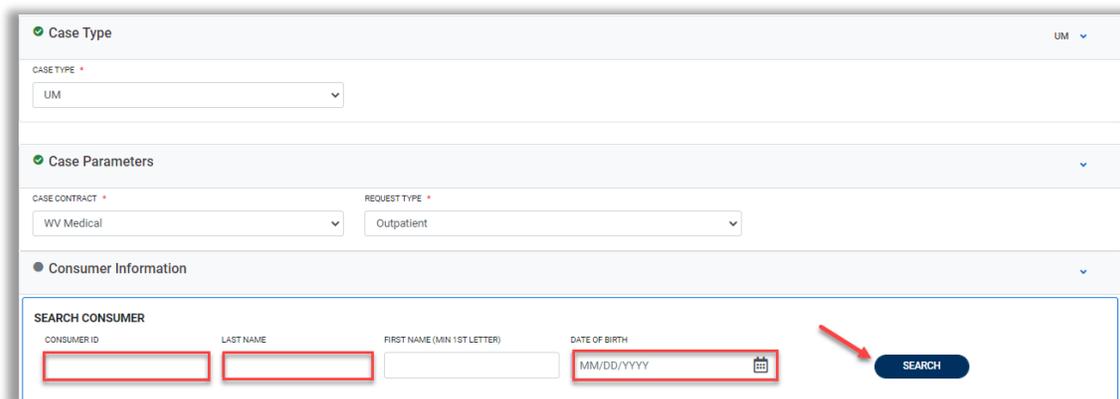
This section will identify the steps to create a new inpatient or outpatient request. In the navigation pane, click **CREATE CASE**.

The Case Type will default to UM. Select Case Contract: **WV Medical** and enter Request Type: **Inpatient or Outpatient**.



The screenshot shows the 'Case Type' and 'Case Parameters' sections of the form. The 'Case Type' section has a dropdown menu set to 'UM'. The 'Case Parameters' section has two dropdown menus: 'Case Contract' set to 'WV Medical' and 'Request Type' set to 'Select One'. The 'Request Type' dropdown menu is open, showing options: 'Select One', 'Inpatient', and 'Outpatient'. Red boxes highlight the 'WV Medical' dropdown and the 'Request Type' dropdown menu.

To search the consumer, you must enter the Consumer ID or Last Name and Date of Birth, then select **SEARCH**.



The screenshot shows the 'Consumer Information' section of the form. It has a sub-section titled 'SEARCH CONSUMER' with four input fields: 'CONSUMER ID', 'LAST NAME', 'FIRST NAME (MIN 1ST LETTER)', and 'DATE OF BIRTH'. The 'DATE OF BIRTH' field has a calendar icon and the placeholder text 'MM/DD/YYYY'. A red arrow points to the 'SEARCH' button.

Click the radio button to select the consumer.

● Consumer Information

SEARCH CONSUMER

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

SELECT MEMBER	NAME	DATE OF BIRTH	CONSUMER ID	CONTRACT	CASE COUNT
<input checked="" type="radio"/>	ANG Test	12/15/1960	TEMP001762021073000000	West Virginia	3

Displaying records 1 to 1 of 1 records Previous 1 Next Show 10 Entries NEXT >

After selecting the proper Consumer, click **CREATE CASE**.

✔ Case Type UM

CASE TYPE *

✔ Case Parameters

CASE CONTRACT * REQUEST TYPE *

✔ Consumer Information ANG Test

CONSUMER NAME	ADDRESS	DATE OF BIRTH	SSN	CONSUMER MEMBER ID
ANG Test	123 Somewhere Street	12/15/1960		TEMP001762021073000000

Submitted Requests | Servicing Requests

Case Level Member ID CaseID	Status	Request Info	Service Type	Service Date(s)	Procedures (Top 10)
No records found.					

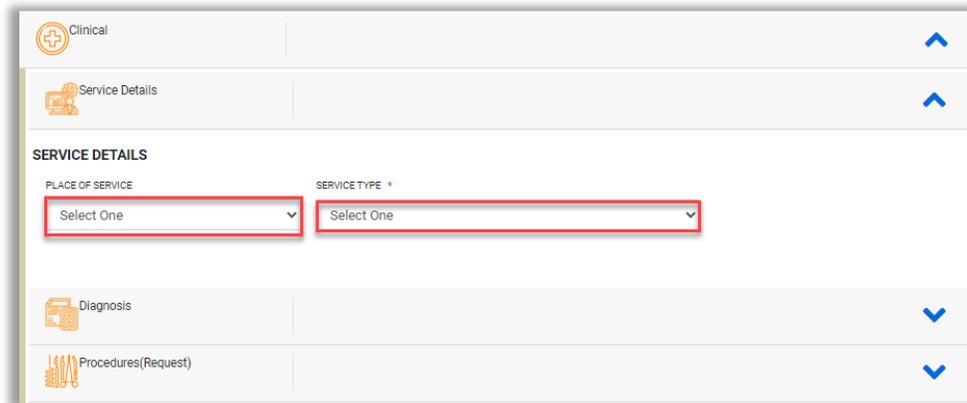
The next page that renders will be the shell of the case and will reflect Un-Submitted. This means the case request has been started, but not yet submitted to Kepro for review. Enter the rest of the clinical information pertaining to the request. Follow the instructions below to submit an [inpatient](#) 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				
Consumer Details				Location: 123 Somewhere Street Anywhere North Dakota;
Provider/Facility		Requesting : MATTHEW SANFORD/1033167416 Servicing : MATTHEW SANFORD/1033167416		
Clinical		Service Type :	Notification Date : 12/21/2020	
		Request Type :	Notification Time : 01:26 PM	
Attachments	Document-0	Letters- 0		
Communications	Most Recent Interaction date:	Most Recent Note date:		

Note the case is Un-Submitted and there is not a Case ID assigned. This will be updated once the request is submitted.

Outpatient Request

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



The screenshot shows a web interface for submitting an outpatient request. The 'Service Details' section is expanded, showing two dropdown menus: 'PLACE OF SERVICE' and 'SERVICE TYPE'. Both dropdowns currently display 'Select One'. Below these are sections for 'Diagnosis' and 'Procedures(Request)', both of which are collapsed.

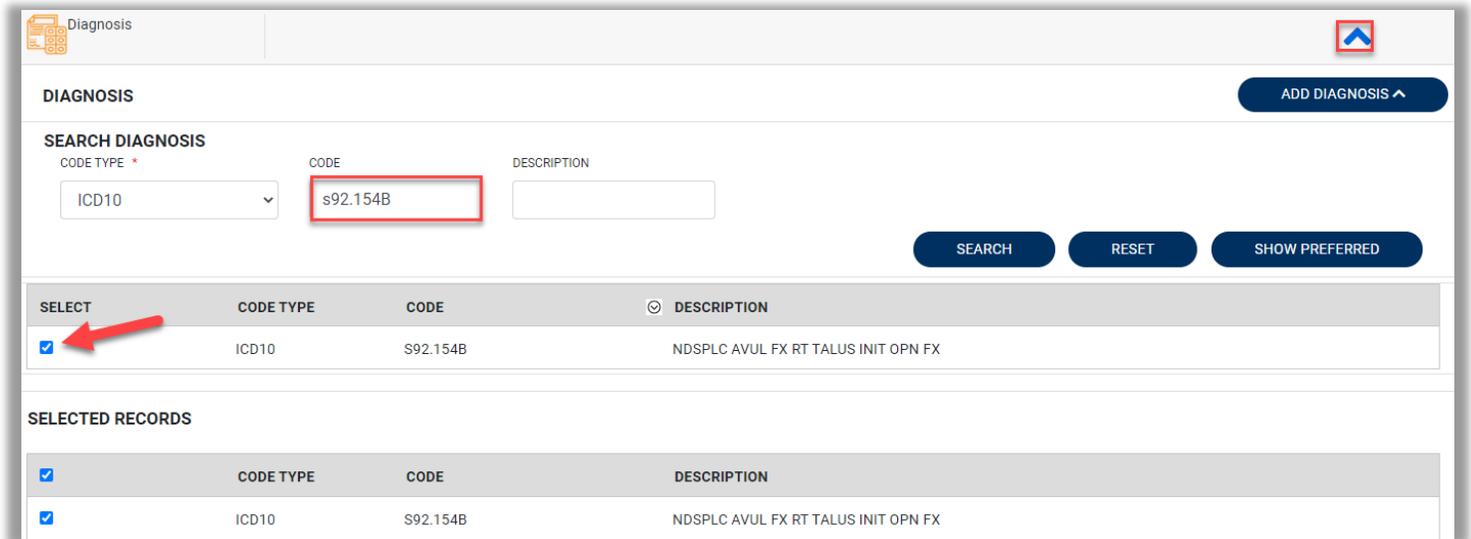
Place of Service Options include:

- Ambulatory Surgical Center
- Assisted Living Facility
- Birthing Center
- Community
- Home
- Hospice
- Independent Clinic
- Independent Laboratory
- Inpatient Hospital
- Inpatient Rehab Center
- Military Treatment Facility
- Mobile Unit
- Nursing Facility
- Office
- Outpatient Hospital
- Skilled Nursing Facility
- Urgent Care Facility

Outpatient Service Types Include:

- 005-Private Duty Nursing
- 006-Home Health
- 011-Chiropractic
- 012-Vision Care
- 013-Physical Therapy
- 014-Occupational Therapy
- 015-DME
- 016-Orthotics
- 017-Prosthetics
- 019-Dental – Office
- 022-Speech Therapy
- 022-Audiology
- 030-Pulmonary Rehabilitation
- 030-Cardiac Rehabilitation
- 031-Podiatry
- 107-Hospice
- 200-Surgical Procedures
- 200-Physician Administered Drugs
- 998-Radiology
- 998-Laboratory
- 998-Radiation

After entering Service Details, enter Diagnosis. 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.



DIAGNOSIS ADD DIAGNOSIS ^

SEARCH DIAGNOSIS

CODE TYPE * CODE DESCRIPTION

SELECT	CODE TYPE	CODE	DESCRIPTION
<input checked="" type="checkbox"/>	ICD10	S92.154B	NDSPLC AVUL FX RT TALUS INIT OPN FX

SELECTED RECORDS

SELECT	CODE TYPE	CODE	DESCRIPTION
<input checked="" type="checkbox"/>	ICD10	S92.154B	NDSPLC AVUL FX RT TALUS INIT OPN FX

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

SELECT	CODE TYPE	CODE	DESCRIPTION
<input checked="" type="checkbox"/>	ICD10	R26.0	ATAXIC GAIT

SELECTED RECORDS			
	CODE TYPE	CODE	DESCRIPTION
<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>	ICD10	R26.0	ATAXIC GAIT
<input checked="" type="checkbox"/>	ICD10	S92.154B	NDSPLC AVUL FX RT TALUS INIT OPN FX

Displaying records 1 to 2 of 2 records

Previous 1 Next Show 10 Entries

CANCEL **ADD DIAGNOSIS**

When all diagnosis codes are entered, the page will scroll to the procedure section. Select the Request Type from the dropdown options.

Procedures(Request)

Request 01 **COPY**

REQUEST TYPE * NOTIFICATION DATE * 12/16/2021 NOTIFICATION TIME * 5:48 PM

Request Type options include:

- Admission
- Concurrent
- Election Period 1
- Election Period 2
- Election Period 3
- Election Period 4
- EPSDT
- Established
- Expedited
- Expedited Reconsideration
- Initial
- Prior Auth
- Reconsideration
- Retrospective

After selecting the Request Type, enter all applicable procedure codes. This process is similar to adding a diagnosis. Select the Code Type, enter the procedure code or description, then click **Search**. Select the appropriate procedure codes to be added. Once all codes are listed, select **Add Procedure**.

SEARCH PROCEDURES

CODE TYPE * CODE STARTS WITH DESCRIPTION

SELECT PROCEDURES

SELECT	CODE TYPE	CODE	DESCRIPTION
<input checked="" type="checkbox"/>	CPT	E0290	Hosp bed fx ht w/o rails w/m

SELECTED RECORDS

SELECT	☑	CODE TYPE	CODE	DESCRIPTION
<input checked="" type="checkbox"/>		CPT	E0141	Rigid wheeled walker adj/fix
<input checked="" type="checkbox"/>		CPT	E0163	Commode chair with fixed arm
<input checked="" type="checkbox"/>		CPT	E0290	Hosp bed fx ht w/o rails w/m

Displaying records 1 to 3 of 3 records

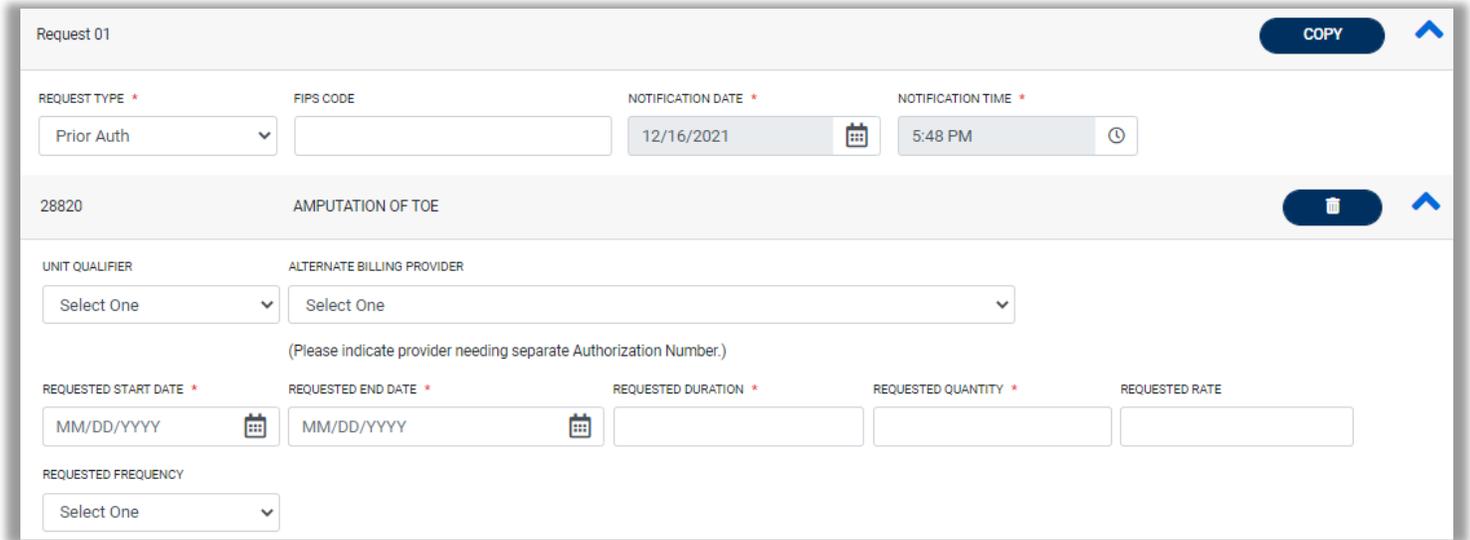
 Show Entries

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 an expanded stacked layout.

Procedures
⬆

E0141	Rigid wheeled walker adj/fix	<input type="button" value="🗑"/>	<input type="button" value="⬇"/>
E0163	Commode chair with fixed arm	<input type="button" value="🗑"/>	<input type="button" value="⬇"/>
E0290	Hosp bed fx ht w/o rails w/m	<input type="button" value="🗑"/>	<input type="button" value="⬇"/>

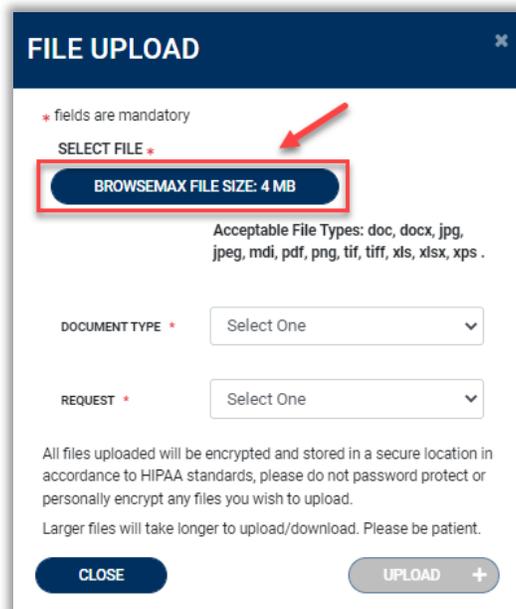
Once all procedure codes are entered, each section will expand. Enter all required fields including start date, end date, duration, and quantity. Additional information to solidify the request is helpful, including Unit Qualifier and Frequency.



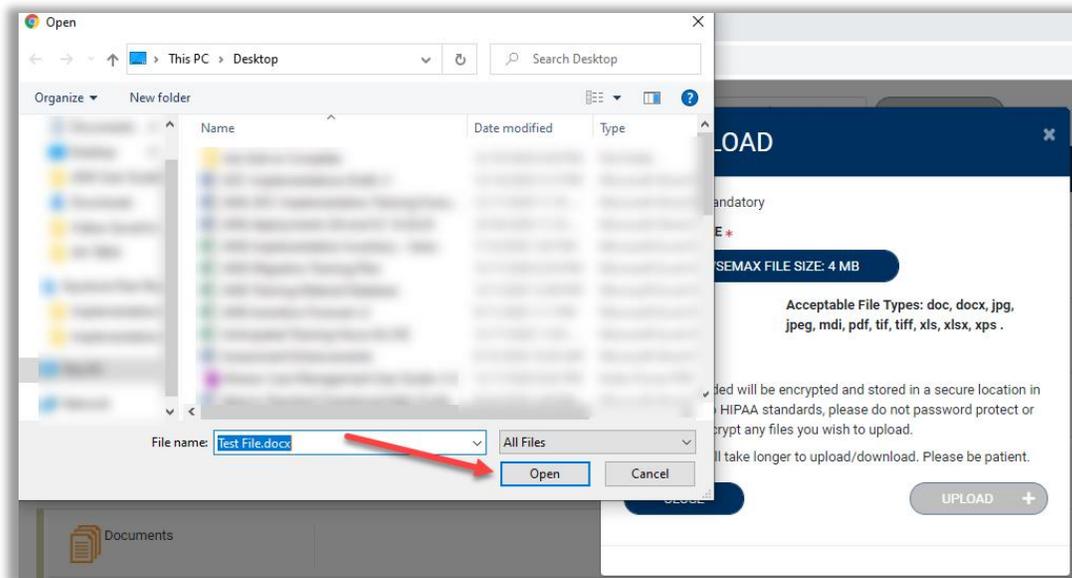
After entering all clinical information, expand Attachments, then expand Documents to upload any supporting documentation. Select **CLICK HERE TO UPLOAD FILE**.



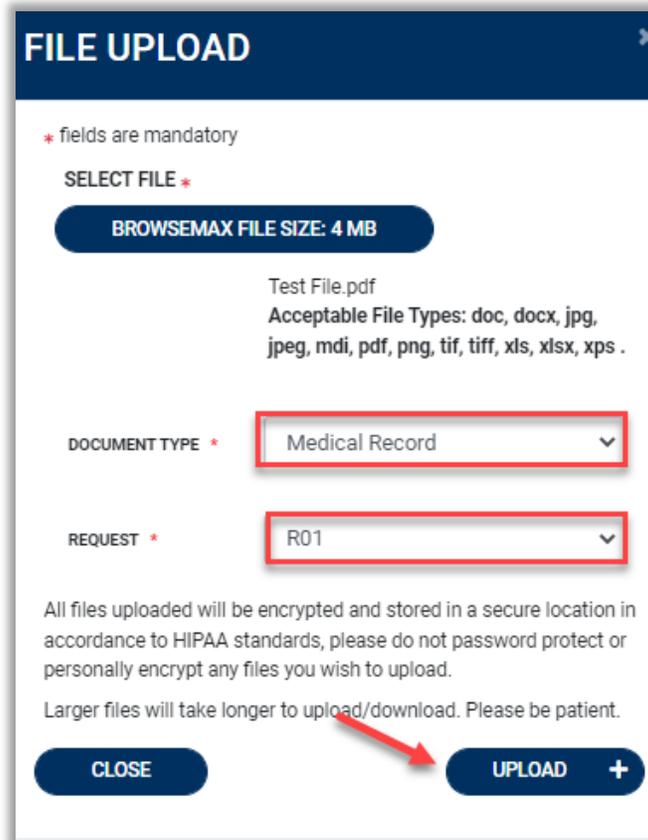
A pop up will display, click **Browse** to search for the supporting documentation.



Select the file and click **Open**.



Select Document Type and Request, then click **UPLOAD**.



FILE UPLOAD ✕

* fields are mandatory

SELECT FILE *

BROWSEMAY FILE SIZE: 4 MB

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

DOCUMENT TYPE * Medical Record ▾

REQUEST * R01 ▾

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.

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

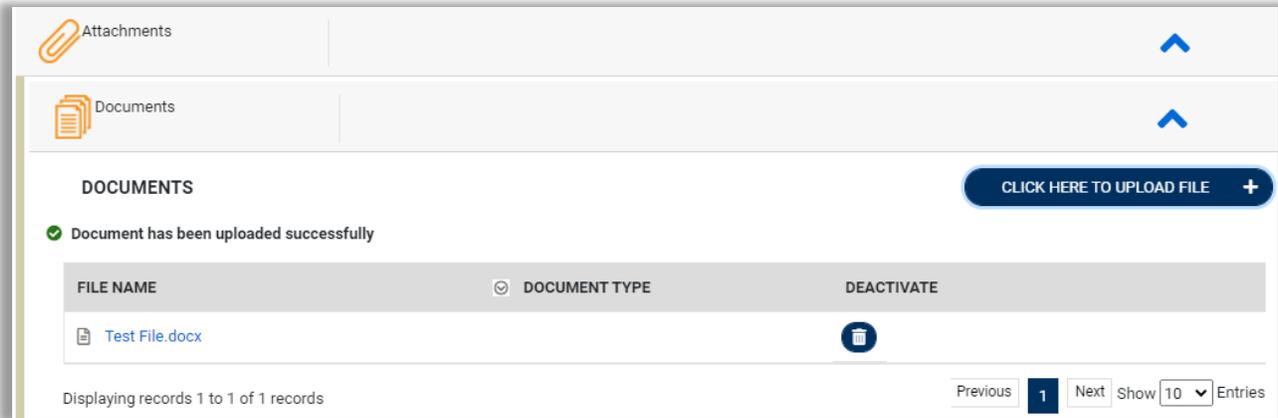
CLOSE **UPLOAD +**

Document Types include:

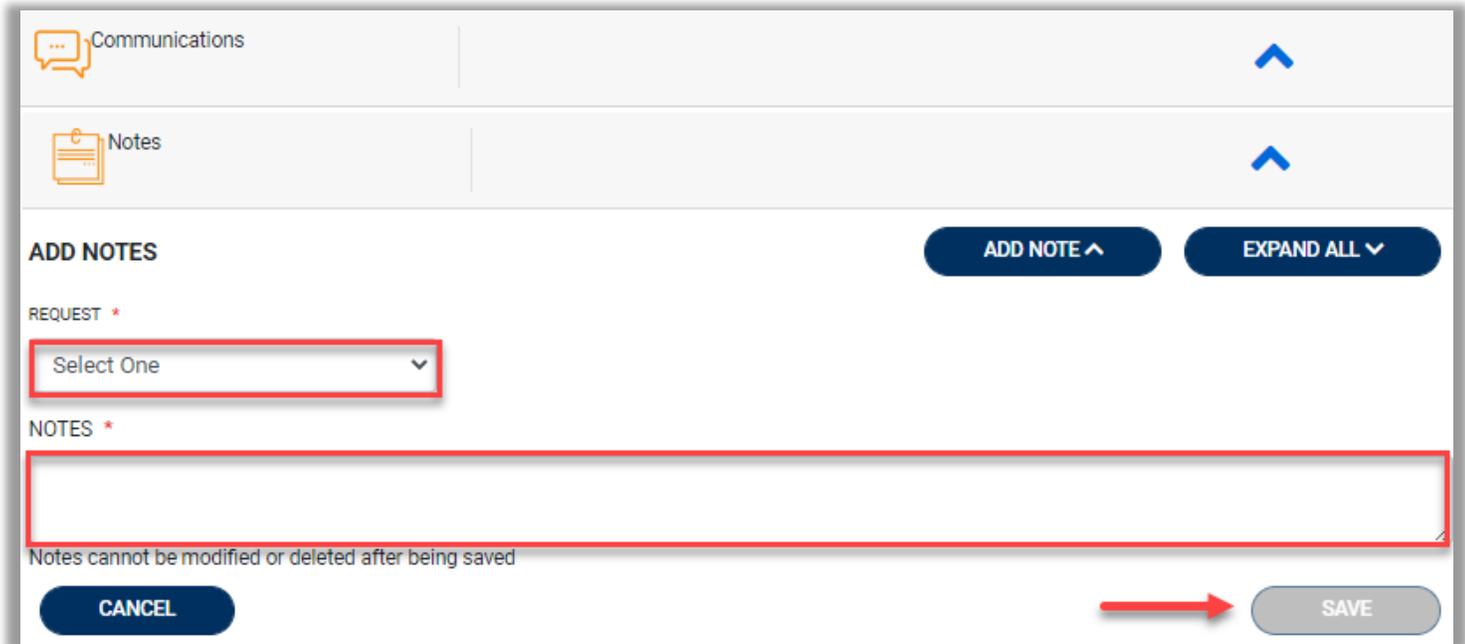
- 485
- Appeal Document
- CMN
- Cost Calculation
- Cost Invoice
- Documentation
- EOB
- Evaluations
- Grids
- Labs
- MCM-1 BH Form
- Medical Record
- Other
- Release of Information
- Rx Order
- X-Rays

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

NOTE: Repeat the above steps until all supporting documentation is uploaded.



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**, select the Request, 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**.

CONSUMER NAME	GENDER	DATE OF BIRTH	MEMBER ID/PLAN	CONTRACT
ANG TEST	F	12/15/1960 (61 Yrs)	See Consumer Details	West Virginia
CASE ID CATEGORY		CASE CONTRACT	CASE SUBMIT DATE	SRV AUTH
UN-SUBMITTED		Outpatient	WV Medical	
UM-OUTPATIENT			CASE SUMMARY	
Consumer Details			Location: 123 Somewhere Street Anywhere West Virginia;	
Provider/Facility		Requesting : Temporary WV Provider/9999999999 Servicing : Temporary WV Provider/9999999999		
Clinical		Service Type : 200 - Surgical Procedures Request Type : Prior Auth Notification Date : 12/16/2021 Notification Time : 06:19 PM		
Questionnaires				
Attachments		Document-1		
Communications		Most Recent Note date:12/16/2021		
<input type="checkbox"/> I understand that precertification does not guarantee payment. I understand that precertification only identifies medical necessity and does not identify benefits.				
CANCEL REQUEST			SUBMIT	

If a questionnaire is required, you will receive a pop up at the time of submission. Click **Ignore and Submit** to complete case submission.

Atrezzo
✕

The following errors/warnings were encountered:

Warning: A required questionnaire has been attached for you to complete

CANCEL

IGNORE AND SUBMIT

The page will refresh, expand Questionnaires to complete the required document.

CONSUMER NAME	GENDER	DATE OF BIRTH	MEMBER ID/PLAN	CONTRACT
ANG TEST	F	12/15/1960 (61 Yrs)	39999885	West Virginia
CASE ID	CATEGORY	CASE CONTRACT CASE SUBMIT DATE SRV AUTH		
213500036	Outpatient	WV Medical 12/16/2021		

UM-OUTPATIENT		CASE SUMMARY	COPY	EXTEND	EXPAND ALL ▾
Consumer Details		Location: 123 Somewhere Street Anywhere West Virginia,			▾
Provider/Facility		Requesting : Temporary WV Provider/9999999999 Servicing : Temporary WV Provider/9999999999			▾
Clinical		Service Type : 200 - Surgical Procedures Request Type : Prior Auth		Notification Date : 12/16/2021 Notification Time : 06:21 PM	▾
Questionnaires		Complete: 0, Incomplete: 1			▾
Attachments		Document-1		Letters- 0	▾
Communications		Most Recent Note date:12/16/2021			▾

Click the Questionnaire name hyperlink to open the document in a new browser tab.

QUESTIONNAIRE								
ASSESSMENT INFORMATION				CREATED INFORMATION			COMPLETED INFORMATION	
REQUEST	ID	NAME	TYPE	BY	ON	BY	ON	
R01	3711325	* OP Surgical	Checklist	Kepro	12/16/2021 06:20:45 PM			

Answer all required questions, in all sections. Responses will auto save as the form is completed. When finished, as indicated by green check on all sections, click **Mark As Complete**.

OP Surgical

Medical Necessity

Treatment Plan

1 . Admission follows Observation *

Yes No

2 . Is procedure Bariatric Surgery? *

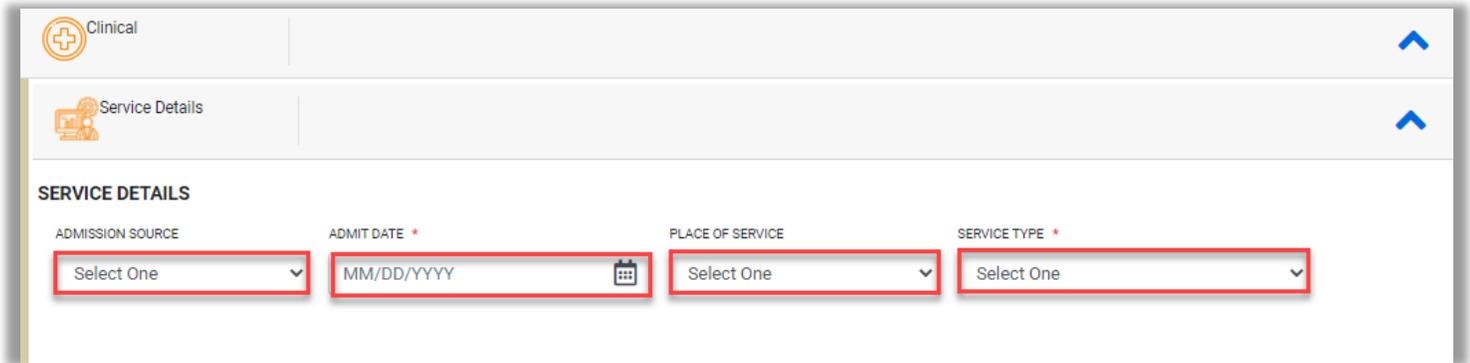
Yes No

3 . Surgical Procedures *

[← RETURN TO CASE](#)
 Autosaved
[MARK AS COMPLETE →](#)

Inpatient Request

To submit an inpatient request, enter Service Details by selecting the appropriate Admission Source, Admit Date, Place of Service, and Service Type.



The screenshot shows the 'Service Details' section of the Kepro interface. It features four input fields: 'ADMISSION SOURCE' (a dropdown menu with 'Select One'), 'ADMIT DATE' (a date field with a calendar icon and a red asterisk), 'PLACE OF SERVICE' (a dropdown menu with 'Select One'), and 'SERVICE TYPE' (a dropdown menu with 'Select One' and a red asterisk). The fields are highlighted with red boxes. Above the form, there are two tabs: 'Clinical' and 'Service Details', with 'Service Details' being the active tab. Blue arrows are visible in the top right corner of the tabs.

Admission Source Options Include:

- Direct
- Elective
- Emergency
- Non-elective
- Transfer
- Transplant

Place of Service Includes:

- Ambulatory Surgical Center
- Assisted Living Facility
- Birthing Center
- Community
- Home
- Hospice
- Independent Clinic
- Independent Laboratory
- Inpatient Hospital
- Inpatient Rehab Center
- Military Treatment Facility
- Mobile Unit
- Nursing Facility
- Office
- Outpatient Hospital
- Skilled Nursing Facility
- Urgent Care Facility

Inpatient Service Types Include:

- Transplant
- Inpatient Surgery
- Acute Medical
- Inpatient Rehab



After entering Service Details, 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.

Diagnosis

DIAGNOSIS ADD DIAGNOSIS ^

SEARCH DIAGNOSIS

CODE TYPE CODE DESCRIPTION

SEARCH RESET SHOW PREFERRED

SELECT	CODE TYPE	CODE	DESCRIPTION
<input checked="" type="checkbox"/>	ICD10	S92.154B	NDSPLC AVUL FX RT TALUS INIT OPN FX

SELECTED RECORDS

SELECT	CODE TYPE	CODE	DESCRIPTION
<input checked="" type="checkbox"/>	ICD10	S92.154B	NDSPLC AVUL FX RT TALUS INIT OPN FX

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

SELECT	CODE TYPE	CODE	DESCRIPTION
<input checked="" type="checkbox"/>	ICD10	R26.0	ATAXIC GAIT
<input checked="" type="checkbox"/>	ICD10	R26.0	ATAXIC GAIT
<input checked="" type="checkbox"/>	ICD10	S92.154B	NDSPLC AVUL FX RT TALUS INIT OPN FX

Displaying records 1 to 2 of 2 records

Previous **1** Next Show 10 Entries

CANCEL ADD DIAGNOSIS

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

LOS ↑

UNIT QUALIFIER

REQUESTED START DATE *

REQUESTED END DATE *

REQUESTED DURATION *

After completing LOS, enter any 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 selected, click **Add Procedure**.

Add Procedures ↑

SEARCH PROCEDURES

CODE TYPE *

CODE STARTS WITH

DESCRIPTION

SELECT PROCEDURES

SELECT	CODE TYPE	CODE	DESCRIPTION
<input checked="" type="checkbox"/>	CPT	99232	SUBSEQUENT HOSPITAL CARE

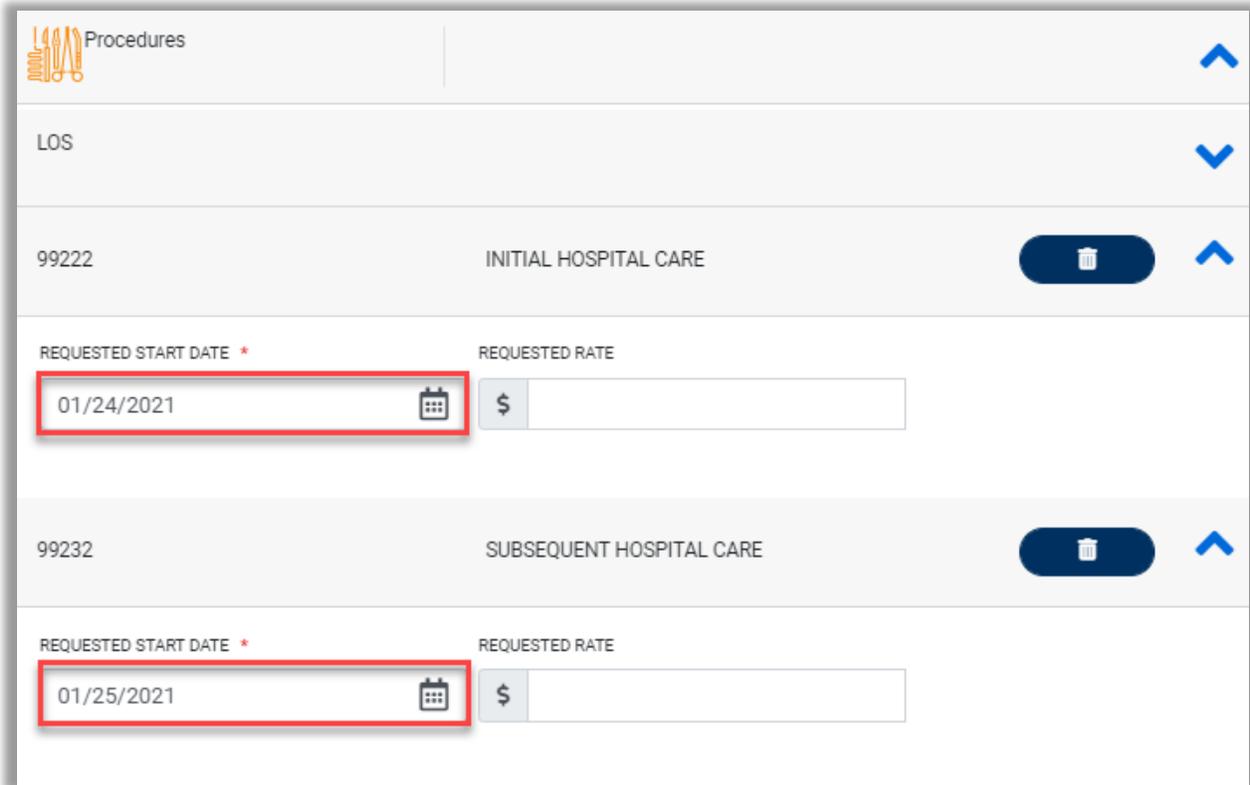
Displaying records 1 to 1 of 1 records Previous **1** Next Show 10 Entries

SELECTED RECORDS

SELECT	CODE TYPE	CODE	DESCRIPTION
<input checked="" type="checkbox"/>	CPT	99222	INITIAL HOSPITAL CARE
<input checked="" type="checkbox"/>	CPT	99232	SUBSEQUENT HOSPITAL CARE

Displaying records 1 to 2 of 2 records Previous **1** Next Show 10 Entries

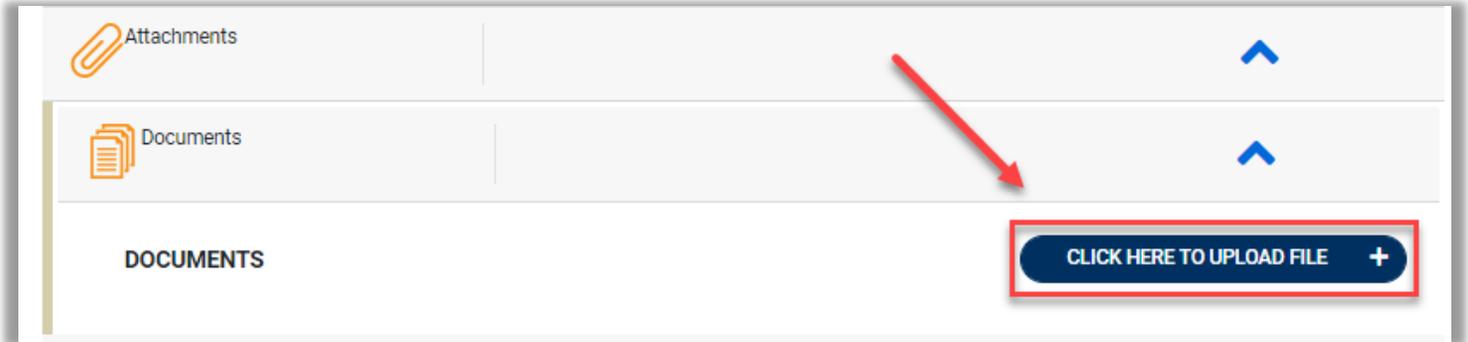
If the requested start date entered under LOS will not be applicable to all procedure codes, expand the procedure code section to update the requested start date. Once the date has been changed, it will automatically save.



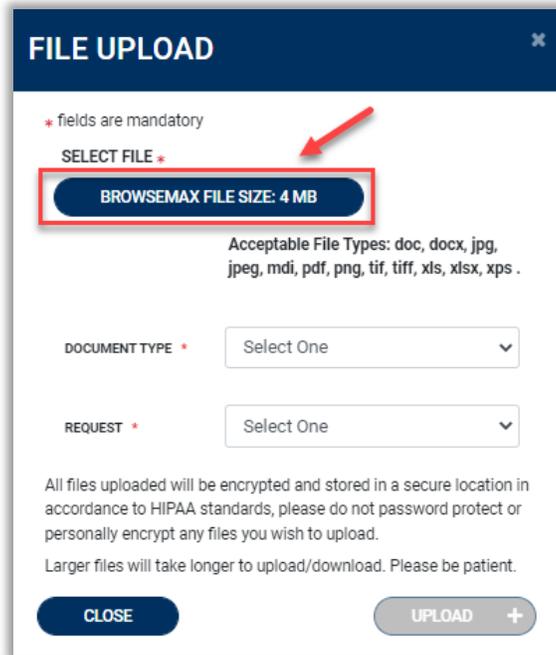
Procedures	
LOS	
99222	INITIAL HOSPITAL CARE
REQUESTED START DATE *	REQUESTED RATE
01/24/2021	\$
99232	SUBSEQUENT HOSPITAL CARE
REQUESTED START DATE *	REQUESTED RATE
01/25/2021	\$

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

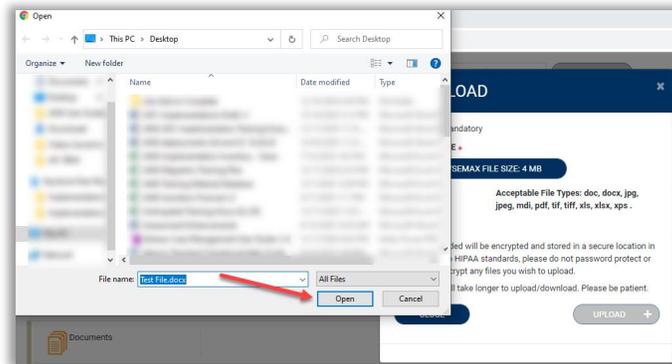
Once all clinical information is added, expand Attachments, then expand Documents to upload any supporting documentation. Select **CLICK HERE TO UPLOAD FILE**.



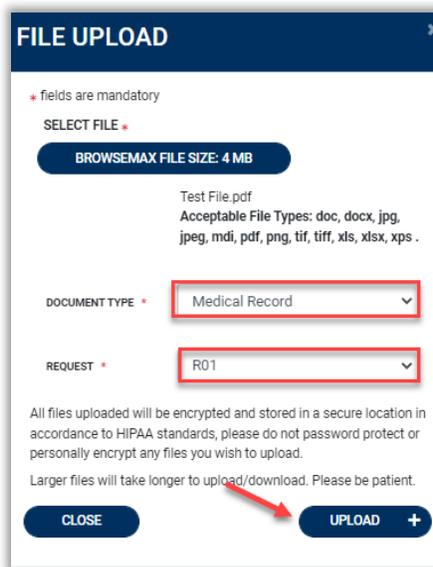
A pop up will display, click **Browse** to search for the supporting documentation.



Select the file and click **Open**.



Select Document Type and Request, then click **UPLOAD**.

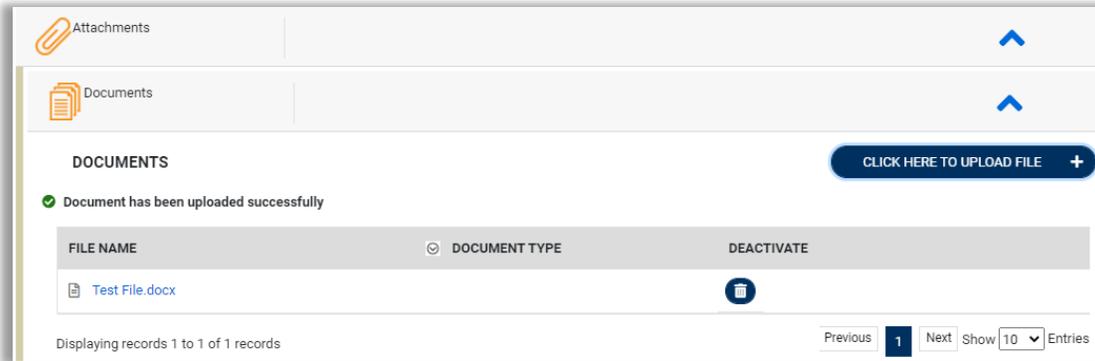


Document Types include:

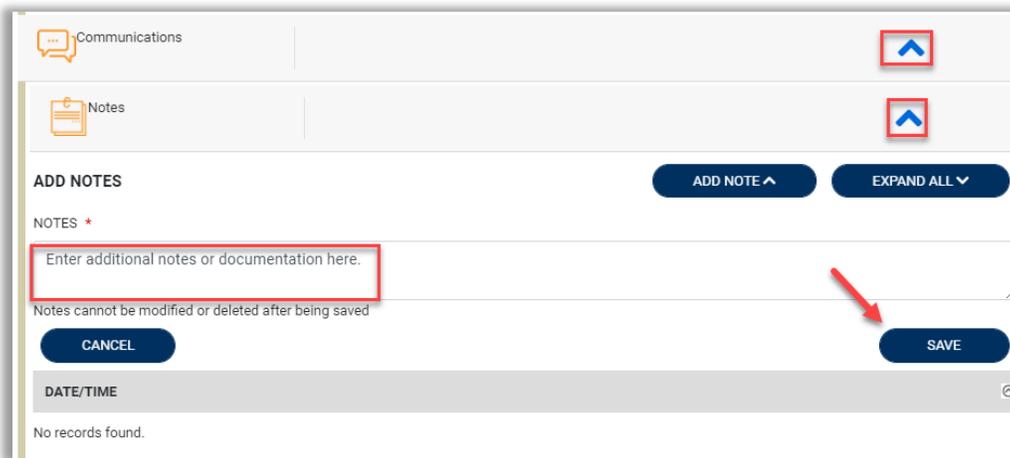
- 485
- Appeal Document
- CMN
- Cost Calculation
- Cost Invoice
- Documentation
- EOB
- Evaluations
- Grids
- Labs
- MCM-1 BH Form
- Medical Record
- Other
- Release of Information
- Rx Order
- X-Rays

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

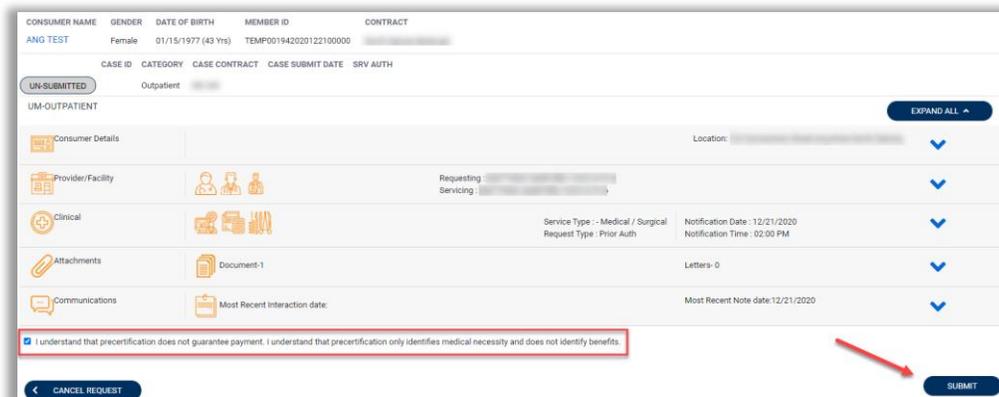
NOTE: Repeat the above steps until all supporting documentation is uploaded.



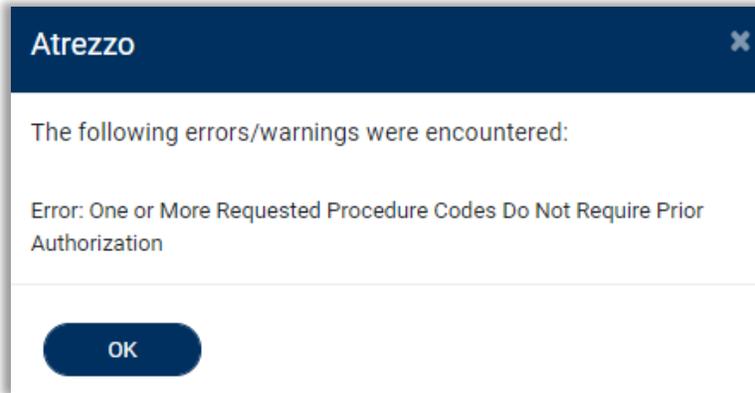
Once all supporting documentation has been added, expand Communications, then expand Notes to enter any additional supporting information or notes for Kepro to review. To add a note, click **ADD NOTE**, then enter documentation and click **SAVE**.



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. Review request, and fix errors, then click **Submit**.



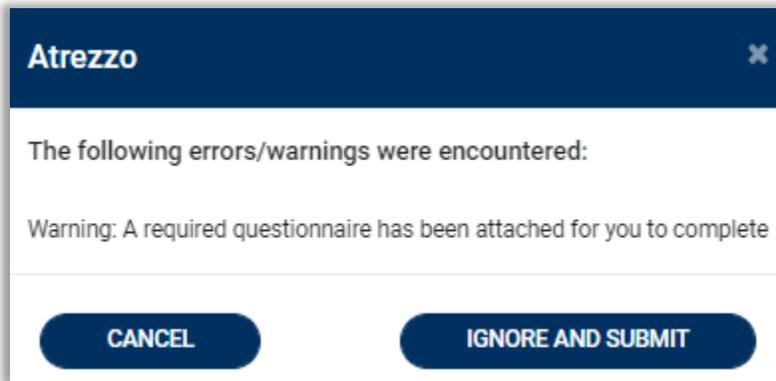
After submitting the inpatient or outpatient request, if no errors or warnings are noted, the case will be submitted. A Case ID will be generated which is a unique numerical identifier that can be used for identification purposes and status updates. The Case Page will identify the status along with an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

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
SUBMITTED 203560017	Outpatient		12/21/2020	

UM-OUTPATIENT EXPAND ALL ▾

Consumer Details	Location: [REDACTED]		▾
Provider/Facility		Requesting: [REDACTED] Servicing: [REDACTED]	▾
Clinical		Service Type: - Medical / Surgical Request Type: Prior Auth	Notification Date: 12/21/2020 Notification Time: 03:12 PM
Attachments	Document-0	Letters- 0	▾
Communications	Most Recent Interaction date:	Most Recent Note date:	▾

If a required questions is needed, this pop up will display. Click **Ignore and Submit**.



The case will submit, but the questionnaire will need to be completed. Expand Questionnaires, and click the form name hyperlink to open the document in a new browser tab.

CASE ID: 213510011 | CATEGORY: Inpatient | CASE CONTRACT: WV Medical | CASE SUBMIT DATE: 12/17/2021 | SRV AUTH: SUBMITTED

UM-INPATIENT | CASE SUMMARY | COPY | EXTEND | EXPAND ALL

Consumer Details | Location: 123 Somewhere Street Anywhere West Virginia

Provider/Facility | Requesting: Temporary WV Provider/999999999 | Facility: Temporary WV Provider/999999999

Clinical | Service Type: 001 - Acute Medical | Request Type: Admission | Notification Date: 12/17/2021 | Notification Time: 09:38 AM

Questionnaires | [Acute Medical](#)

QUESTIONNAIRE

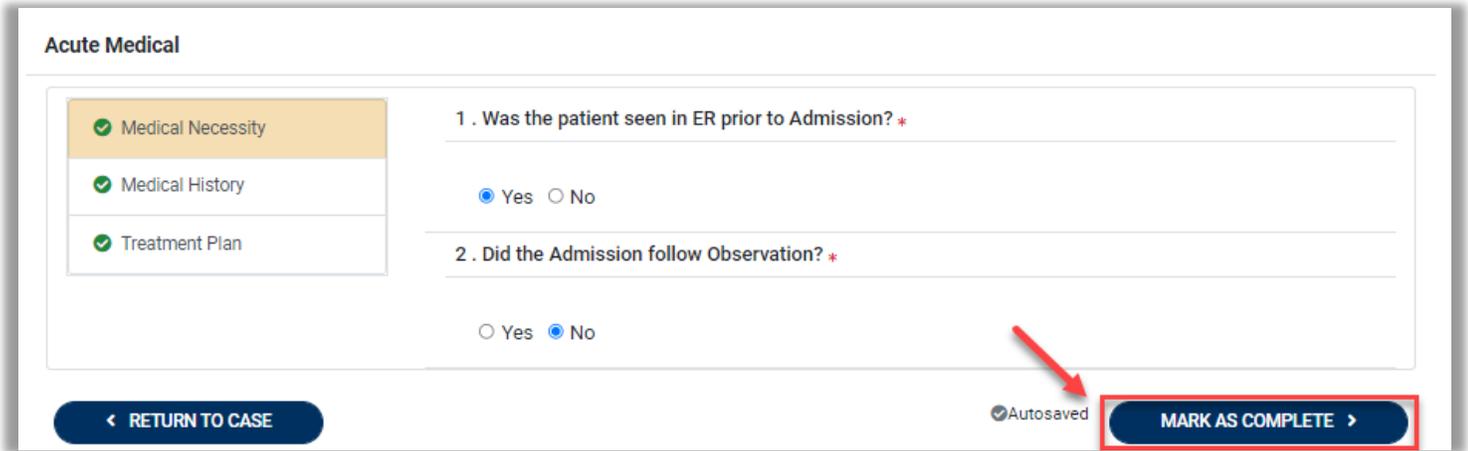
ASSESSMENT INFORMATION				CREATED INFORMATION		COMPLETED INFORMATION	
REQUEST	ID	NAME	TYPE	BY	ON	BY	ON
R01	3711590	Acute Medical	Checklist	Kepro	12/17/2021 09:38:03 AM		

Displaying records 1 to 1 of 1 records | Previous 1 Next Show 10 Entries

Attachments | Document-1 | Letters-0

Communications | Most Recent Note date: 12/17/2021

Answer all questions in each section. When finished, as indicated by a green checkmark, click **Mark As Complete** to return to the case.



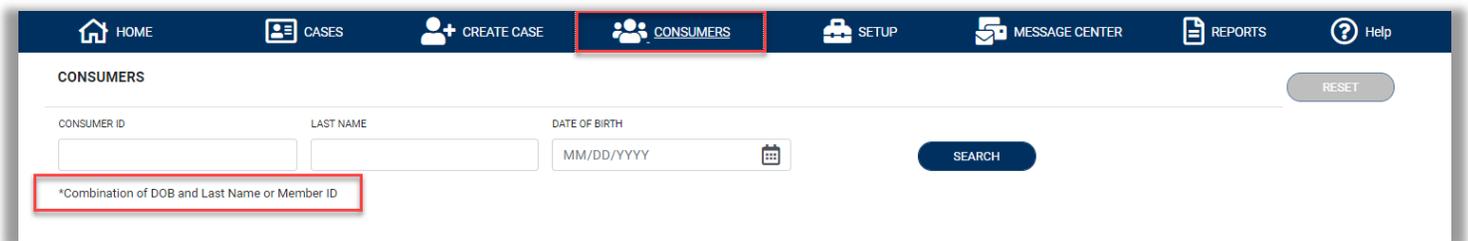
The case has been submitted and questionnaire completed.

Consumers

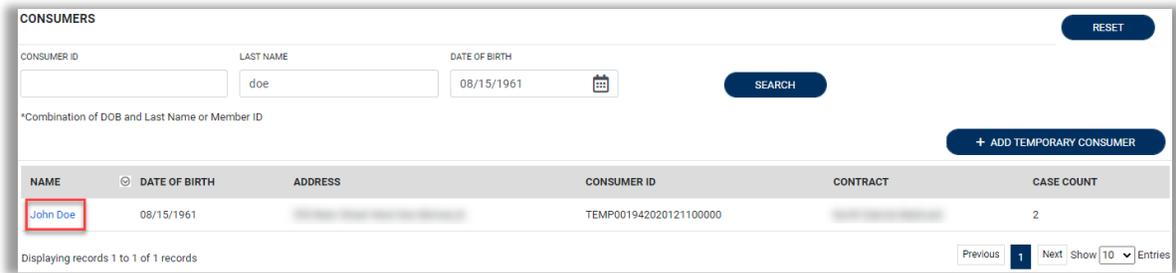


To search by Consumer (Member), click Consumer on the navigation pane. The Consumer default screen will appear providing options to search for a Consumer. This process is the same as searching the Consumer when creating a case.

To search By Consumer, enter the required Member information. For results to render, you 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.



NAME	DATE OF BIRTH	ADDRESS	CONSUMER ID	CONTRACT	CASE COUNT
John Doe	08/15/1961		TEMP001942020121100000		2

Set Up

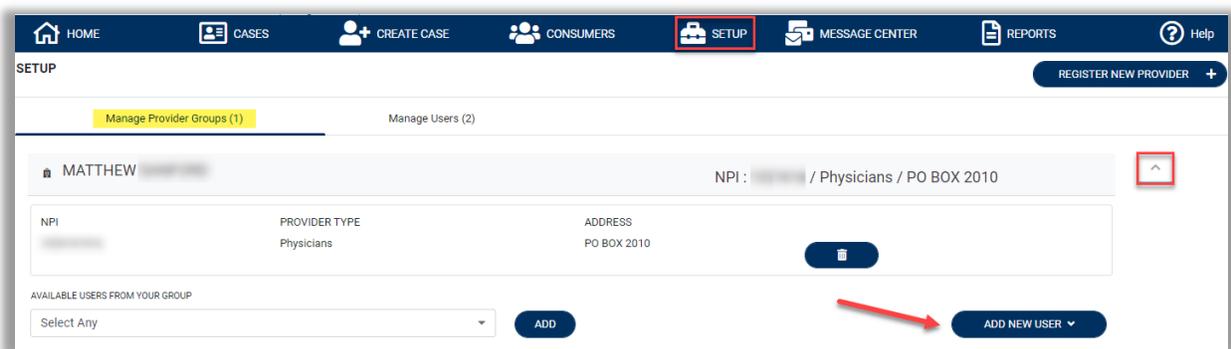


This section will identify the steps for Provider Group Administrators to add and manage additional users within the portal. **Only users set up as Provider Administrators will see this tab.** For all other users, the tab will be hidden.

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.



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

ACCOUNT INFORMATION

USER NAME *

CONTACT INFORMATION

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

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

CREATE >

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

Provider, ND

SELECT ROLE

- Provider Group Admin
- Provider Group Admin**
- Provider Admin
- Provider Staff Account
- Provider Group Admin + Reports
- Provider Admin +Reports

Displaying records 1 to 2 of 2 records

Previous **1** Next Show 10 Entries

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



User Role Definitions

Provider Staff Account – general account for all users who will have access to the provider portal to enter and view case requests.

Provider Administrator – admin user who will have the ability to add and manage users for provider groups assigned

Provider Group Administrator – highest level admin who will have access to all providers within an assigned group and has the ability to add and manage users to all groups.

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**.

Register a New Provider

PROVIDER NPI: *

9999999991

PROVIDER REGISTRATION CODE: *

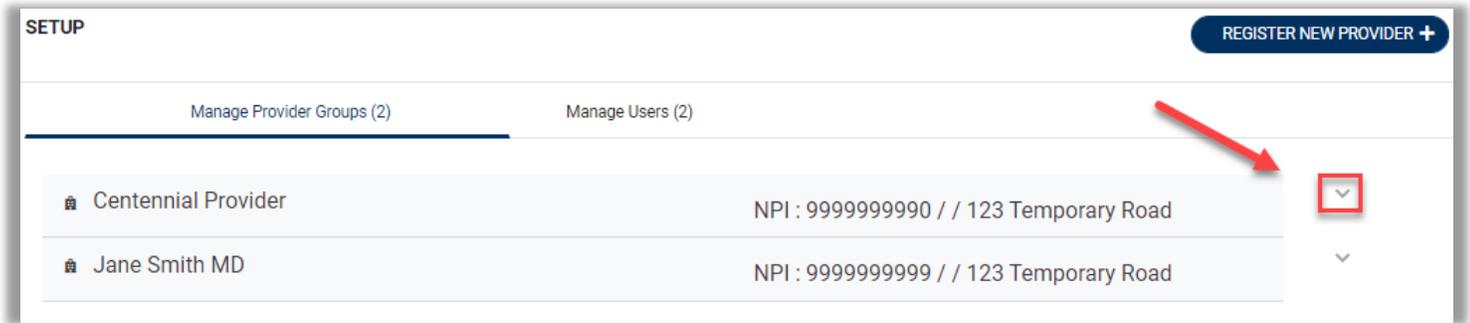
23458266

Pueblo Provider -- 123 Temporary Road null - Pueblo CO

FIND PROVIDER

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



The Message Center displays new and unread messages. To send messages, you must be inside a specified case.

When a new message is available, an indicator will display in the navigation menu.



Indicates there are unread and non-responded messages available to view.



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

Available messages will display in the Message Center.

MESSAGE CENTER				
FROM	SUBJECT	TO	SENT ON	
Kepro	Status Complete	Provider Demo	9/14/2020 10:04:50 AM	
Kepro	Please Complete Questionnaire	Provider Demo	9/14/2020 9:59:43 AM	

Displaying records 1 to 2 of 2 records

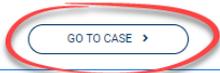
Previous 1 Next Show 10 Entries

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**.

MESSAGE CENTER			
FROM	SUBJECT	TO	SENT ON
Kepro	Status Complete	Provider Demo	9/14/2020 10:04:50 AM

Message:



Reply

SUBJECT *
RE: Status Complete

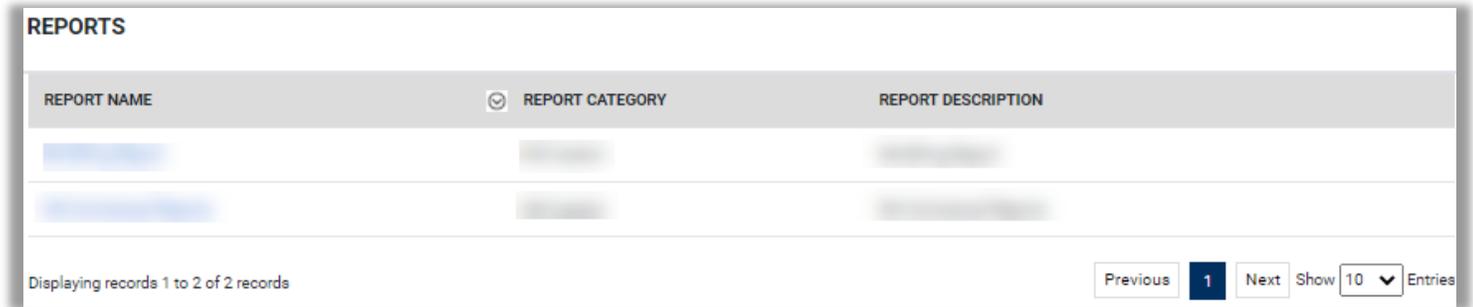
MESSAGE *
To reply to the message, type text here and click Send.

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

Reports



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.



REPORT NAME	REPORT CATEGORY	REPORT DESCRIPTION

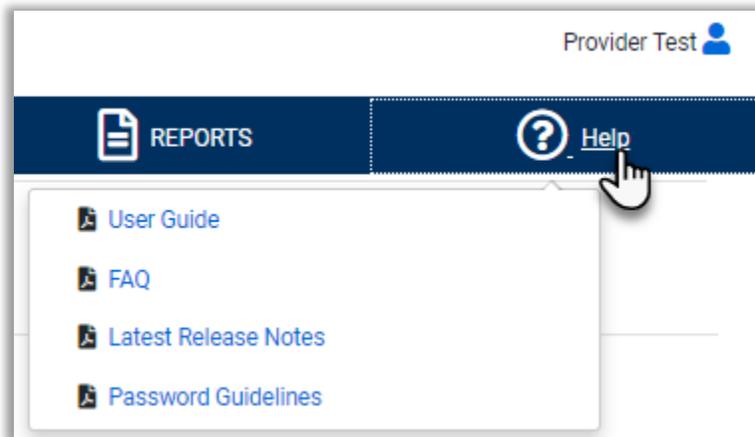
Displaying records 1 to 2 of 2 records

Previous 1 Next Show 10 Entries

Help Guide

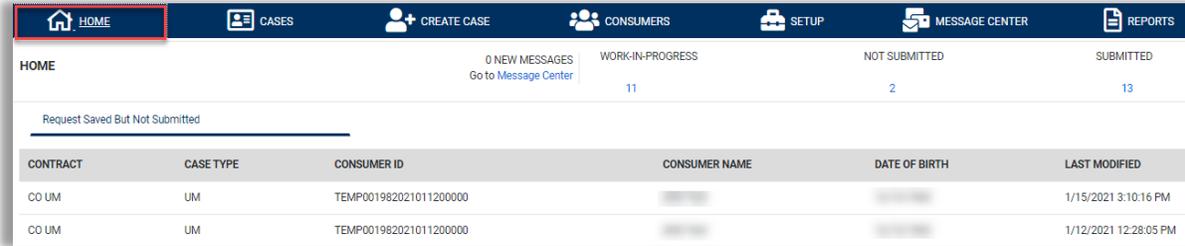


Clicking the Help icon will open a menu of options including the User Guide, FAQ, Latest Release Notes, and Password Guidelines. These items are updated regularly and may change over time.



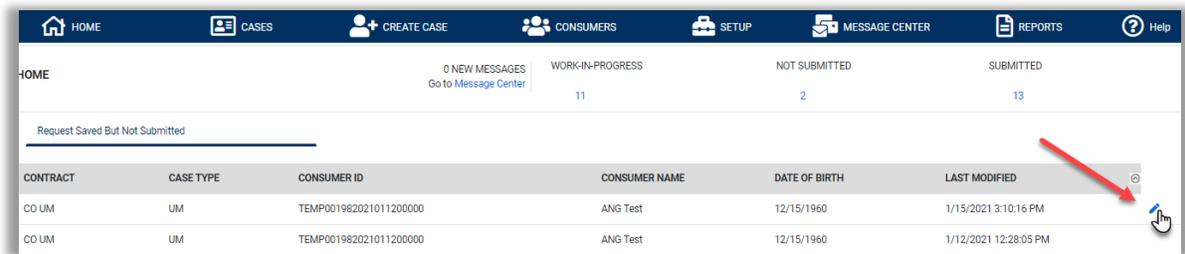
How to Complete a 'Saved But Not Submitted' Request

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.



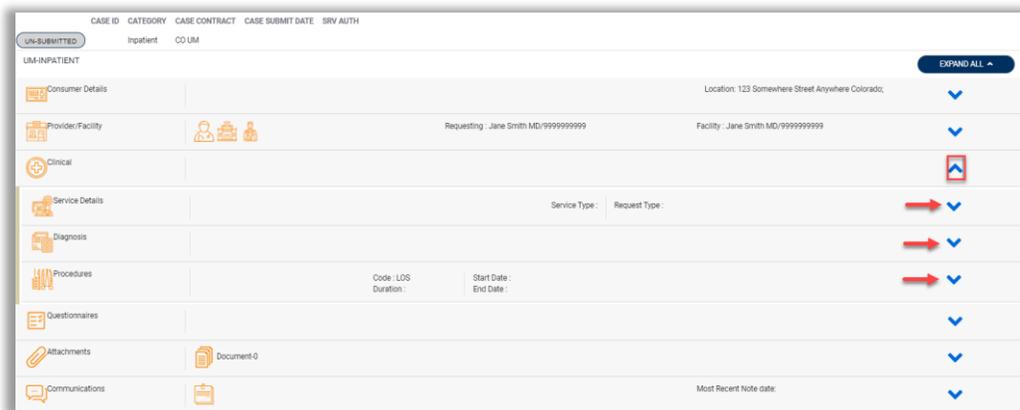
CONTRACT	CASE TYPE	CONSUMER ID	CONSUMER NAME	DATE OF BIRTH	LAST MODIFIED
CO UM	UM	TEMP001982021011200000	[REDACTED]	[REDACTED]	1/15/2021 3:10:16 PM
CO UM	UM	TEMP001982021011200000	[REDACTED]	[REDACTED]	1/12/2021 12:28:05 PM

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



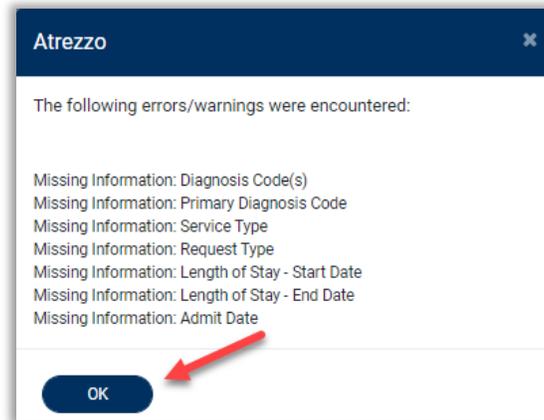
CONTRACT	CASE TYPE	CONSUMER ID	CONSUMER NAME	DATE OF BIRTH	LAST MODIFIED
CO UM	UM	TEMP001982021011200000	ANG Test	12/15/1960	1/15/2021 3:10:16 PM
CO UM	UM	TEMP001982021011200000	ANG Test	12/15/1960	1/12/2021 12:28:05 PM

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.



CASE ID	CATEGORY	CASE CONTRACT	CASE SUBMIT DATE	SRV AUTH
UM-SUBMITTED	Inpatient	CO UM		
UM-INPATIENT EXPAND ALL				
Consumer Details		Location: 123 Somewhere Street Anywhere Colorado.		
Provider/Facility		Requesting - Jane Smith MD/9999999999	Facility - Jane Smith MD/9999999999	
Clinical				
Service Details		Service Type:	Request Type:	
Diagnosis				
Procedures		Code - LOS	Start Date:	End Date:
Questionnaires				
Attachments		Documents-0		
Communications		Most Recent Note date:		

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 **!** which will identify which sections required information is missing. Expand each section with a **!** displayed.



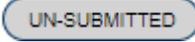
Once required information is added, the **!** indicator will disappear and case can be submitted. If additional information is needed, refer to other sections for more information on attaching clinical documentation, creating note documentation, and other options.

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

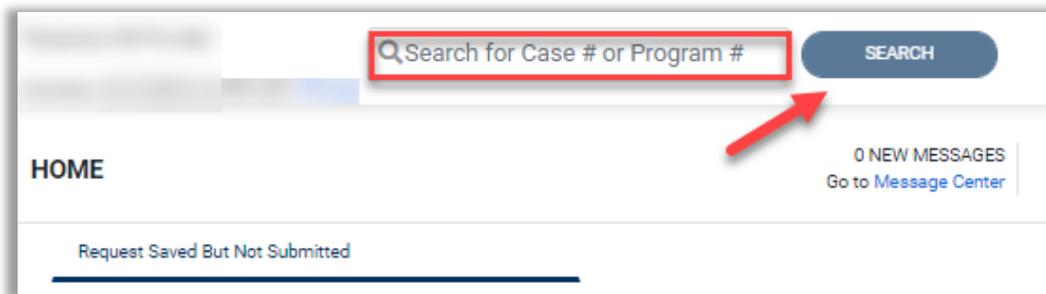
Once a request has been submitted, there are a different ways the status can be reviewed. A status check can be completed with a Case ID or Consumer Name and DOB. Below you will find step by step instructions for each method.

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

	<p>This 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.</p>
	<p>This 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.</p>
	<p>This identifies the case has been assigned to a clinical reviewer. The case will remain in this process until a determination has been made.</p>
	<p>This 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).</p>

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](#).

CONSUMER NAME	GENDER	DATE OF BIRTH	MEMBER ID	CONTRACT
	Male		TEMP001982020122200000	Colorado

CASE ID	CATEGORY	CASE CONTRACT	CASE SUBMIT DATE	SRV AUTH
COMPLETED 210060006	Outpatient	CO UM	01/06/2021	123456789

UM-OUTPATIENT

Consumer Details

Provider/Facility

Clinical

Requesting : Jane Smith MD/9999999999
 Servicing : Jane Smith MD/9999999999

Service Type : - DME
 Request Type : Prior Auth

Notification Date : 01/06/2021
 Notification Time : 02:58 PM

Note: A red callout box points to the SRV AUTH field with the text: "Once the auth number has been assigned, it will be found in the banner of a completed request."

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.

HOME | CASES | CREATE CASE | CONSUMERS | SETUP | MESSAGE CENTER

CONSUMERS

CONSUMER ID:

LAST NAME:

DATE OF BIRTH: 

*Combination of DOB and Last Name or Member ID

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

CONSUMERS RESET

CONSUMER ID:
 LAST NAME:
 DATE OF BIRTH: 

SEARCH

*Combination of DOB and Last Name or Member ID

NAME	DATE OF BIRTH	ADDRESS	CONSUMER ID	CONTRACT	CASE COUNT
ANG Test	12/15/1960	123 Somewhere Street Anywhere,CO	TEMP001982021011200000	Colorado	2

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](#).

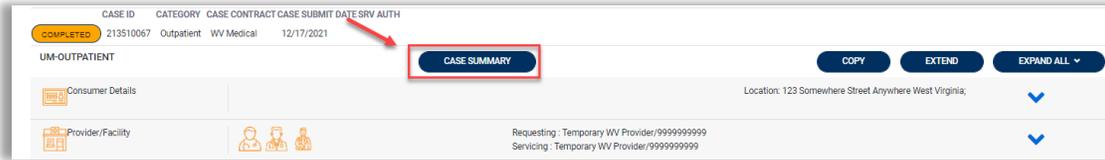
UM CASE (10)

Submitted Requests | Servicing Requests

Case	Status	Request Info	Service Type	Service Date(s)	Procedures (Top 10)
210060006 Request 801607 View Request [Copy] [Discharge]	Submitted Approved: 3 Denied: 0 Pending: 0 Void: 0 Appeal: 0	Submit Date: 1/6/2021 Outpatient Letters: 0 Messages: 4	- DME	1/8/2021 - 1/8/2021	E0141 E0163 E0290
210130009 Request 8016123 View Request [Copy] [Discharge]	Submitted Approved: 0 Denied: 1 Pending: 0 Void: 0 Appeal: 0	Submit Date: 1/13/2021 Outpatient Letters: 0 Messages: 0	- Vision Care	1/13/2021 - 7/11/2021	E1399

View Case Summary

Within each case, the Case Summary will provide all information in one place. This is the easiest and fastest way to obtain any information including status, notes, and determination letters. At the top of the specified case, click **Case Summary**.



The Summary will open in a new browser tab. You will be able to view all information regarding the request by scrolling to review. At the bottom of the page, you will find the determination letters. All links in the Case Summary will open in a new tab for your reference. Any available notes or documentation will be visible in this view as well.

Case Summary: 213480045

Consumer Information

Name	DOB	MemberID	Contract	Eligibility Program
[Redacted]	[Redacted]	[Redacted]	West Virginia	Medicaid Benefit Plan - SSI

Case Information

Status	Category	Case Contract	Submit Date	SRV Auth
COMPLETED	Outpatient	WV Medical	12/14/2021	1349215033

Provider Information

Requesting Provider

Name	ID NPI	Specialty	Address	Phone	Fax
LORRAINE SURGICAL SUPPLY	1710915723	SUPPLIES,SUPPLIES	99 EDGINGTON LANE, WHEELING, WV US 26003	(304) 243-1904	(555) 555-5555

Servicing Provider

Name	ID NPI	Specialty	Address	Phone	Fax
LORRAINE SURGICAL SUPPLY	1710915723	SUPPLIES,SUPPLIES	99 EDGINGTON LANE, WHEELING, WV US 26003	(304) 243-1904	

Documents

Request	File Name	Document Type	Received On	Modified On
R01	TEST RX.docx	Rx Order	12/14/2021 3:40:26 PM	12/14/2021 3:40:26 PM craines
R01	TEST CMN.docx	CMN	12/14/2021 3:40:11 PM	12/14/2021 3:40:11 PM craines

Letters

Request	File Name	Mailed Date/Time	Date Created	Created By	Modified On
R01	OON_MemberNoticeOfApproval-213480045-01.pdf	Not Fax	12/17/2021 4:42:59 PM	dbezaury	12/17/2021 4:42:59 PM

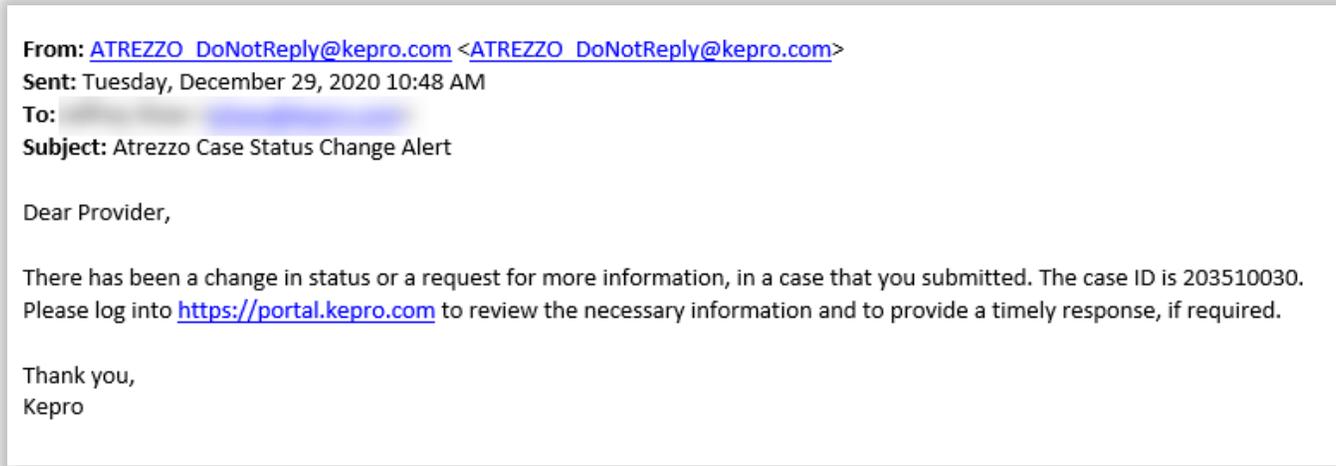
Determination Letter hyperlink will open letter in new browser tab to view, print, or download



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.

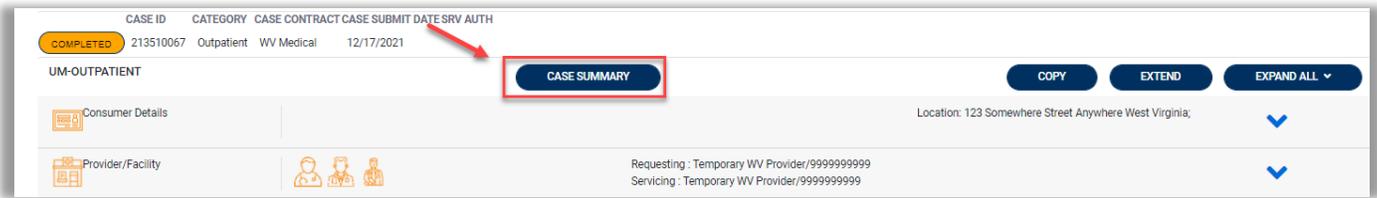


How to View a Determination Letter

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, click **Case Summary**. The summary will open in a new browser tab.



CASE ID: 213510067 | CATEGORY: Outpatient | CASE CONTRACT: WV Medical | CASE SUBMIT DATE: 12/17/2021 | SRV AUTH: [red arrow]

UM-OUTPATIENT | **CASE SUMMARY** | COPY | EXTEND | EXPAND ALL

Consumer Details | Location: 123 Somewhere Street Anywhere West Virginia

Provider/Facility | Requesting: Temporary WV Provider/9999999999 | Servicing: Temporary WV Provider/9999999999

Scroll to the bottom of the Case Summary. The section Letters will list any available determination letters. To view the letter, click the letter name hyperlink.

Documents

Request	File Name	Document Type	Received On	Modified On	Modified By
R01	TEST RX.docx	Rx Order	12/14/2021 3:40:26 PM	12/14/2021 3:40:26 PM	craines
R01	TEST CMN.docx	CMN	12/14/2021 3:40:11 PM	12/14/2021 3:40:11 PM	craines

Letters

Request	File Name	Fax Status	Mailed Date/Time	Date Created	Created By	Modified On
R01	OON_MemberNoticeOfApproval-213480045-01.pdf	Not Fax		12/17/2021 4:42:59 PM	dbezaury	12/17/2021 4:42:59 PM

The file will display at the bottom of the page, click it to open/view in a new browser tab.

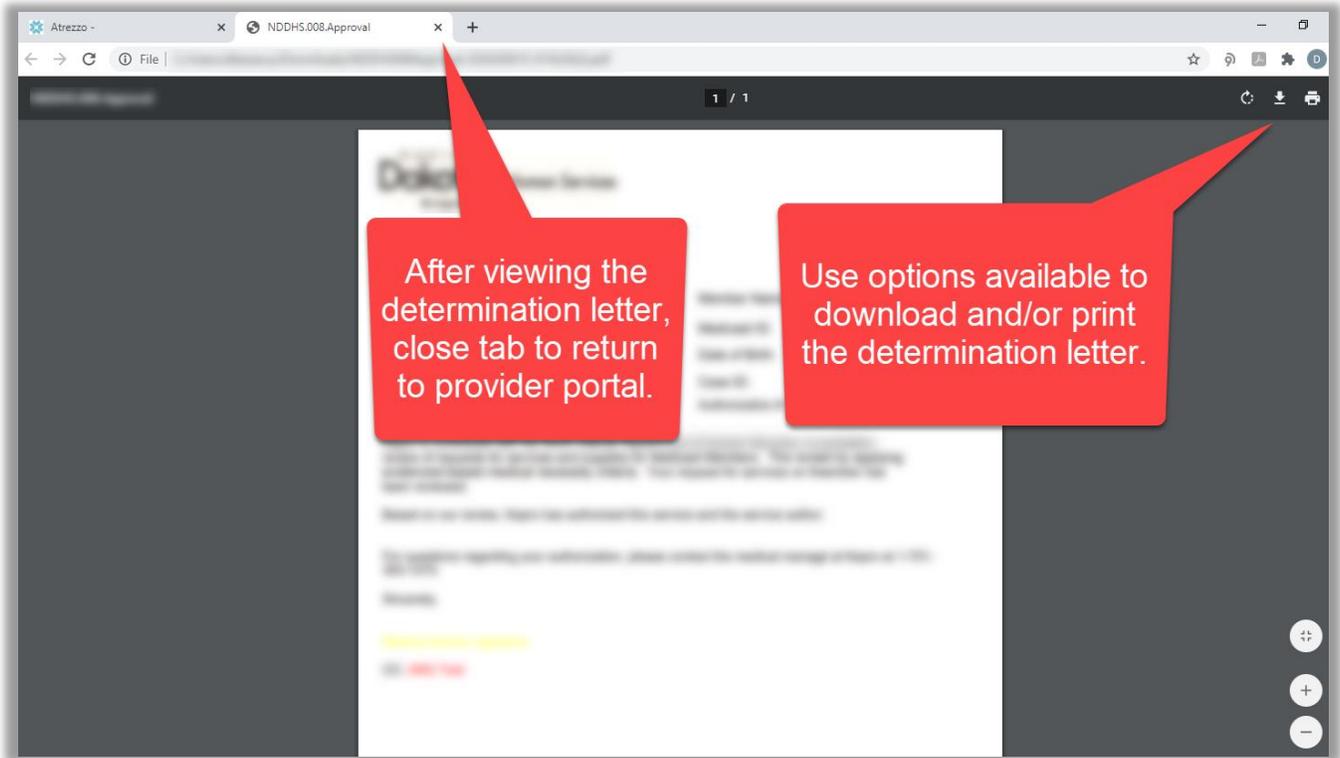
Documents

Request	File Name	Document Type	Received On	Modified On
R01	Test File.pdf	Rx Order	12/17/2021 4:51:16 PM	12/17/2021 4:51:16 PM
R01	Test File.pdf	CMN	12/17/2021 4:51:05 PM	12/17/2021 4:51:05 PM

Letters

Request	File Name	Fax Status	Mailed Date/Time	Date Created	Modified On
	Test File.pdf				

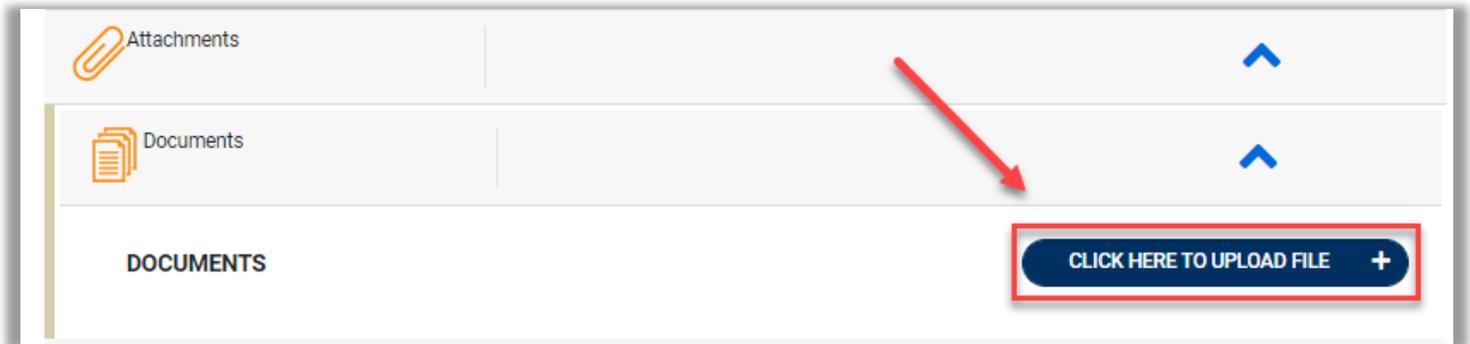
After clicking link, the document will be viewable in an internet browser tab separate from the Provider Portal. Once view is complete, close tab to return to the Provider Portal.



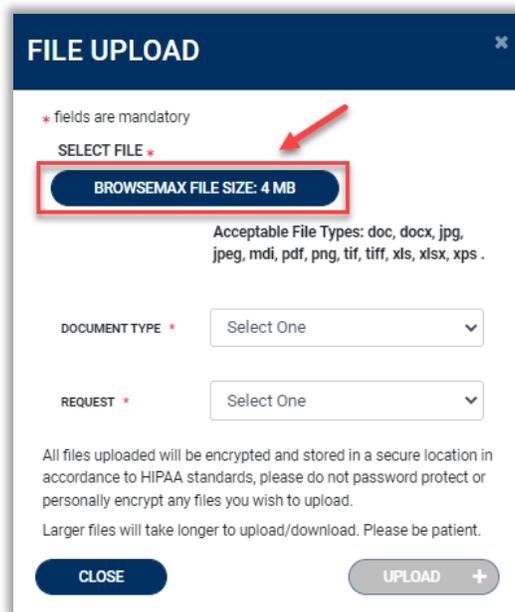
How to Add Additional Clinical Documentation

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

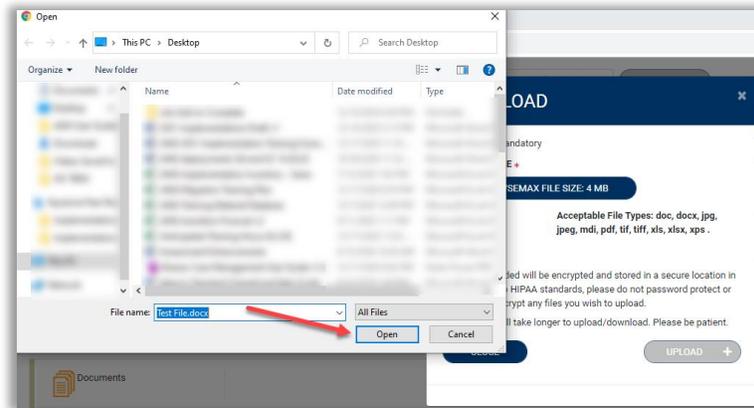
Within the request, expand attachments, expand Documents, and then select **CLICK HERE TO UPLOAD FILE**.



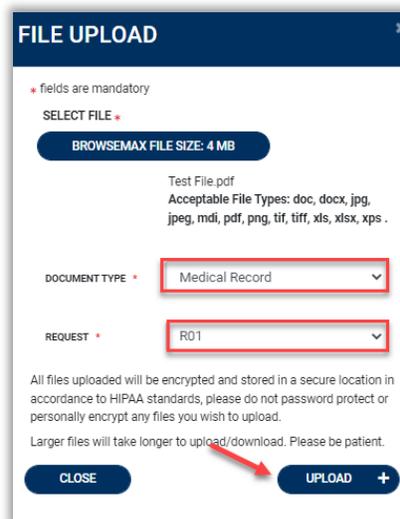
A pop up will display, click **Browse** to search for the supporting documentation.



Select the file and click **Open**.



Select Document Type and Request, then click **UPLOAD**.

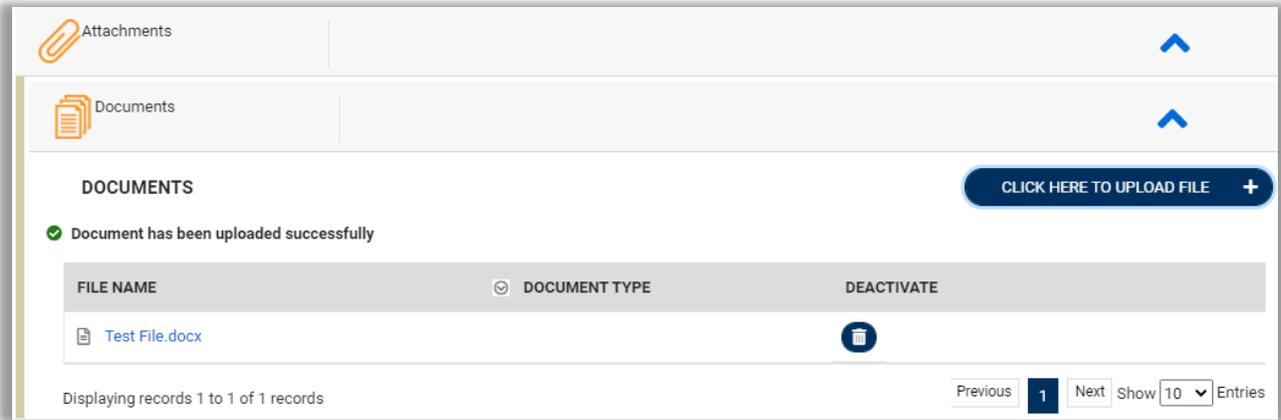


Document Types include:

- 485
- Appeal Document
- CMN
- Cost Calculation
- Cost Invoice
- Documentation
- EOB
- Evaluations
- Grids
- Labs
- MCM-1 BH Form
- Medical Record
- Other
- Release of Information
- Rx Order
- X-Rays

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

NOTE: Repeat the above steps until all supporting documentation is uploaded.



Attachments

Documents

DOCUMENTS [CLICK HERE TO UPLOAD FILE +](#)

✔ Document has been uploaded successfully

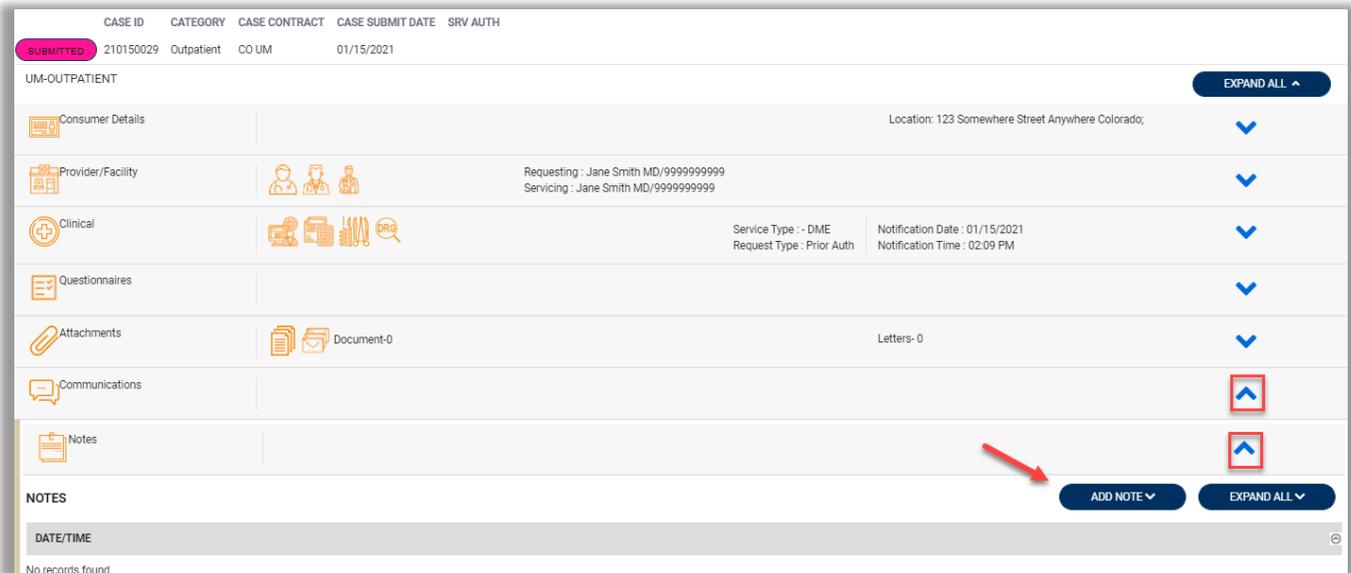
FILE NAME	DOCUMENT TYPE	DEACTIVATE
Test File.docx		

Displaying records 1 to 1 of 1 records Previous **1** Next Show Entries

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**.



CASE ID: 210150029 | CATEGORY: Outpatient | CASE CONTRACT: CO UM | CASE SUBMIT DATE: 01/15/2021 | SRV AUTH: SUBMITTED

UM-OUTPATIENT [EXPAND ALL](#)

Consumer Details Location: 123 Somewhere Street Anywhere Colorado;

Provider/Facility Requesting : Jane Smith MD/9999999999
Servicing : Jane Smith MD/9999999999

Clinical Service Type : - DME | Notification Date : 01/15/2021
Request Type : Prior Auth | Notification Time : 02:09 PM

Questionnaires

Attachments Document-0 Letters- 0

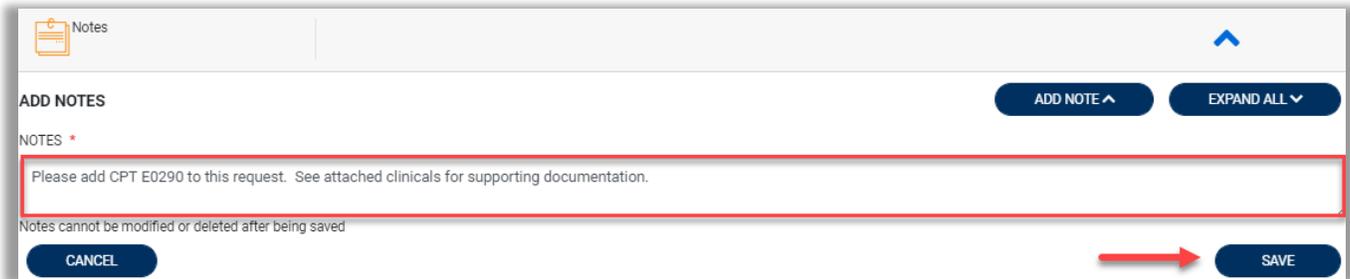
Communications

Notes [ADD NOTE](#) [EXPAND ALL](#)

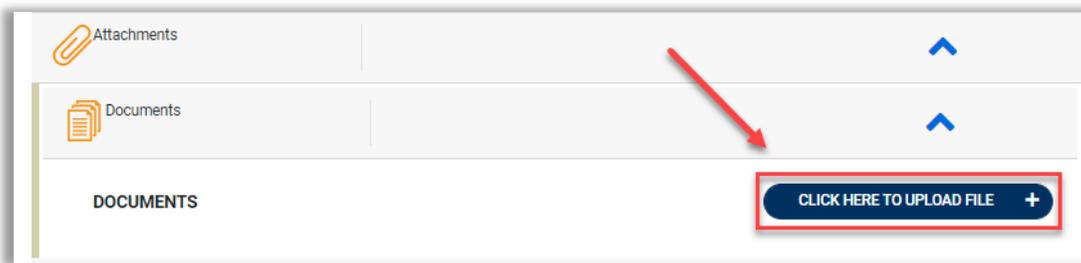
NOTES

DATE/TIME
No records found.

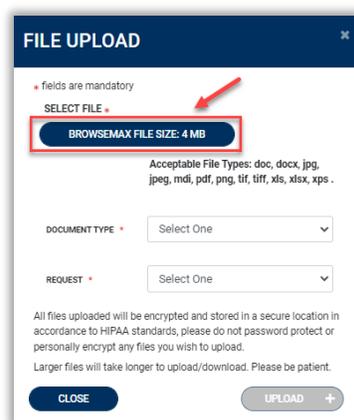
Once the note section expands, enter a note with what information is requested (i.e. what code(s) to add, what needs to be changed). Then click **SAVE**. This will send a note to Kepro to make the revision(s) to the submitted request.



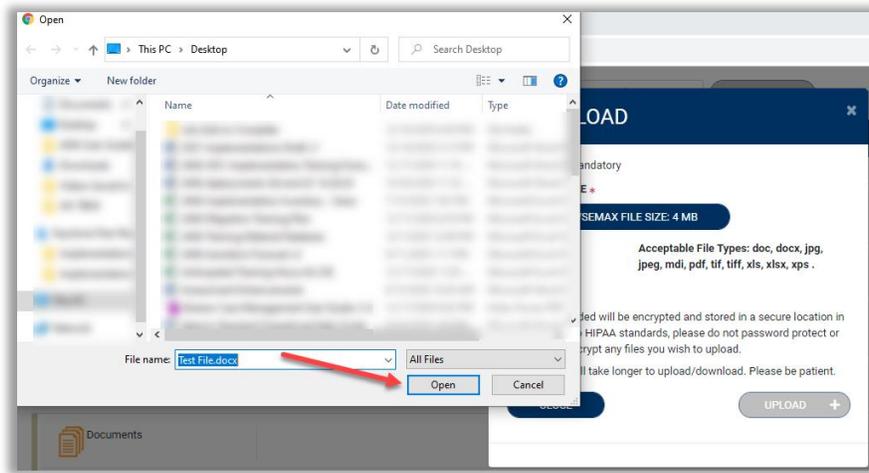
After entering a note, upload any supporting clinical documentation to support the requested revision. Expand attachments, expand Documents, and then select **CLICK HERE TO UPLOAD FILE**.



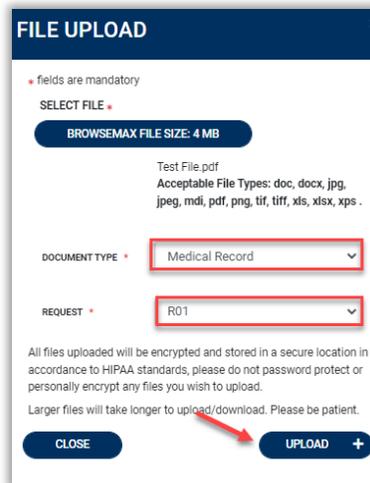
A pop up will display, click **Browse** to search for the supporting documentation.



Select the file and click **Open**.



Select Document Type and Request, then click **UPLOAD**.



Document Types include:

- 485
- Appeal Document
- CMN
- Cost Calculation
- Cost Invoice
- Documentation
- EOB
- Evaluations
- Grids
- Labs
- MCM-1 BH Form
- Medical Record
- Other
- Release of Information
- Rx Order
- X-Rays



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

NOTE: Repeat the above steps until all supporting documentation is uploaded.

The screenshot shows the 'Documents' section of the Kepro interface. At the top, there are tabs for 'Attachments' and 'Documents'. Below the 'Documents' tab, there is a 'DOCUMENTS' header and a button that says 'CLICK HERE TO UPLOAD FILE +'. A green checkmark icon and the text 'Document has been uploaded successfully' are displayed. Below this is a table with the following columns: 'FILE NAME', 'DOCUMENT TYPE', and 'DEACTIVATE'. The table contains one row with the file name 'Test File.docx' and a trash can icon in the 'DEACTIVATE' column. At the bottom of the table, it says 'Displaying records 1 to 1 of 1 records'. To the right of this text are navigation buttons: 'Previous', '1', 'Next', 'Show 10', and 'Entries'.

FILE NAME	DOCUMENT TYPE	DEACTIVATE
Test File.docx		

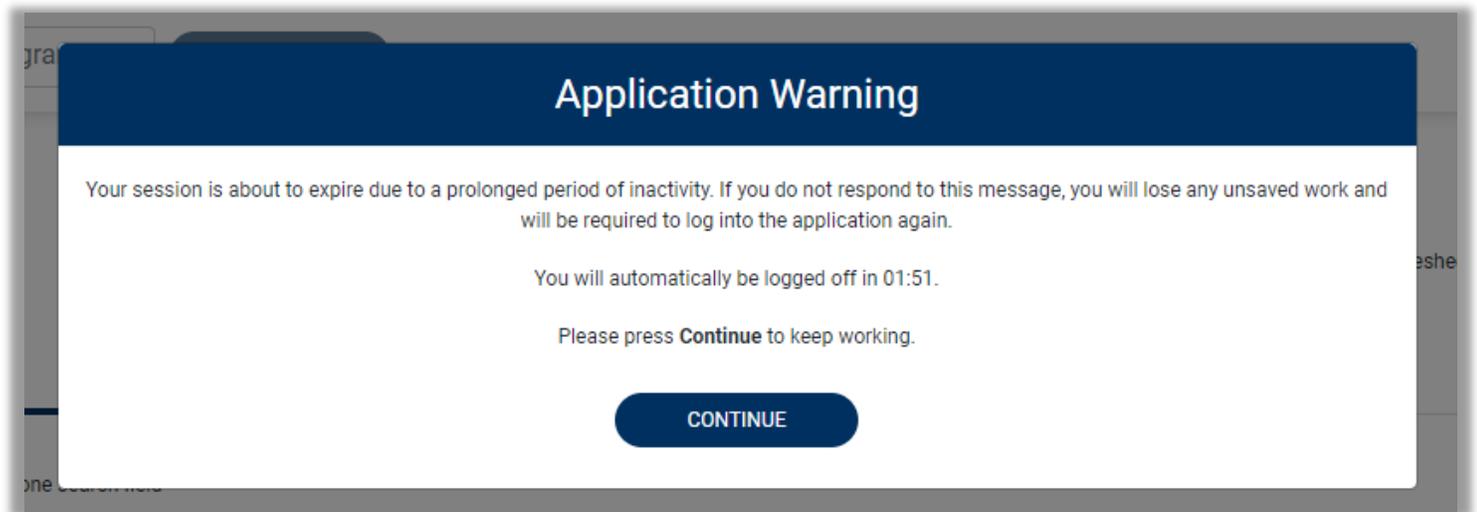
Troubleshooting Tips and Tricks

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.

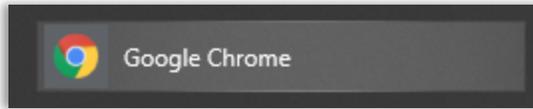


To continue working, select **CONTINUE**.

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

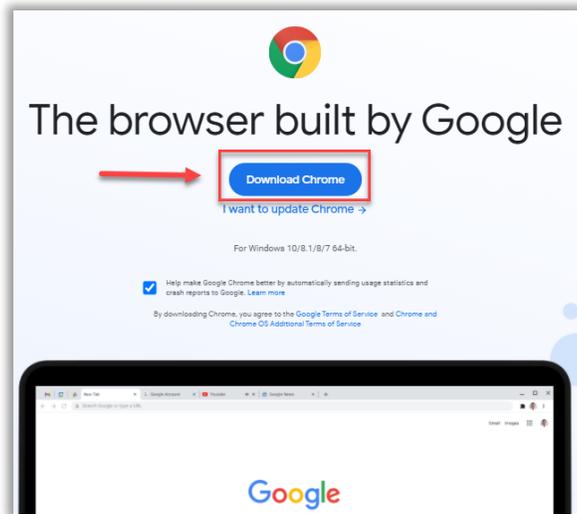
Atrezzo is configured to function in all internet browsers; however, Chrome is best. Chrome users will have the best system and functionality performance over other browsers.

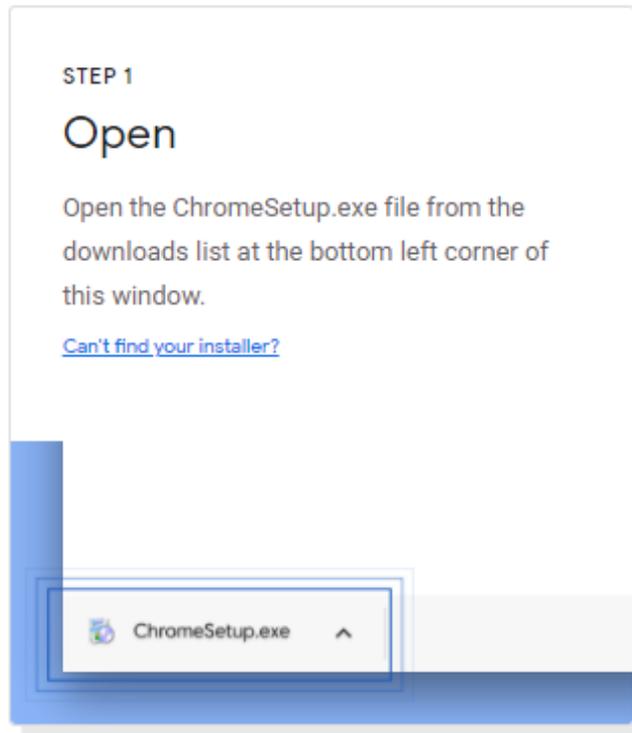
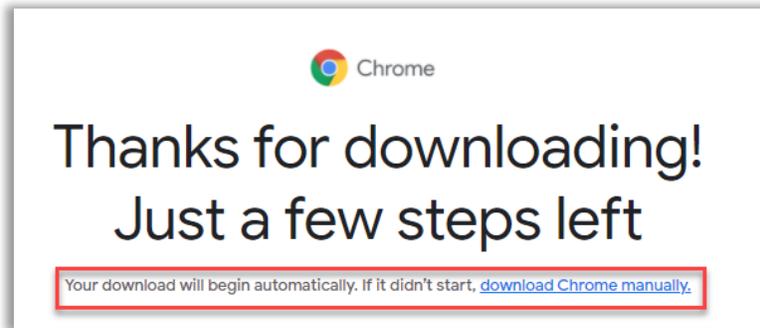


How to Add Google Chrome to Computer

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.

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

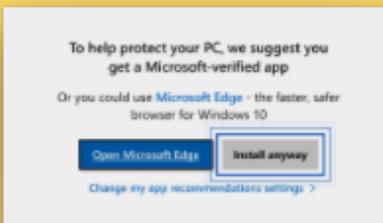




STEP 2

Allow

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

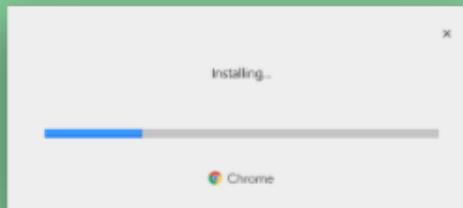


STEP 3

Install

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

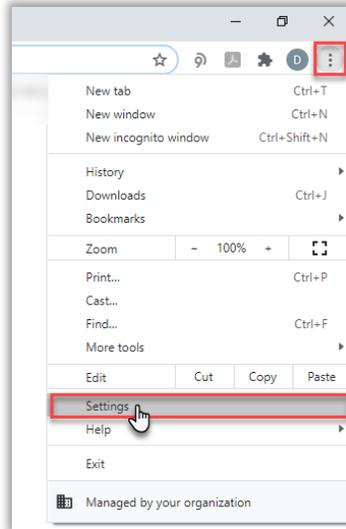
[Need more help?](#) ↗



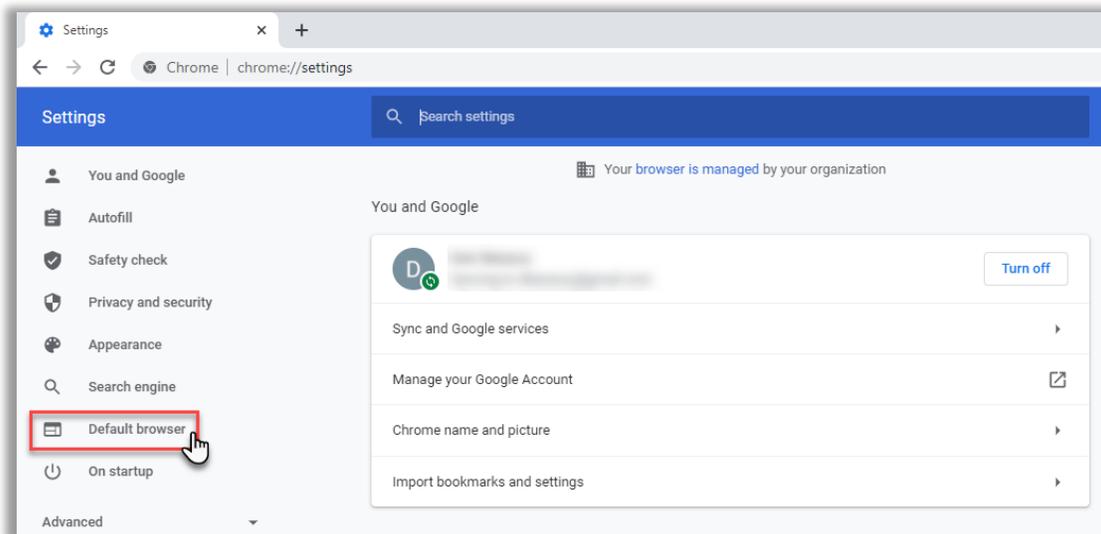
Once installed, Chrome can be set as a default browser for all applications, or you can simply create a shortcut for Atrezzo within the application.

How to set Chrome as Default Browser

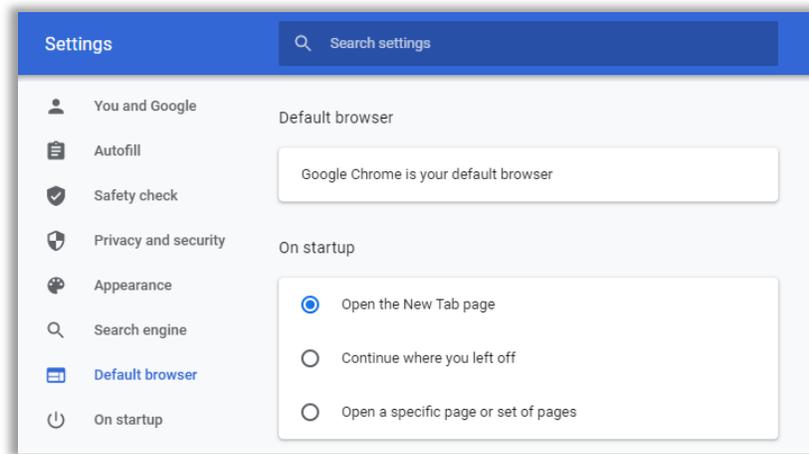
To set as the default browser, click the in the three dots in the upper right hand corner, the select Settings from the drop down.



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

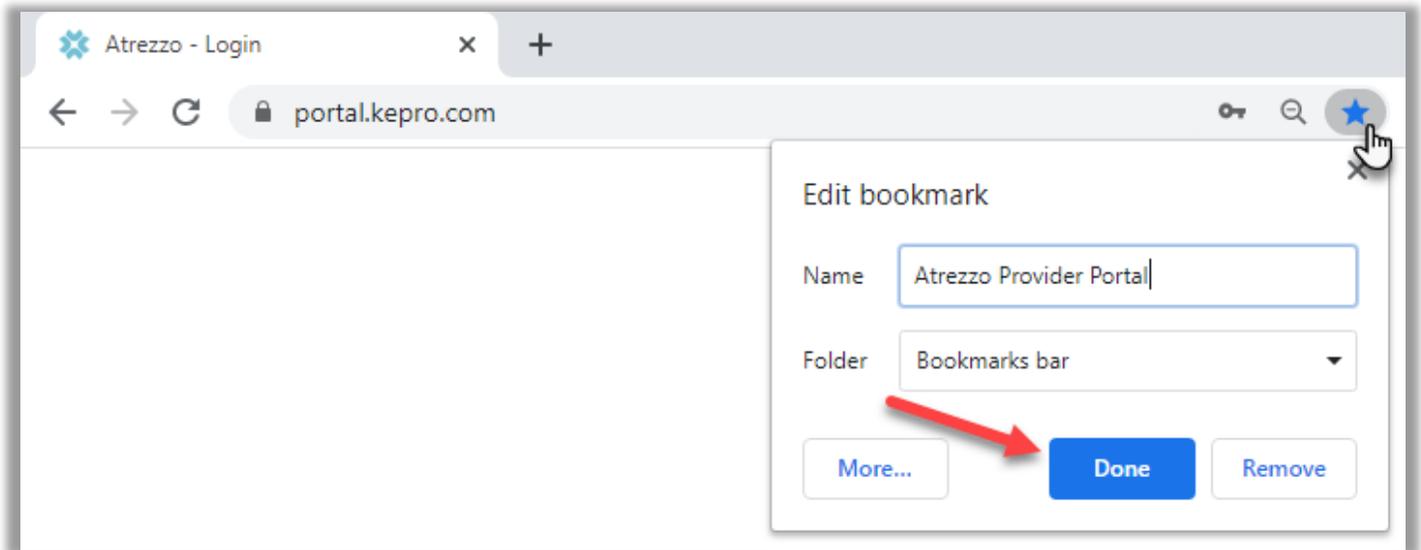


Select **Make Default** under Default browser.



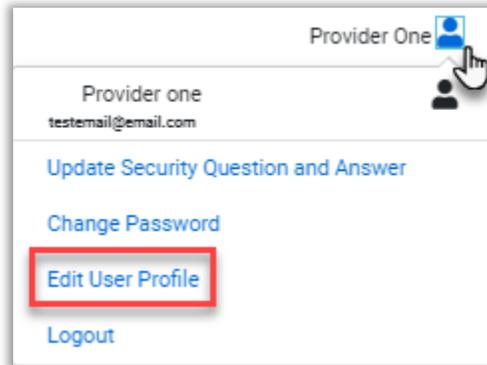
How to Set Atrezzo Bookmark in Chrome

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 user.

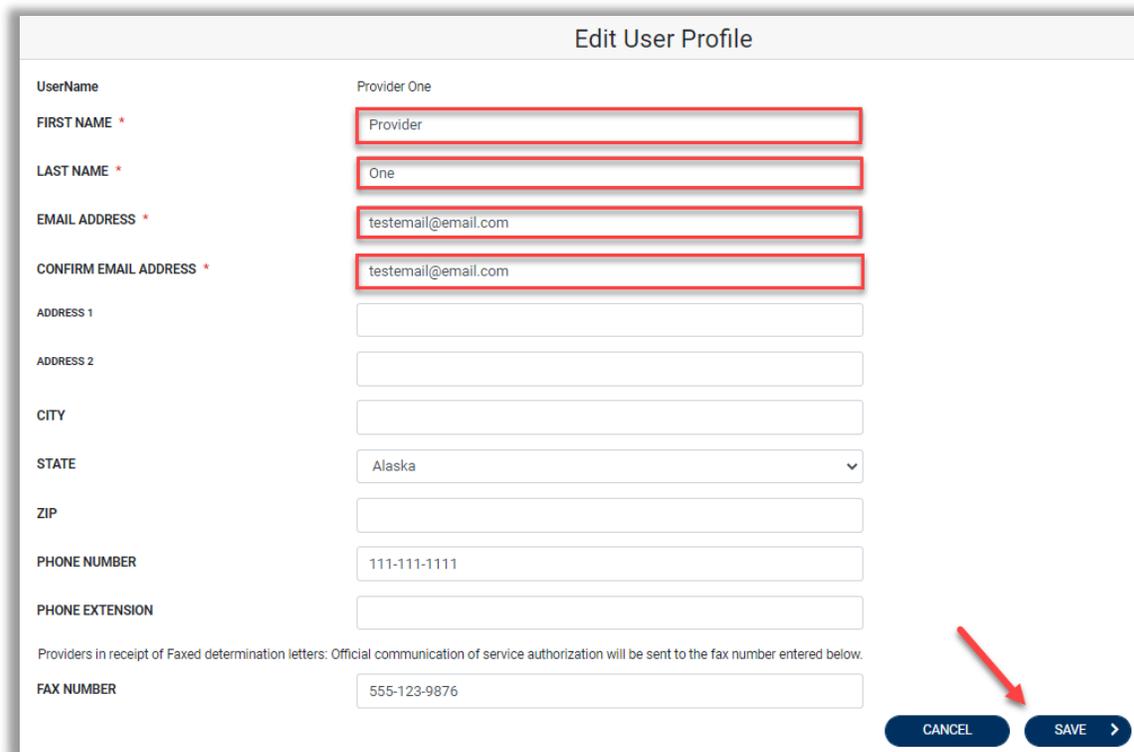


Updating User Profile

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**.



A screenshot of the "Edit User Profile" form. The form is titled "Edit User Profile" and is for "Provider One". It contains several input fields, each with a red border indicating they are required or highlighted. The fields are: "FIRST NAME" (value: Provider), "LAST NAME" (value: One), "EMAIL ADDRESS" (value: testemail@email.com), "CONFIRM EMAIL ADDRESS" (value: testemail@email.com), "STATE" (value: Alaska), "PHONE NUMBER" (value: 111-111-1111), and "FAX NUMBER" (value: 555-123-9876). There are also empty fields for "ADDRESS 1", "ADDRESS 2", "CITY", "ZIP", and "PHONE EXTENSION". At the bottom right, there are "CANCEL" and "SAVE" buttons, with a red arrow pointing to the "SAVE" button.



How to Access Assistance

For training assistance, please contact training@kepro.com

For technical assistance please contact the West Virginia Contact Support Center at 800.346.8272 or via email wvmedicalservices@kepro.com.