Kepro™

Atrezzo
User Guide
Provider Portal

Mississippi Utilization Management

Contents

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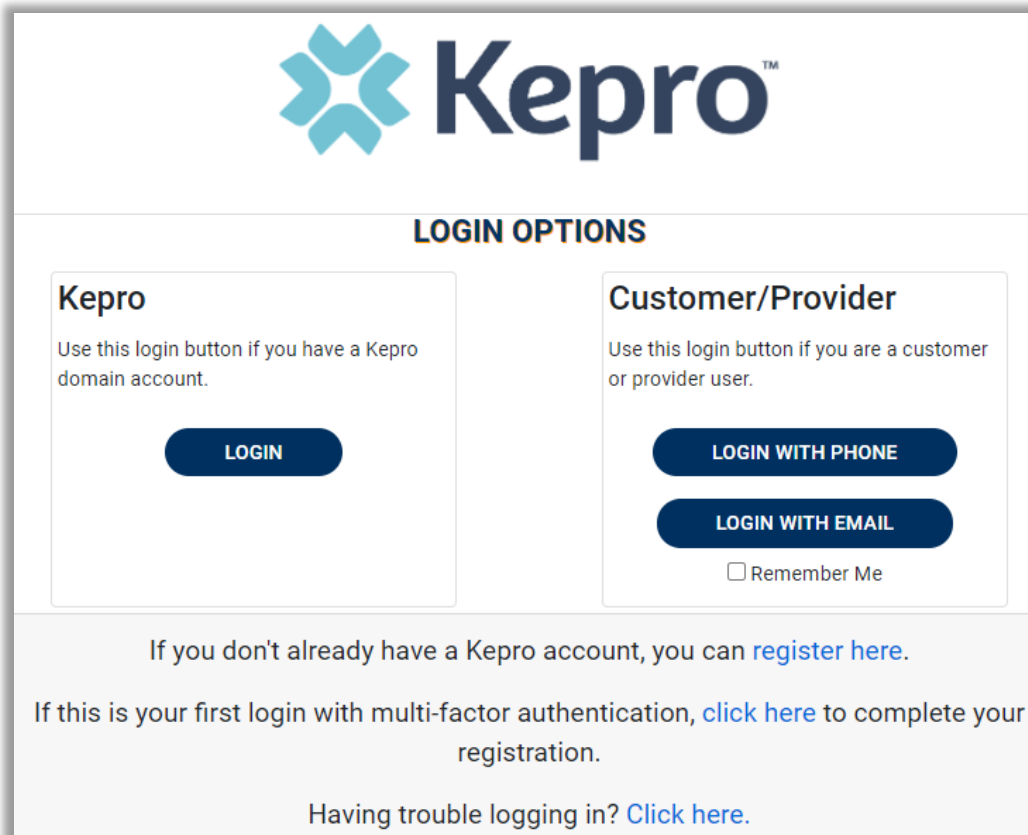
For example, to log in to a secure program, a user would need to type a password and enter another number from a text, phone call or email. Only the correct password combined with the correct number from the additional authentication factor would give a user access.

![Kepro logo]

Provider Login

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

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

New Provider Registration & MFA Registration

The below instructions will guide you through registering for the Atrezzo Provider Portal and completing the Multi-Factor Authentication (MFA) Registration. Both registration and MFA registration are a one-time process.

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

Enter your facility NPI and BCBS ID as the Registration Code, then click Next.

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

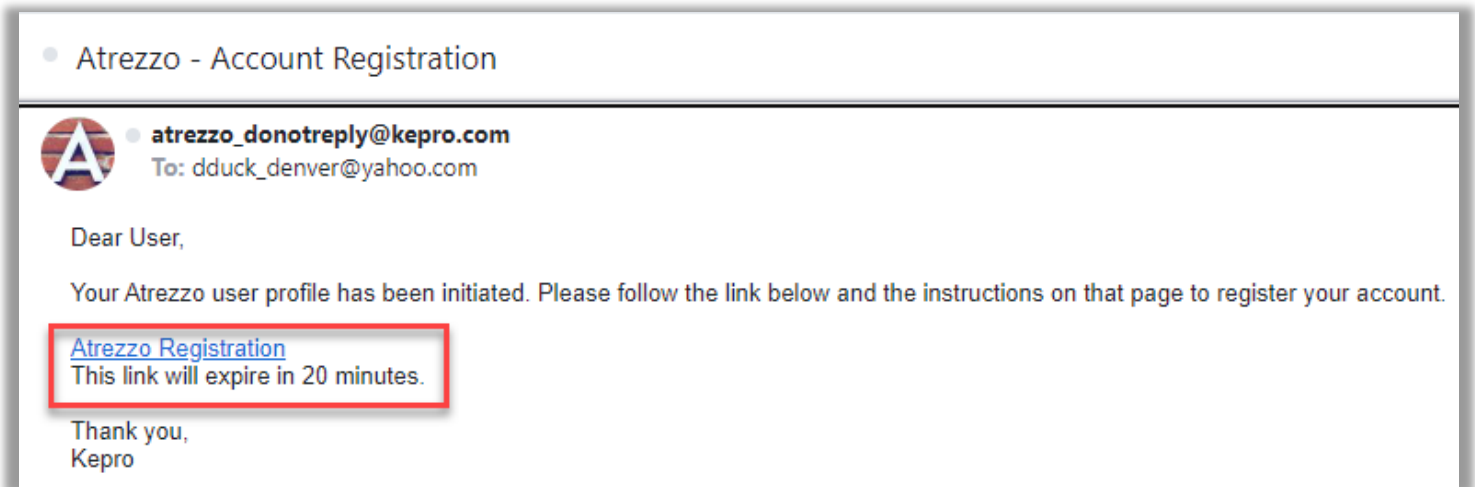Create Username, and enter all required fields under Contact Information, then click Next.

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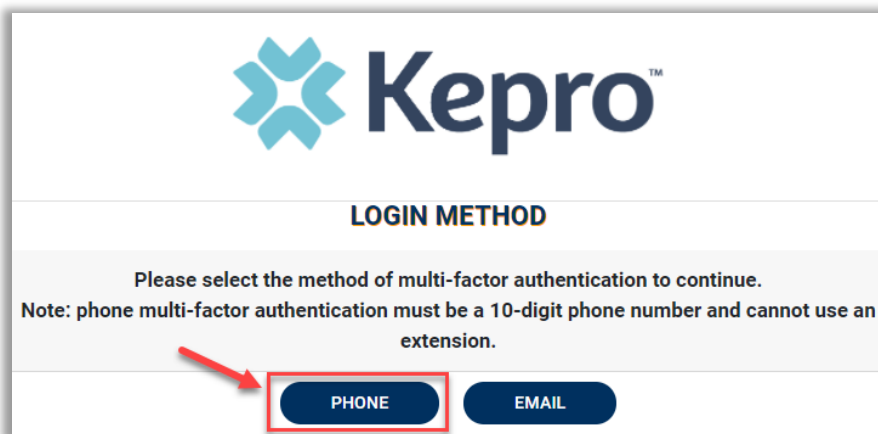
Enter your work email address, then click **Send Verification Code**. A 6-digit code will be sent to your email.
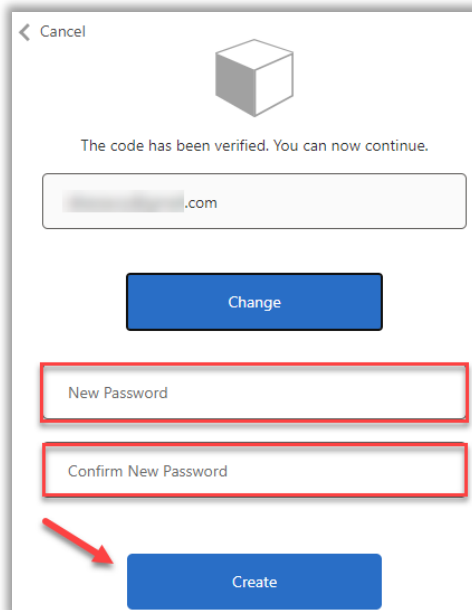

IMPORTANT: Do NOT enter anything in the Password section (this is not needed at this step).

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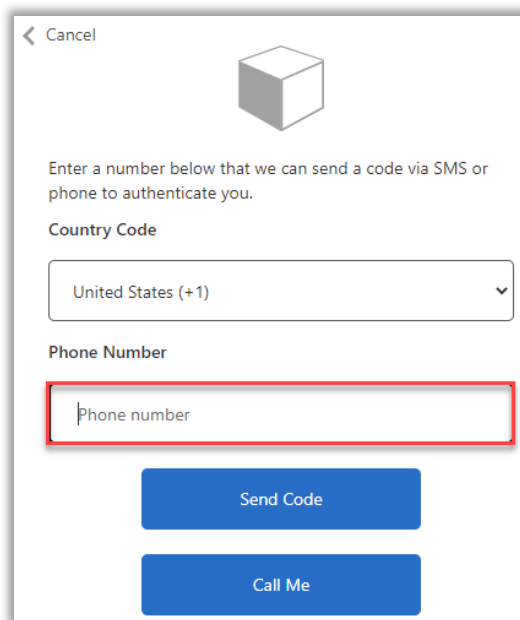

IMPORTANT: Do NOT enter anything in the Password section (this is not needed at this step).

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.

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

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

For SMS text authentication, enter the verification code received.

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

The system will automatically authenticate and display the home page.

Email Verification

Click the EMAIL button

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

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

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

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

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

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.

System Navigation

The navigation pane will remain in place regardless of navigation through the system. This functionality allows for quick and easy navigation from any screen.

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

|		
HOME	**Home**	This is the default page upon successful login and will enable you to view submitted cases and any pending submissions.
CASES	**Cases**	This section will enable you to search cases (requests) based on specific parameters. To ensure efficient search results, try selecting specific information in each drop down to narrow search results.
CREATE CASE	**Create Case**	This section will enable you to create a new request.
CONSUMERS	**Consumers**	This section will enable you to search for Consumer (Member) specific information utilizing the Consumer ID or last name and date of birth. Consumer specific data will render based on information entered.
SETUP	**Setup**	**Visible to Provider Administrator users only.** This section will enable Provider Administrators to manage, edit, and add provider users for the facility.
MESSAGE CENTER	**Message Center**	This section will enable users to communicate directly with the team at Kepro regarding specific Consumers and/or cases.
REPORTS	**Reports**	There will not be any provider reports for this contract.
PREFERENCES	**Preferences**	This section will enable you to set preferred diagnosis or procedure codes and preferred serving providers. This will allow for quicker request submission.
Help	**Help**	This section will display available information including User Guides, FAQs, Latest Release Notes, and Password Guidelines.

![Kepro logo]

General System Features

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

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

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

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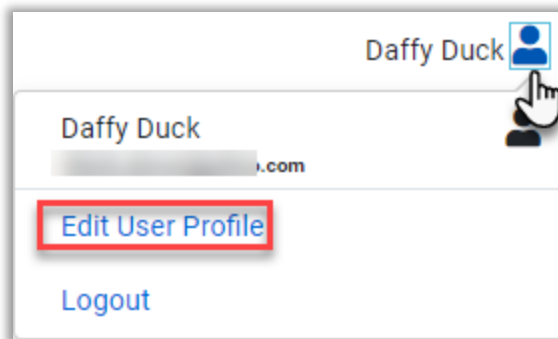
Home Screen View

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

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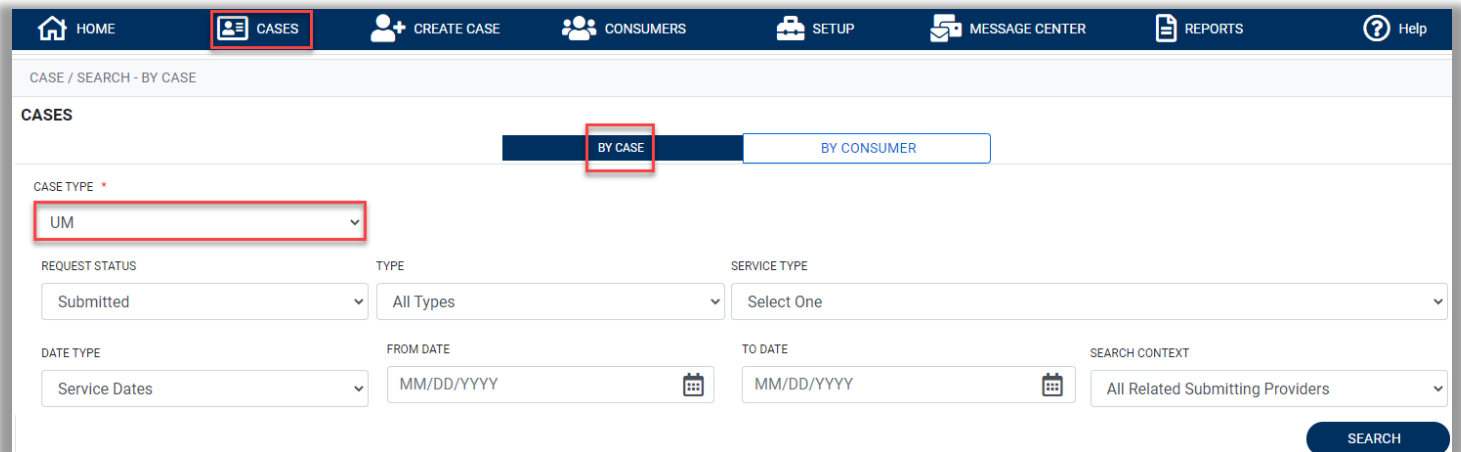
Cases

This section is searchable by Case or Consumer. Select the specific search on the top.

To search By Case, select Case Type UM from the drop down. Once the Case Type is specified, additional search parameters will appear. To identify specific cases and ensure efficient search results, try selecting specific information in each drop down to narrow search results.

Note: *You must enter a submitted or service date span for search results to render.*

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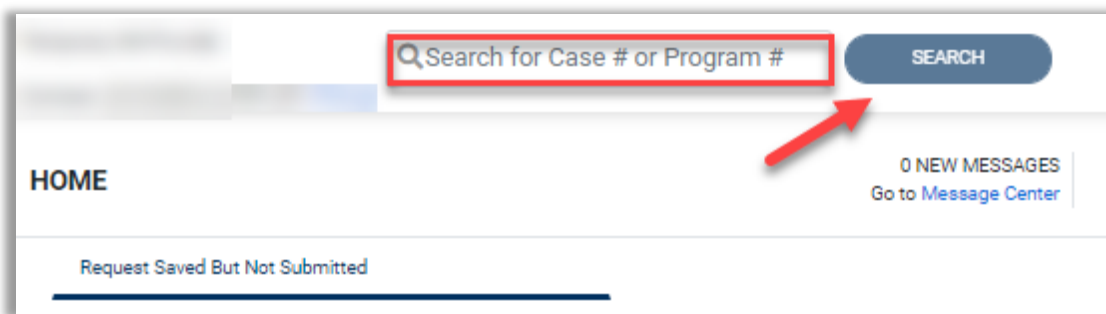
![Kepro logo]

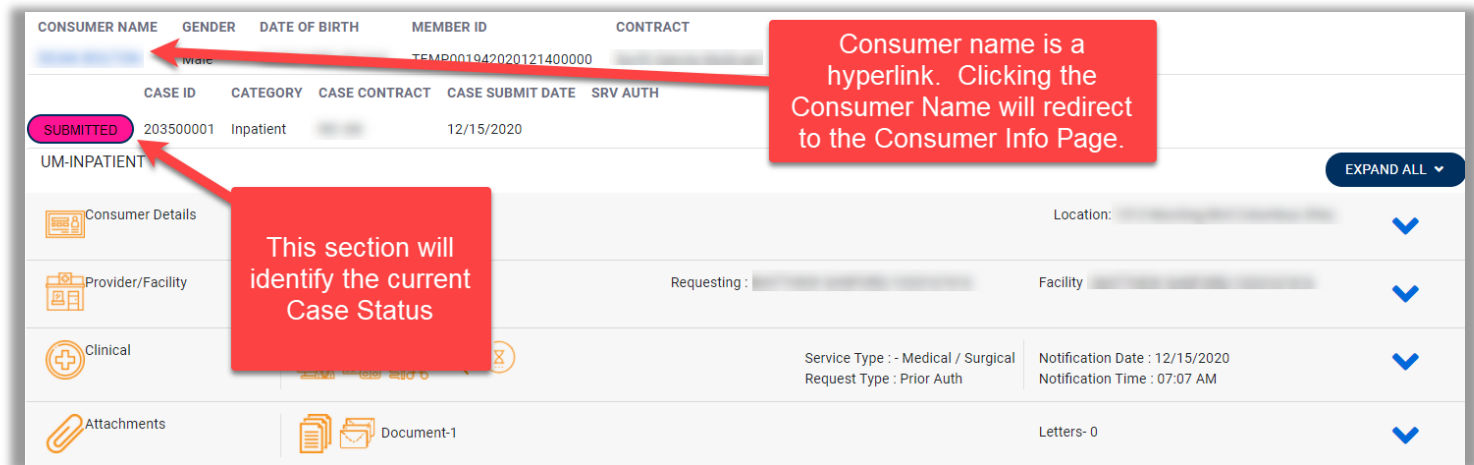Search results will render below. The Case ID is a hyperlink which will open the specified Case page.

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.

UN-SUBMITTED	This identifies a case that has been started but has not been completed or officially submitted to Kepro for review. This case will not have an associated Case ID until it is submitted. Once all information is entered, the case will move to Submitted status.
SUBMITTED	This identifies a case that has been submitted but has not yet been completed. The case will remain in this status until it has been completed.
COMPLETED	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).

![Kepro logo]

Create Case

![Create Case icon button]
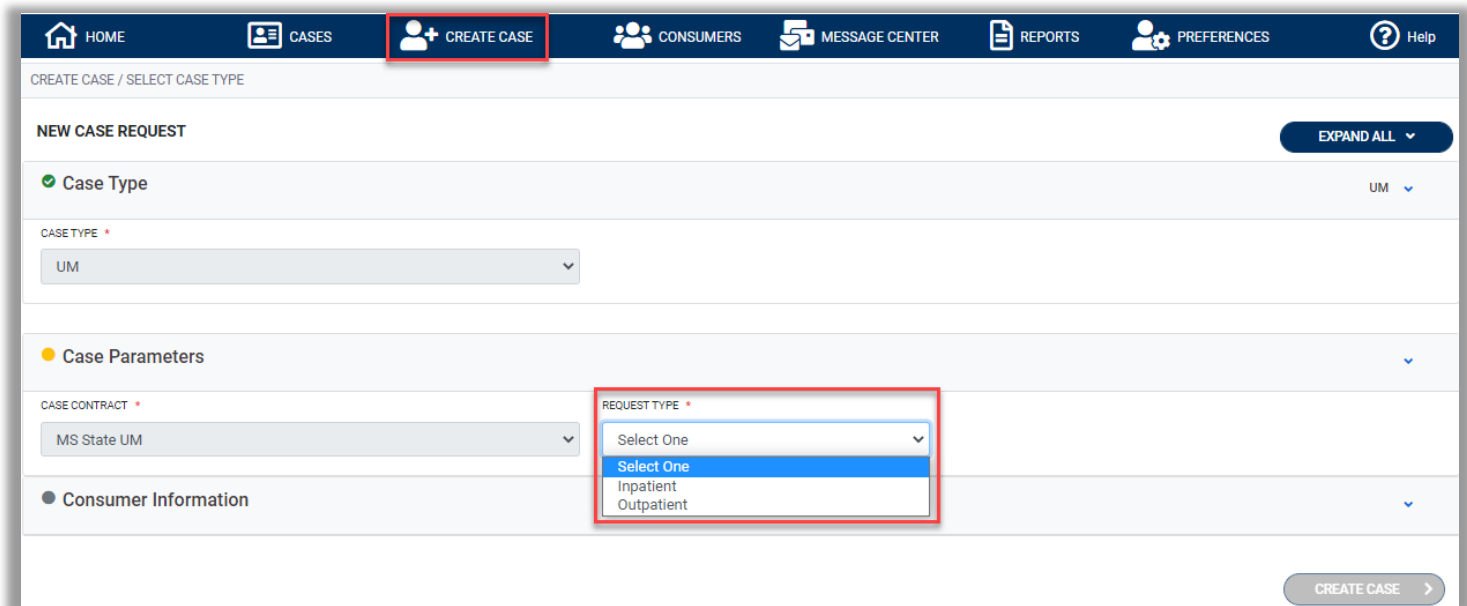
This section will identify the steps to create a new UM request. In the navigation pane, click **CREATE CASE**.

The Case Type will default to **UM**. The Case Contract will default to **MS State UM**. Select the proper Request Type: **Inpatient** or **Outpatient**.

After making a selection, the Consumer section will expand.

Kepro™

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

Click the radio button to select the consumer. The page will refresh with the selected member, then click **CREATE CASE**.

NOTE: The **CREATE CASE** button will remain inactive (grayed-out) until all fields are complete.

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.

Outpatient Request

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

Place of Service Options include:

- Ambulatory Surgical Center
- Dialysis Center
- Home
- Inpatient Hospital
- Inpatient Rehab Center
- Office
- Outpatient Hospital
- Outpatient Rehab Center
- Skilled Nursing Facility
- Transportation

Outpatient Service Types Include:

- Home Health
- Home IV Therapy
- Hospice
- Medical Consultation – Outpatient
- Outpatient Surgery
- Diabetic Care

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

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

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

Once all codes are listed, select Add Procedure.

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

To enter details for each procedure code, expand the line for each code entered and complete required fields. Required fields will vary based on the procedure code entered.

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

Select the file and click **Open**.

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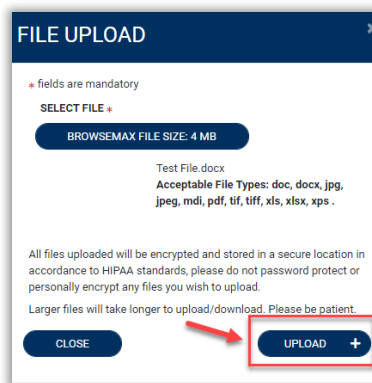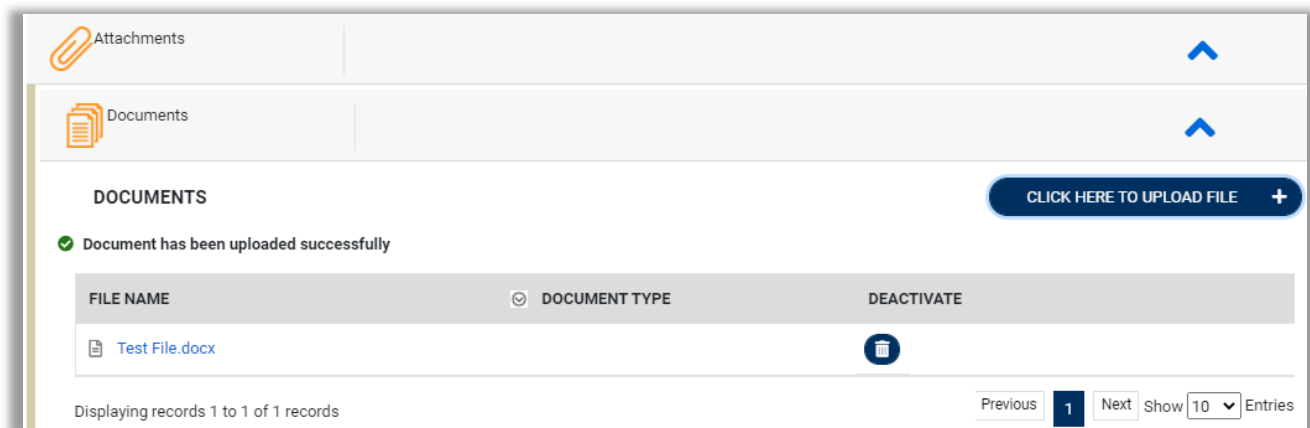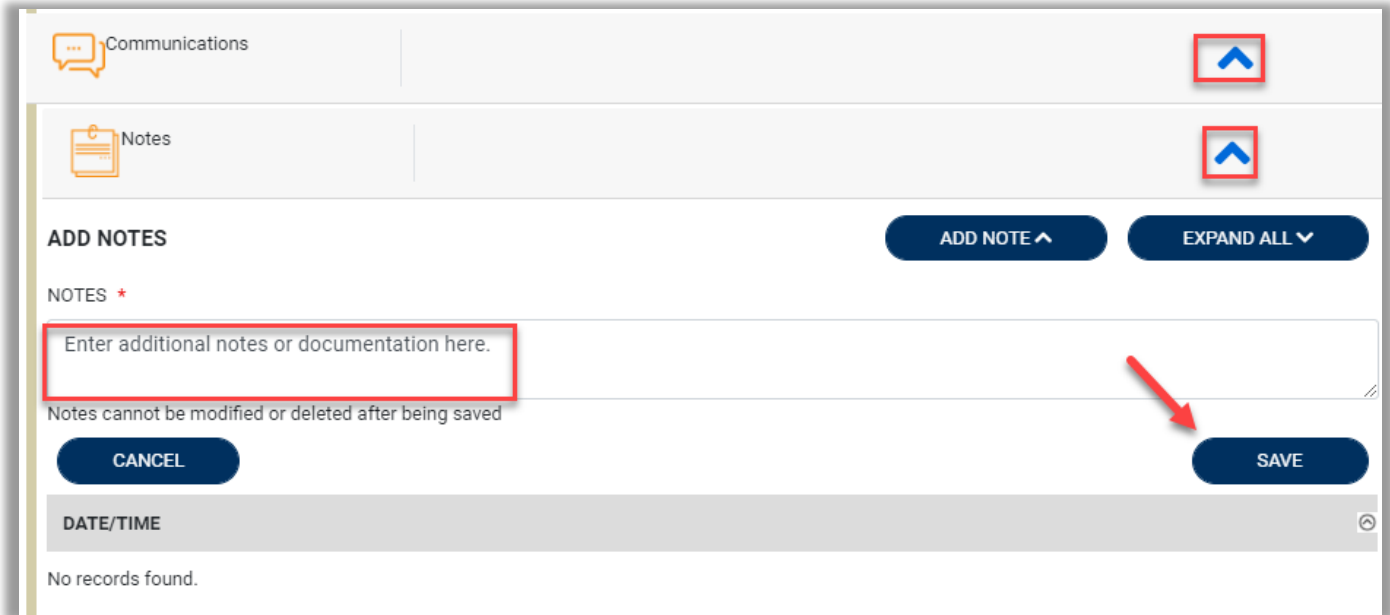

All uploaded documents will be visible in the Documents section for review.

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

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

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

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

Inpatient Request

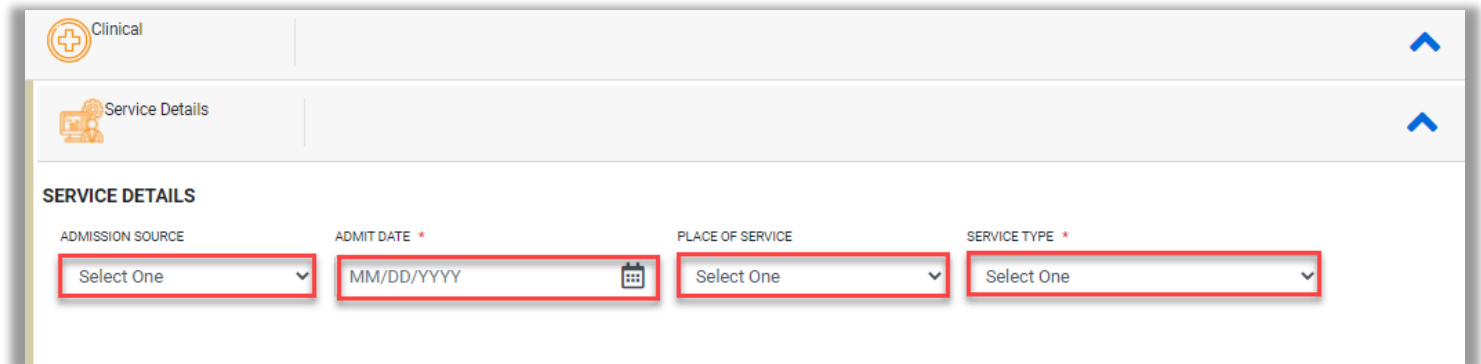To submit an inpatient request, expand Clinical, then expand Service Details. Select the appropriate Admission Source, Admit Date, Place of Service, and Service Type.

Admission Source Options Include:

- Elective
- Emergency

Place of Service Includes:

- Ambulatory Surgical Center
- Dialysis Center
- Home
- Inpatient Hospital
- Inpatient Rehab Center

- Office
- Outpatient Hospital
- Outpatient Rehab Center
- Skilled Nursing Facility
- Transportation

Inpatient Service Types Include:

- Hospice – IP Hospital
- Inpatient Surgery
- Inpatient Hospital
- Inpatient Rehab
- LTAC

- Medical Consultation – Inpatient
- Residential Treatment Facility
- Skilled Nursing Facility
- Transplant

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

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

Once all diagnosis codes are entered, expand Procedures, expand Request 01, and enter required fields under LOS.

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

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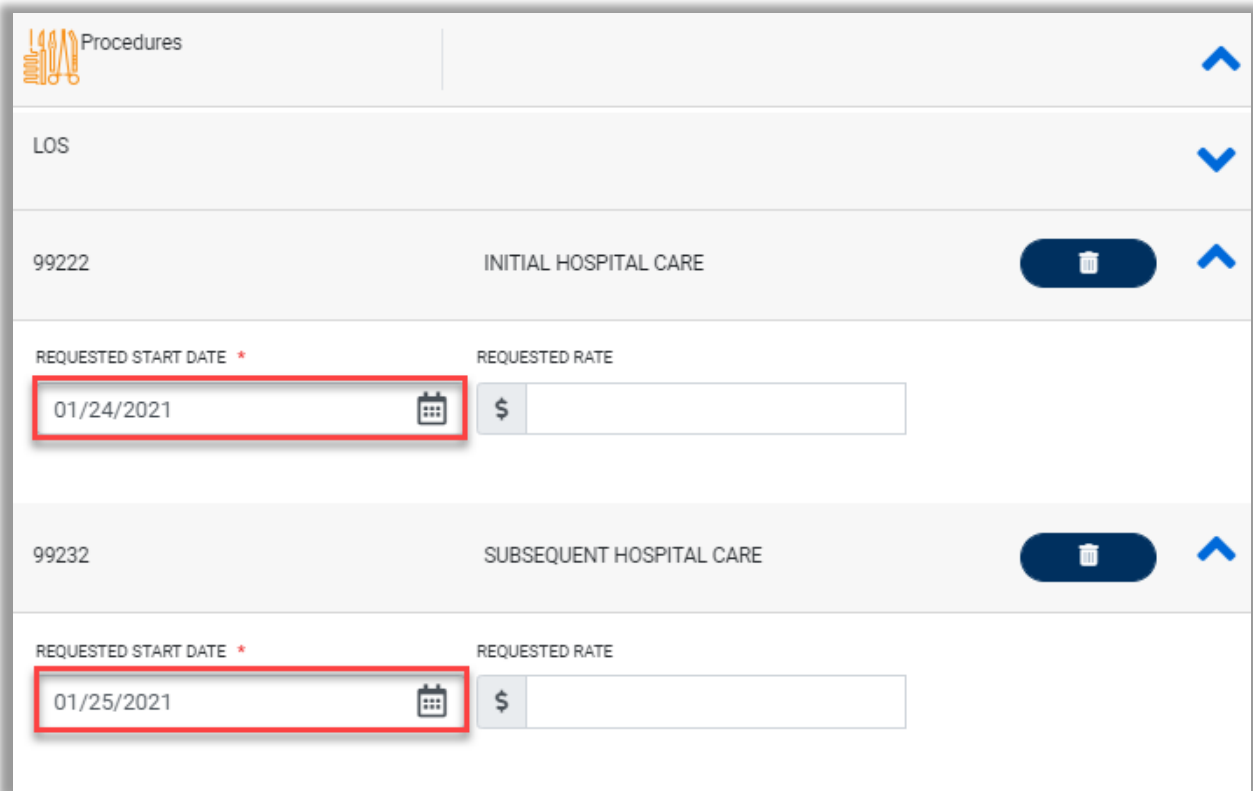
If the requested start date entered under LOS will not be applicable to all procedure codes, expand the procedure code section to update the date. Once the date has been changed, it will automatically save.

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

![Kepro logo]

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

Select the file and click Open.

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

FILE UPLOAD

*fields are mandatory

SELECT FILE *

BROWSE MAX FILE SIZE: 4 MB

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

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 +

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

Attachments

Documents

DOCUMENTS   CLICK HERE TO UPLOAD FILE +

✔ Document has been uploaded successfully

FILE NAME	⊙ DOCUMENT TYPE	DEACTIVATE
📄 Test File.docx		🗑

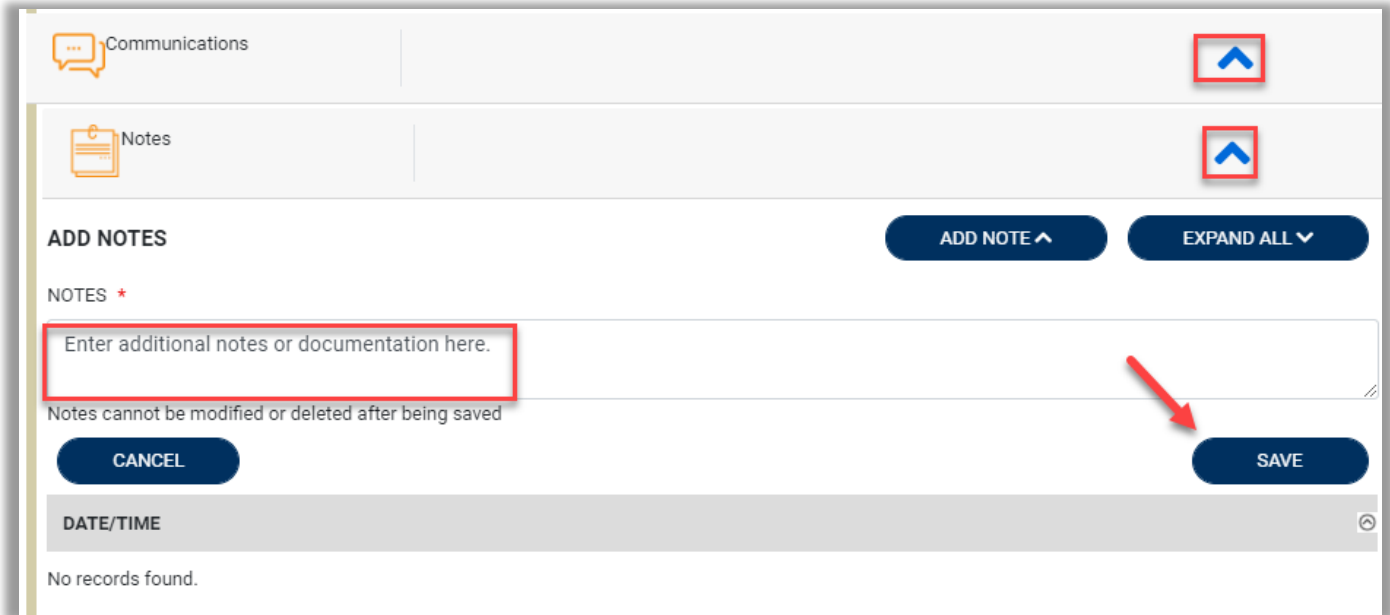Displaying records 1 to 1 of 1 records   Previous 1 Next Show 10 ⌄ Entries

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

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

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

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

Consumers

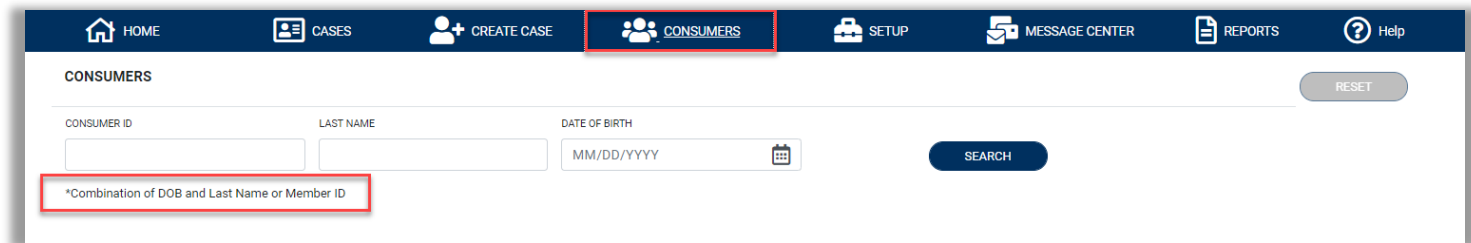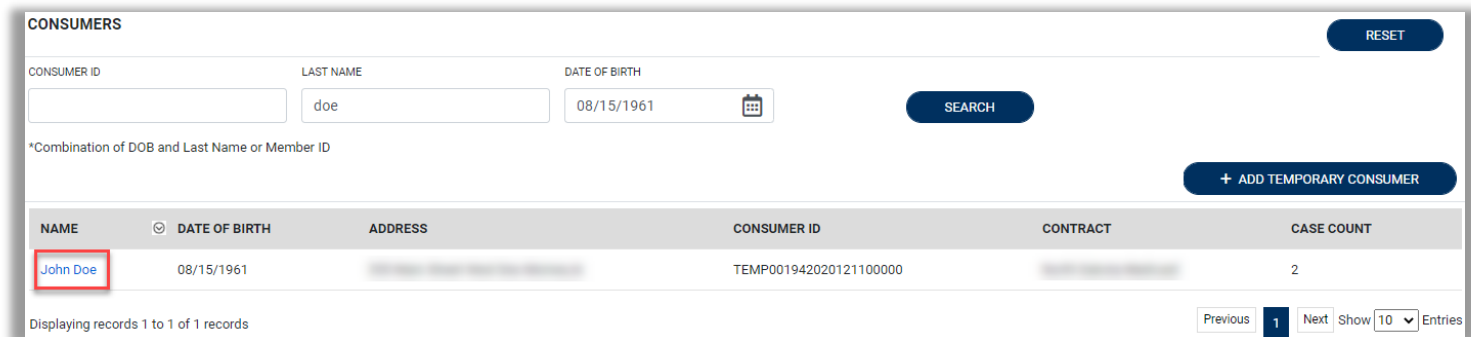To search by Consumer (Member), click Consumer on the navigation pane. The Consumer default screen will appear providing options to search for a Consumer. This process is the same as searching the Consumer when creating a case.

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

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

Set Up

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

Add New User

As a Provider Group Administrator, individual 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 Provider group section.

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

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

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

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 in the Provider NPI field and Medicaid ID in the Provider Registration Code field. Click **FIND PROVIDER**.

NOTE: This will be similar to the process when registering the original account. If the provider group does not have an NPI, enter the Medicaid ID in both the NPI and Registration Code fields.

When the provider option populates, select the provider, by checking the box, to confirm and click **SELECT**.

The provider will then be added to the list of providers under Manage Provider Groups. To add additional users to this Provider Group, expand the desired Provider Group and follow the steps to Add New User.

Message Center

This section will identify the steps to view new and unread messages. To send messages, you must be inside a specified case.   New available messages have an indicator in the navigation menu.

  Indicates there are unread messages available to view.

  Indicates all messages are read; no messages available to view.

MESSAGE CENTER

FROM	SUBJECT	TO	SENT ON	
Kepro	Status Complete	Provider Demo	9/14/2020 10:04:50 AM	⌄
Kepro	Please Compete 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:

GO TO CASE >

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.
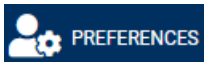
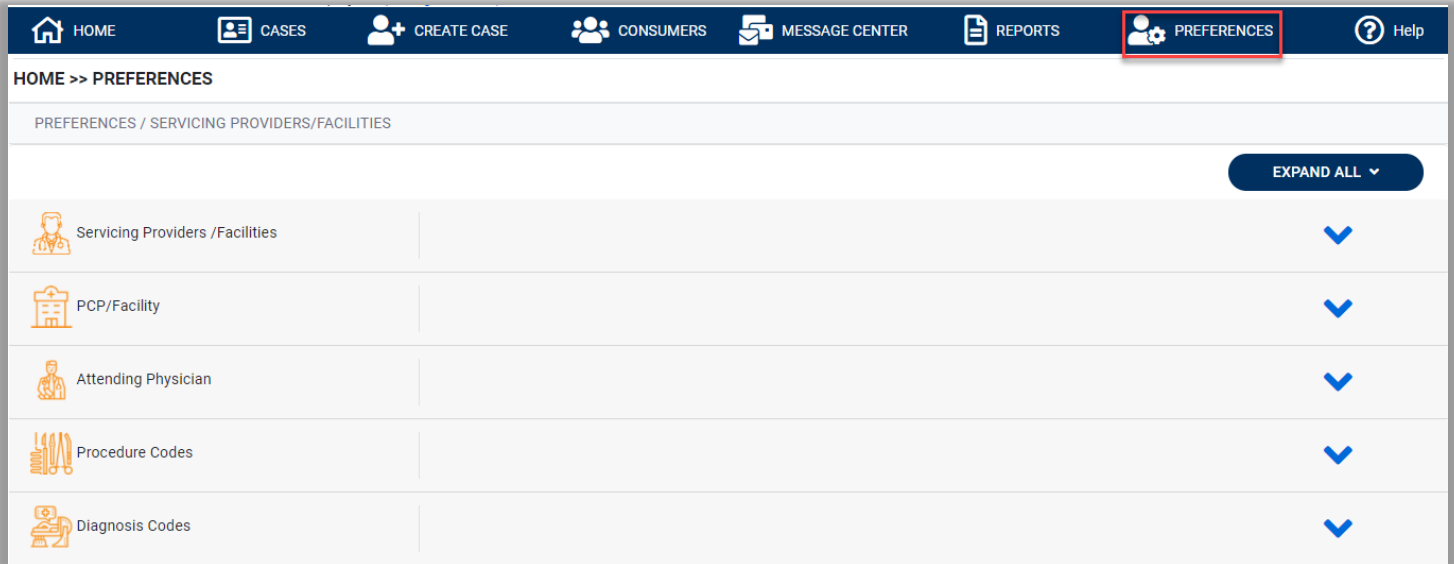CANCEL   SEND >

Reports

There will not be any reports available for this contract.
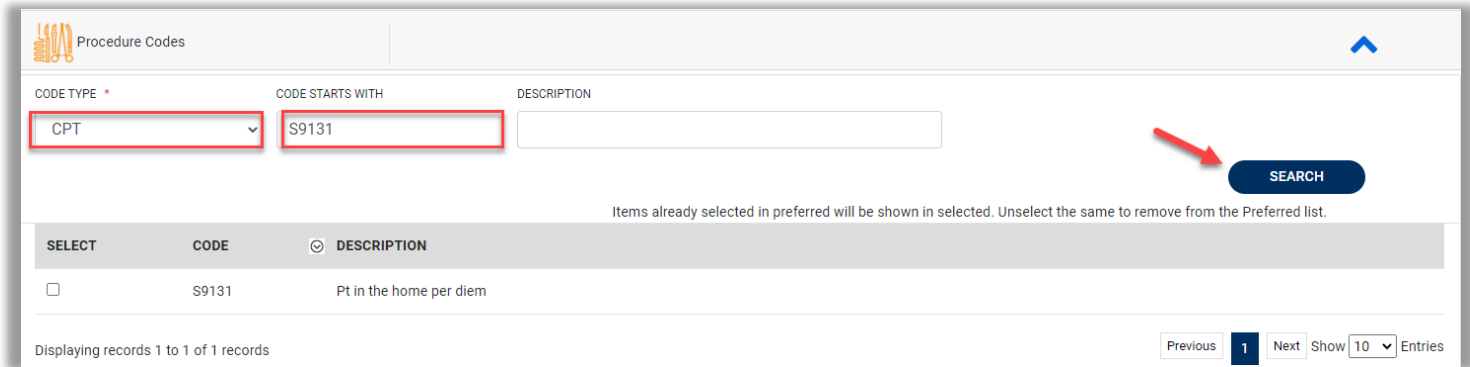
Preferences

The Atrezzo Provider Portal allows for some user customization based on preferred information, including diagnosis codes and procedure codes. To set favorites, click **PREFERENCES** in the navigation menu.

To set preferred procedure codes, expand Procedure Codes, select the proper procedure code type from the drop-down menu, enter the desired procedure code, and click **SEARCH**.
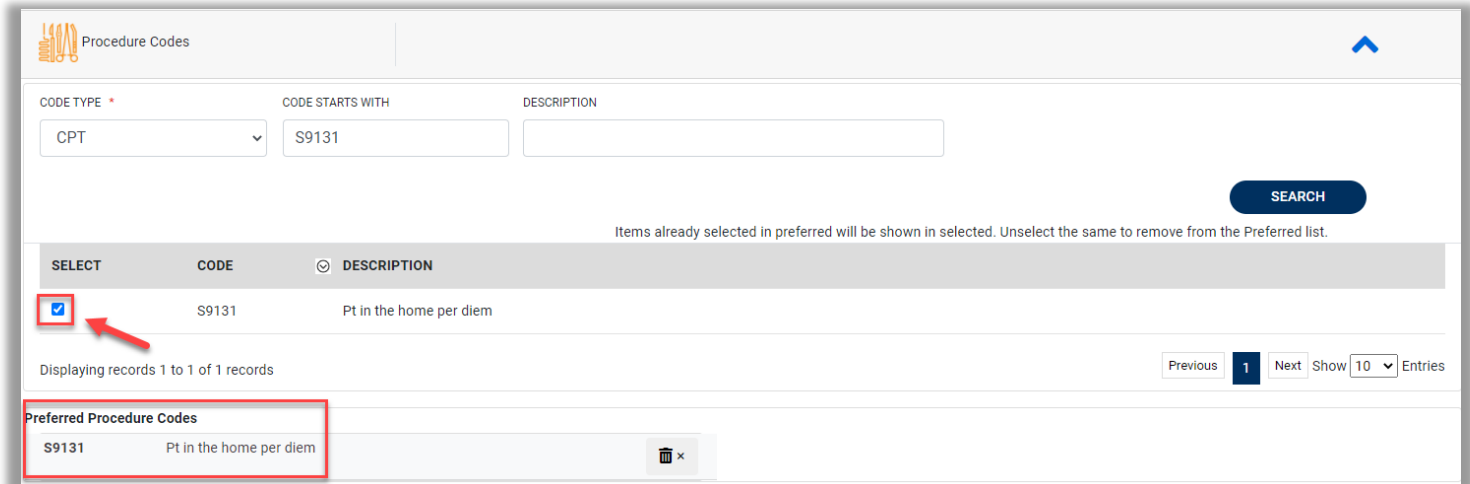
Click the box to select the procedure code to be added. The selected code will automatically be added to the preferred procedure code list. Continue these steps until all preferred codes are added. There is no limit to the number of preferred codes that can be entered.
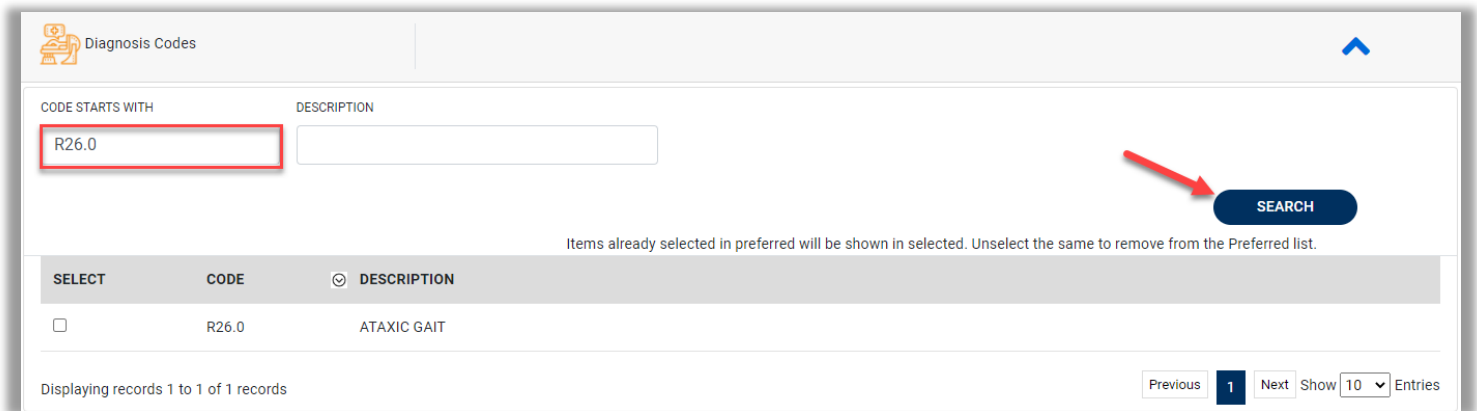
To set preferred diagnosis codes, expand Diagnosis Codes then enter the diagnosis code and click **SEARCH.**
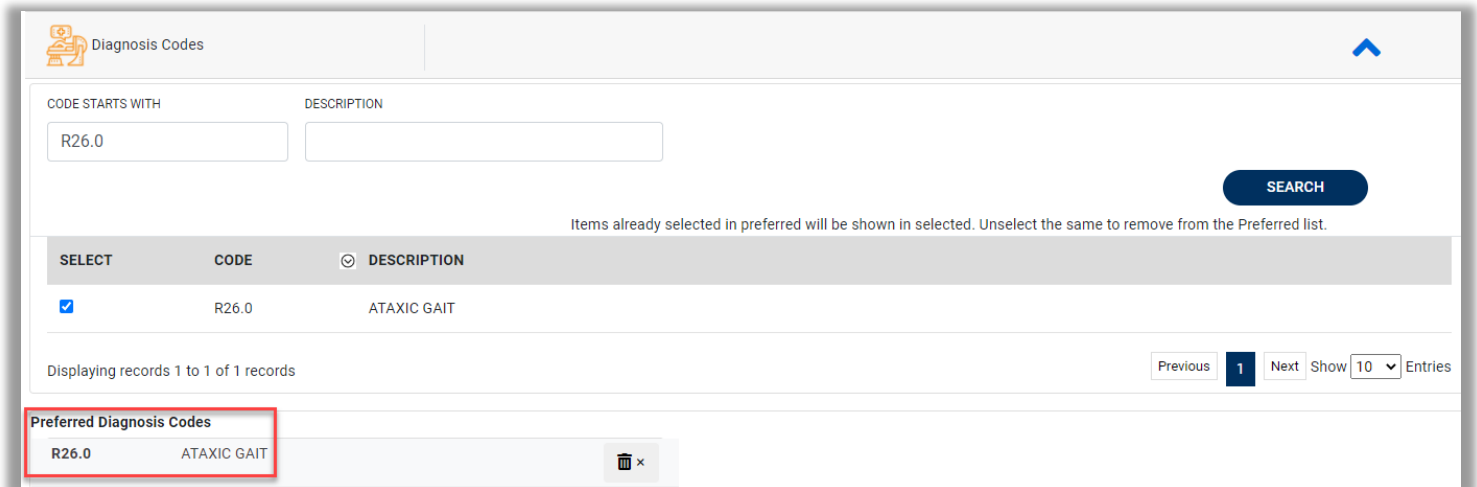
Click the box to select the diagnosis code to be added. The code will automatically be added to the preferred diagnosis code list.   Continue these steps until all preferred codes are added. There is no limit to the number of preferred codes that can be entered.

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 options may change over time.
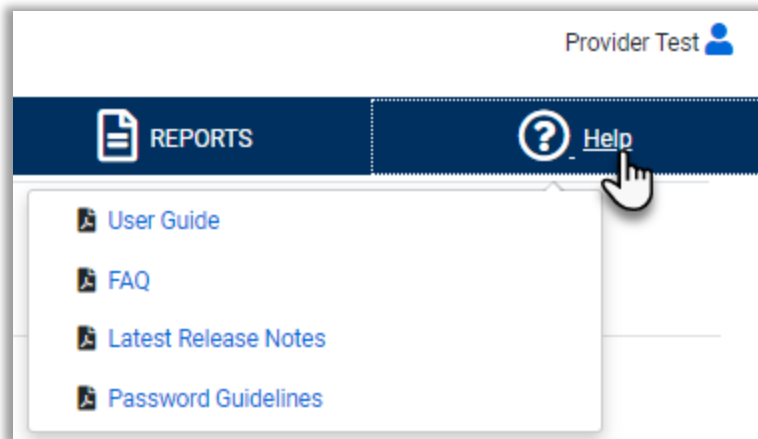
How to Complete a 'Saved But Not Submitted' Request

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

To complete the saved request, hover over the request line and click the edit icon.
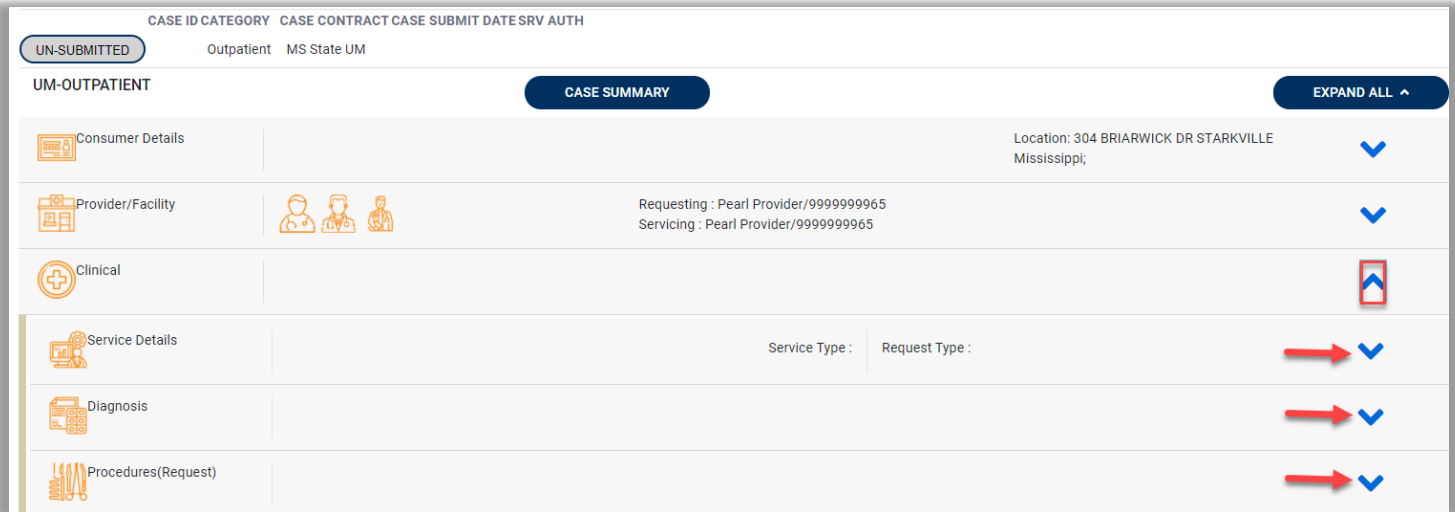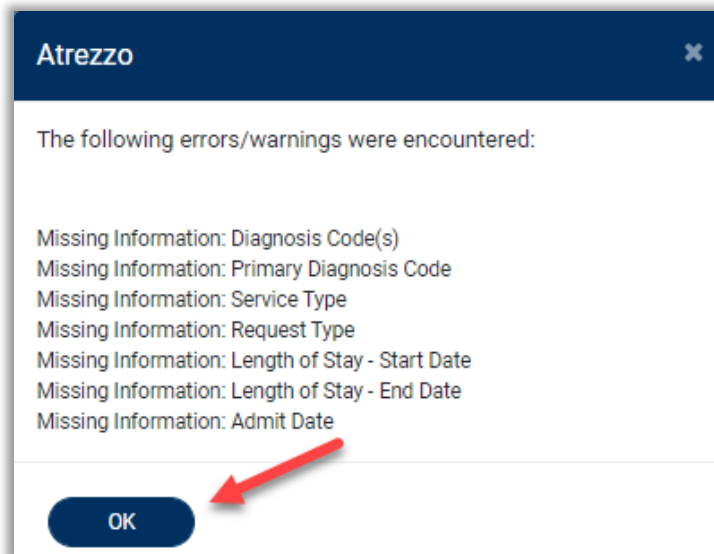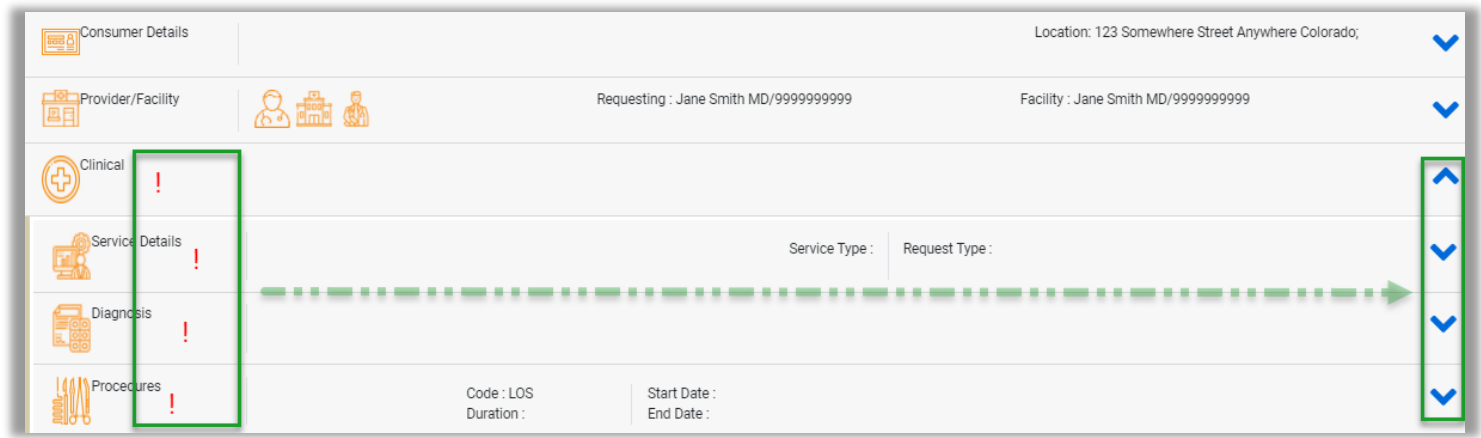
The case creation page will display. To continue adding required information, expand clinical and review Service Details, Diagnosis, and Procedure sections to identify information necessary to submit request.

If uncertain what required information is missing, clicking Submit at the bottom of the page 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.
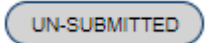
Once all required information is added, the ! indicator will disappear, and the case can be submitted. If additional information is needed, refer to other sections for more information on attaching clinical documentation, creating note documentation, and other options.

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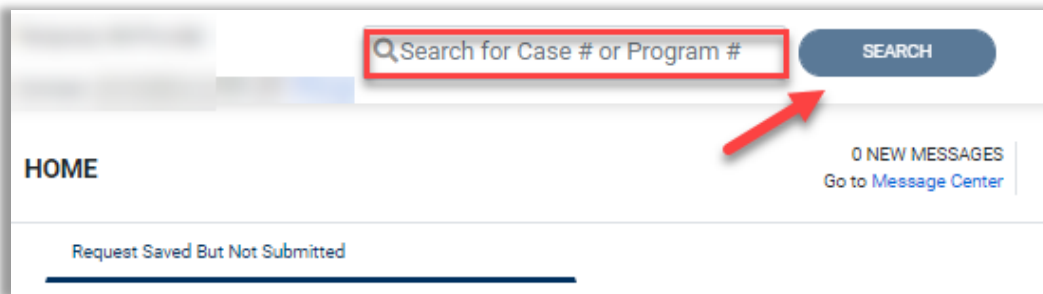
Once a request has been submitted there are a different approaches to view the status. A status check can be completed with a Case ID or Consumer Name and DOB. Below you will find step by step instructions for each method.

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

UN-SUBMITTED	This identifies a case that has been started but has not been completed or officially submitted to Kepro for review. This case will not have an associated Case ID until it is submitted. Once all information is entered, the case will move to Submitted status.
SUBMITTED	This identifies a case that has been submitted but has not yet been completed. This case will remain in this status until it has been completed.
COMPLETED	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).

![Kepro logo]

View Status by Case ID

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

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

View Status by Consumer

To view the status of a request by Consumer, you will search by the individual name. Click Consumers in the navigation pane and enter Consumer ID or Last Name and Date of Birth, then click **SEARCH**.
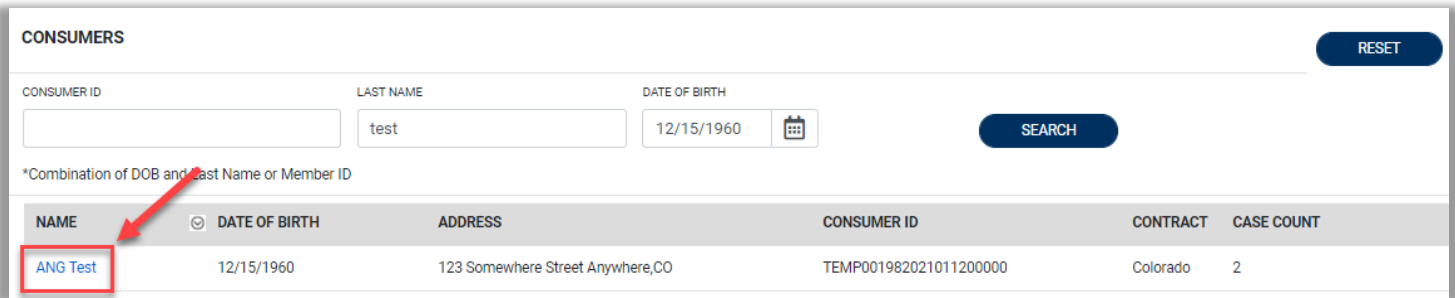
The result will render below. Click the Consumer Name to view available requests. The case count will identify how many requests have been submitted.

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

Email Notification

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

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

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

Dear Provider,

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

Thank you,
Kepro

How to View a Determination Letter

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

Once the case displays, click **CASE SUMMARY** at the top of the page.

The Case Summary will display in a new tab of the browser.

To view the determination letter(s), scroll to the bottom of the case summary. The letters will be hyperlinks. The file will open outside of the Provider Portal for viewing, downloading/saving, and/or printing if needed. In most instances, the file will be visible in the bottom banner, you will need to click the file to view the document.
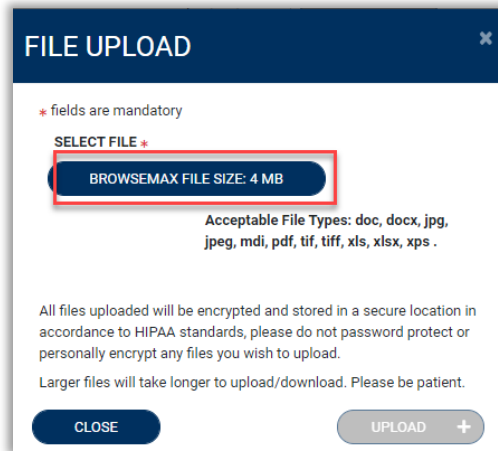
After clicking link, the document will be viewable in an internet browser tab separate from the Provider Portal. Once view is complete, close tab to return to the Provider Portal.
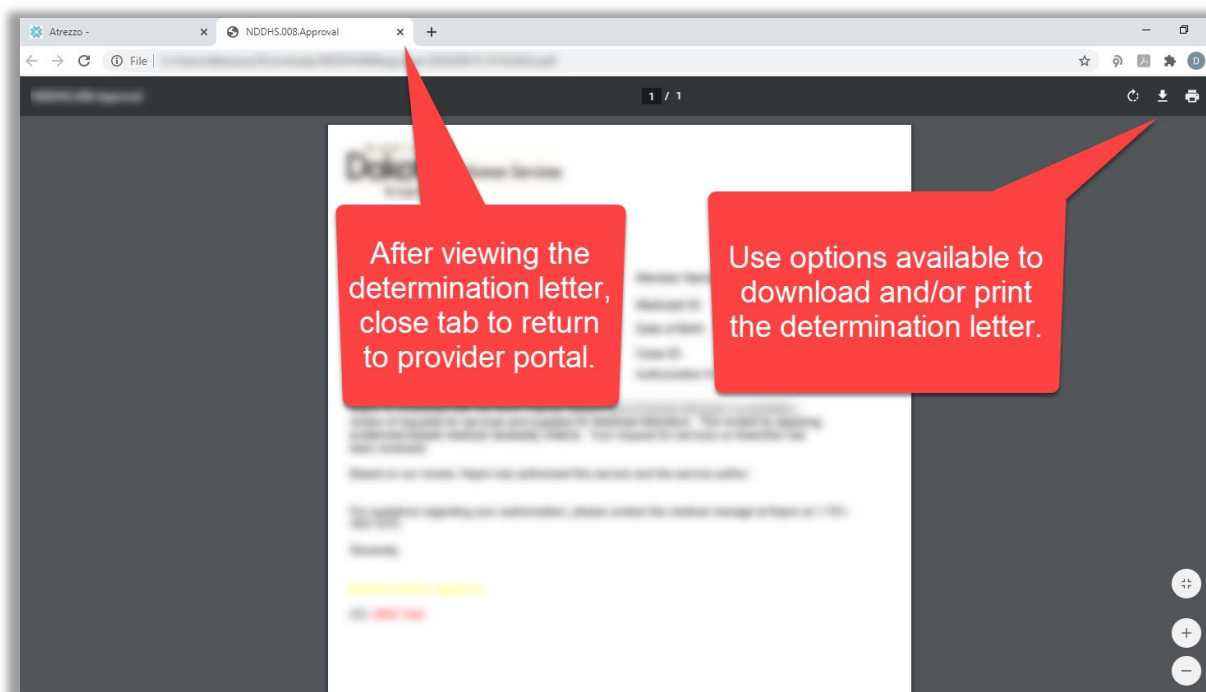
How to Add Additional Clinical Documentation

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

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

Select the file and click Open.

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

FILE UPLOAD

* fields are mandatory

SELECT FILE *

BROWSE MAX FILE SIZE: 4 MB

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

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 +

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

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 10 ⌄ Entries

![Kepro logo]

How to Submit a Concurrent Request
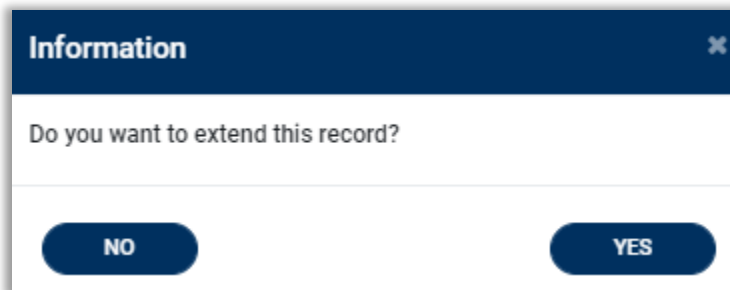
During an inpatient stay, concurrent reviews can be added to the original request by requesting an extension.

Within the original request, click **EXTEND**.
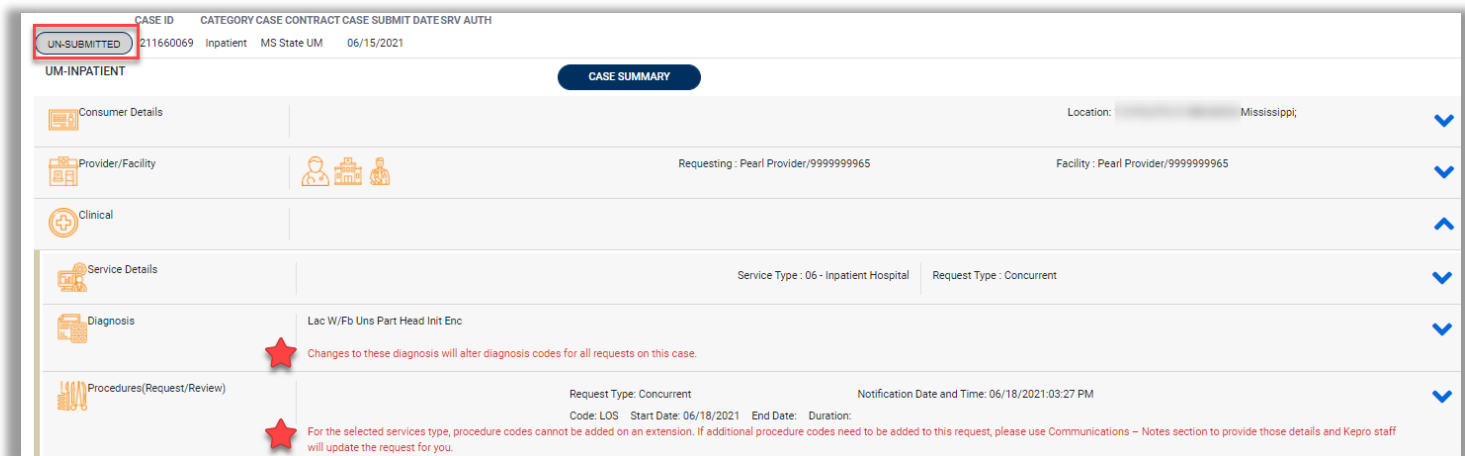
A pop up will appear to confirm the request to extend the record. Click **YES** to confirm.

The page will refresh and will display Un-Submitted (similar to when submitting the request initially). Expand clinical, informational notes will display. For an extension, new procedure codes cannot be added, you will need to follow the process to request a revision for any new procedure codes if needed.

Expand Procedures, then expand the new request line (Request 02, Request 03, etc.).

NOTE: The new request line will be identified by Unsubmitted. Each extension, or request for concurrent review, will display as an individual request within the case.

Expand LOS, the start date will pre-populate based on the last request end date. Enter a new End Date and Duration.

Upload additional clinical information to support concurrent review. Expand Attachments, expand Documents, and then select **CLICK HERE TO UPLOAD FILE**. A pop up will display, click Browse to search for the supporting documentation.

Select the file and click Open.

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

FILE UPLOAD ✕

✱ fields are mandatory

SELECT FILE ✱

BROWSE MAX FILE SIZE: 4 MB

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

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 ＋

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

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 10 ⌄ Entries

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**.
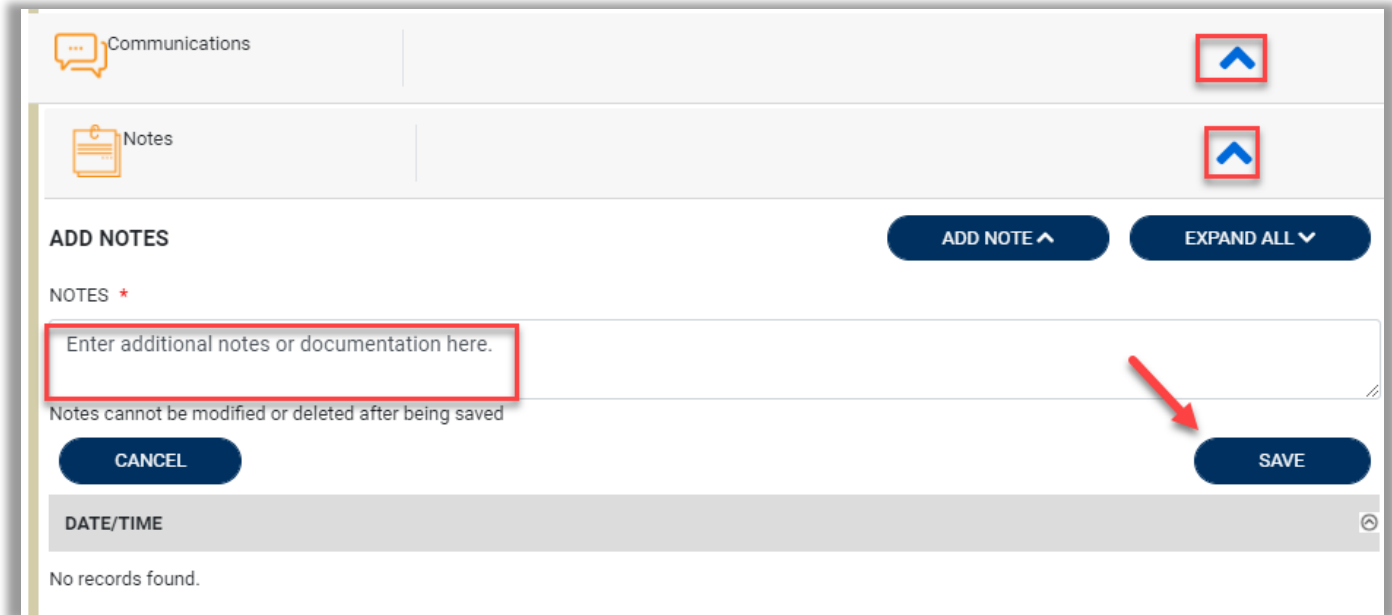

After all information is entered and uploaded, read and check the box of the disclaimer at the bottom of the page. Then click **SUBMIT**.

How to Add Revisions to a Submitted Request

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

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

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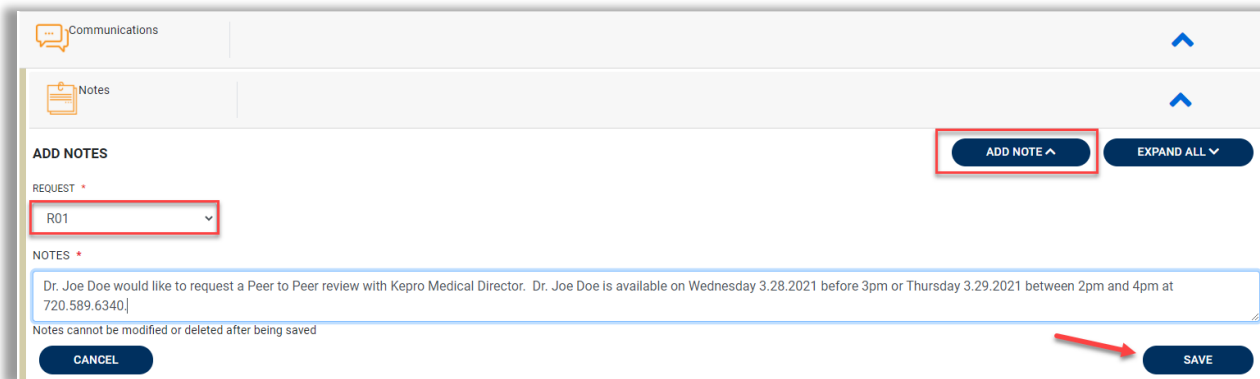
Provider Options Following Adverse Decisions

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

How to Request a Peer-to-Peer Review

After an adverse decision, an ordering provider may request a Peer-to-Peer review within 1 business day from the date of the medical necessity adverse determination. To request a Peer-to-Peer review in the provider portal, go to the specified case. Expand Communication, expand Notes, click **ADD NOTE**, select which request the Peer-to-Peer is being requested, and then enter a note requesting a Peer-to-Peer review.   The not must include:

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

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

How to Request a Reconsideration

A Reconsideration request must be submitted to Kepro within 30 days of the initial denial for lack of information. To request a Reconsideration, go to the specified case. Expand Communication, expand Notes, click **ADD NOTE**, select which request the Reconsideration is being requested, and then enter a note requesting a Reconsideration. Additional supporting clinical documentation must be uploaded to the provider portal.

How to File an External Appeal

A member, member representative, attending physician, provider, or representative of the facility rendering services may request an appeal to request a formal review of an adverse determination.

Before an appeal can be submitted, the provider should request a Reconsideration and/or Peer-to-Peer (exhaust all efforts with Kepro before filing appeal).

An appeal may be requested by completing the "Request for External Appeal" form. When requesting an appeal, additional information should be provided for consideration during the appeal. All requests should be submitted to:

State and School Employees' Health Insurance Plan
Department of Finance and Administration, Office of Insurance
P.O. Box 24208
Jackson, MS 39225-4208

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.
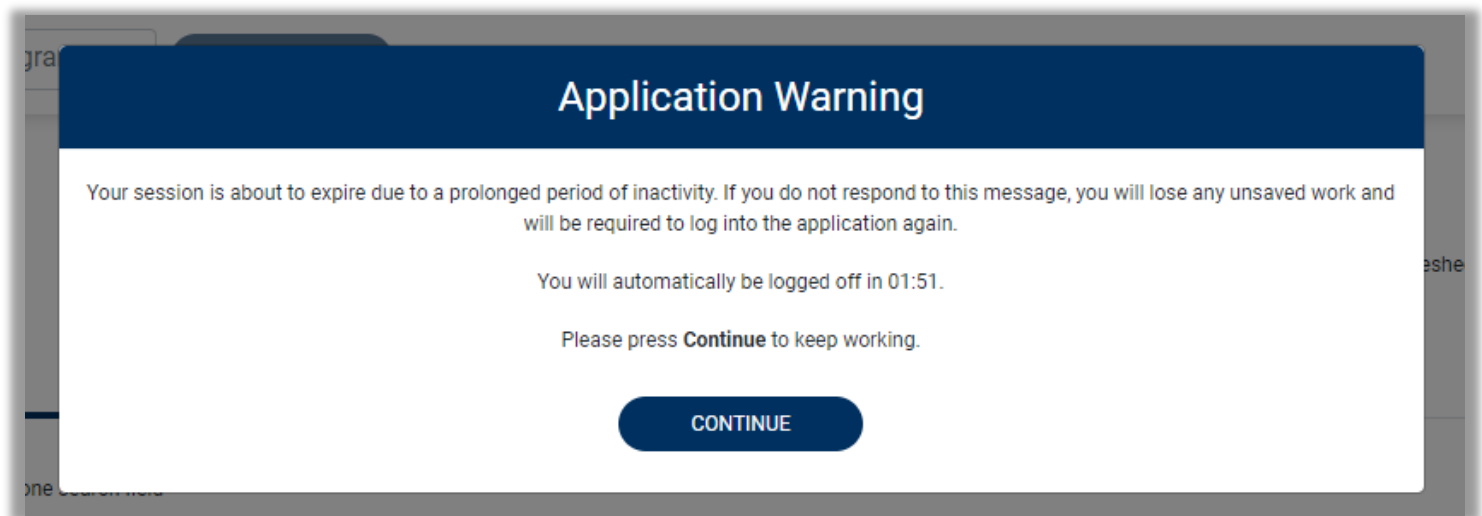

To continue working, select **CONTINUE**.

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.
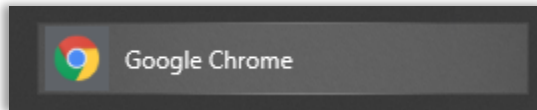
How to Add Google Chrome to Computer

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.
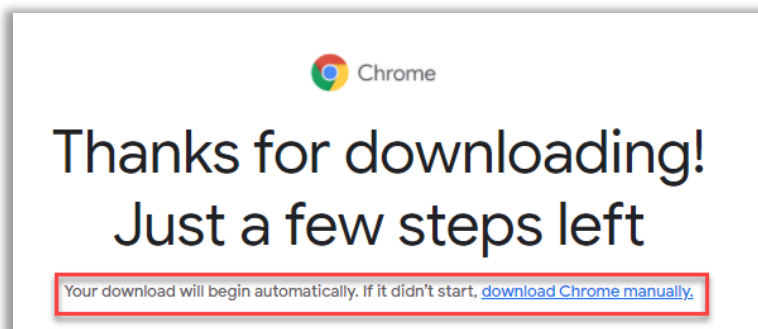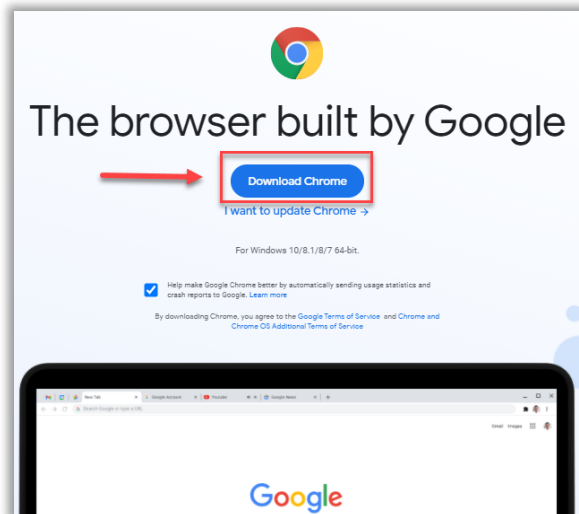
STEP 1

Open

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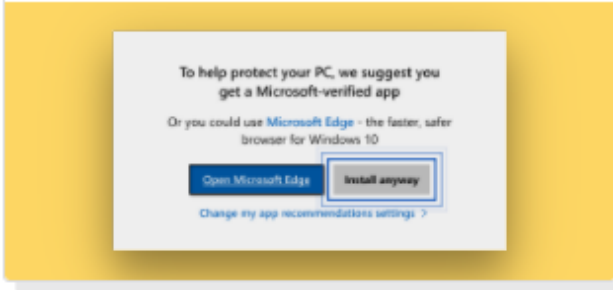
Can't find your installer?

ChromeSetup.exe ^

STEP 2

Allow

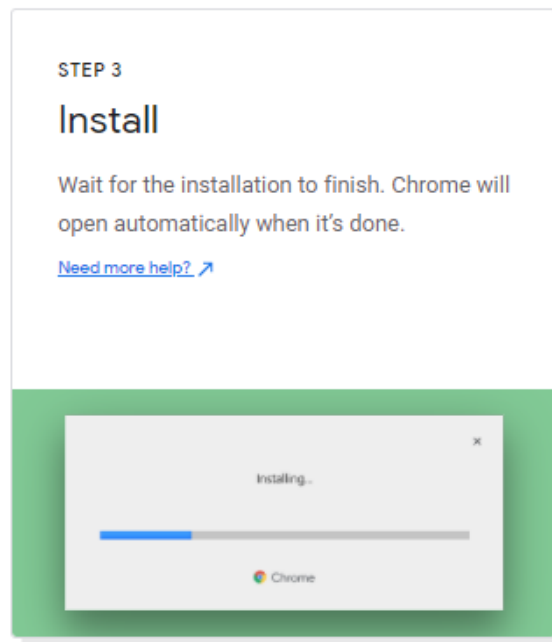If promped, click **"Install anyway"** and **"Yes"** on the system dialogs.

To help protect your PC, we suggest you get a Microsoft-verified app

Or you could use Microsoft Edge - the faster, safer browser for Windows 10

Open Microsoft Edge   Install anyway
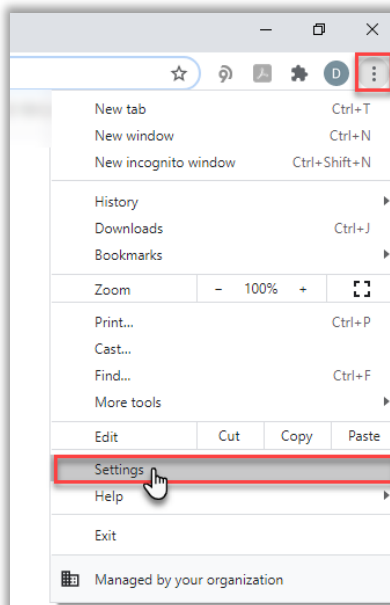
Change my app recommendations settings >

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.
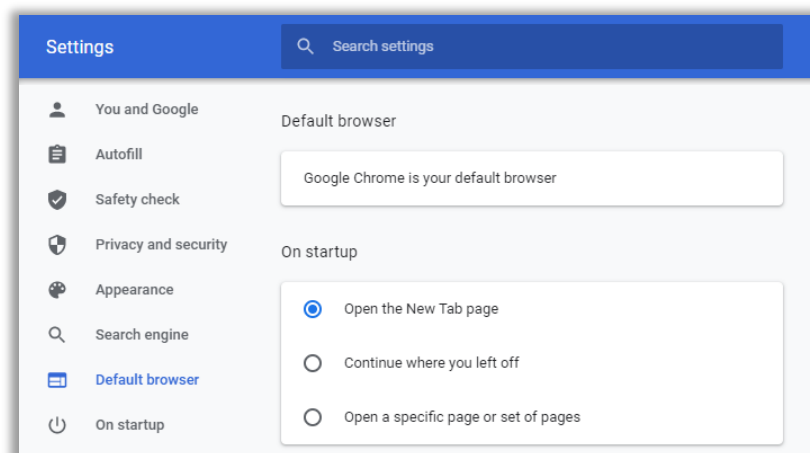
How to set Chrome as Default Browser

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.
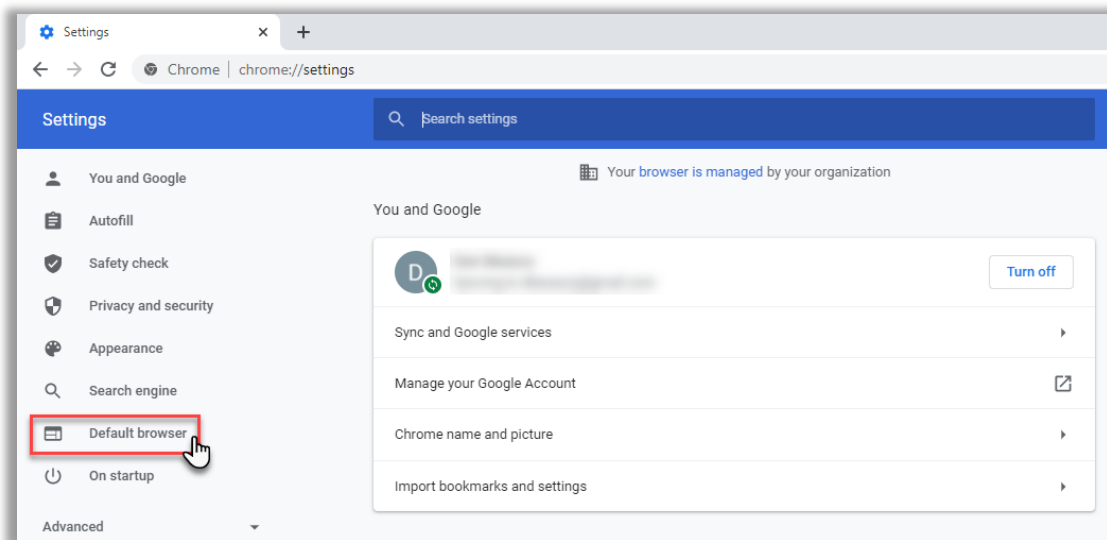
Select Make Default under Default browser.

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.
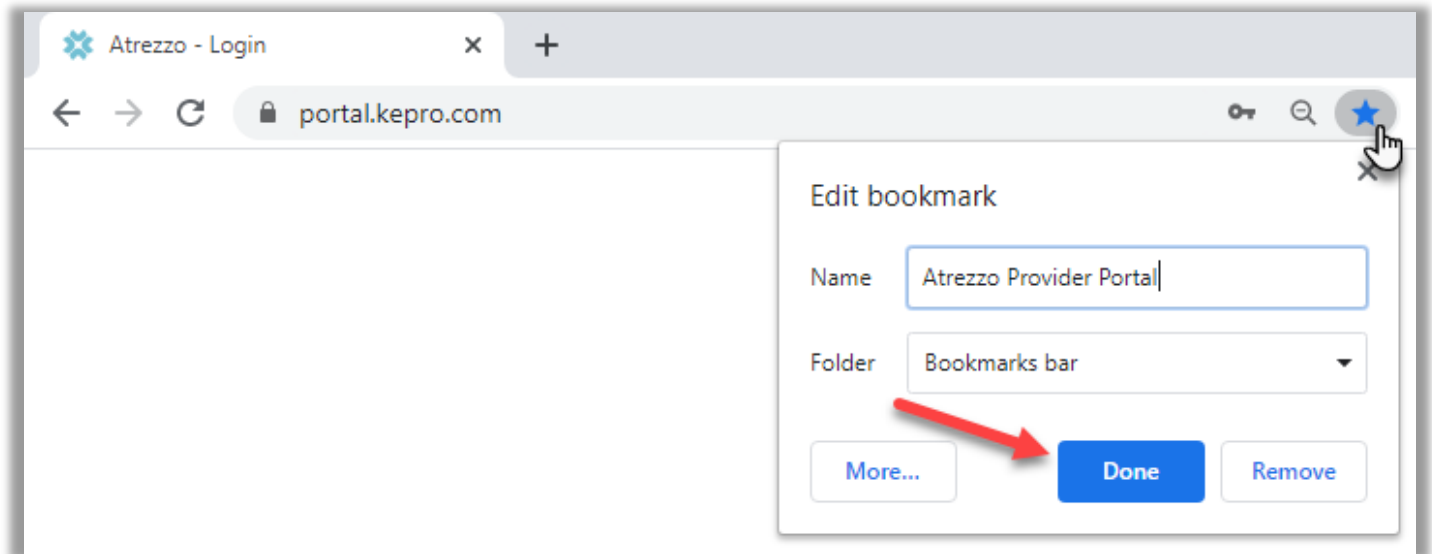
Update User Profile

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**.
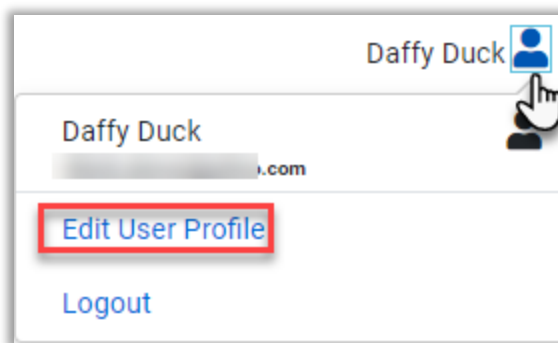
Once the profile screen displays, update information and include all required fields, then click **SAVE.**

How to Access Technical Assistance

For technical assistance, please contact the **Mississippi Customer Support at Center at 888.801.1910 or via email** MSUM@kepro.com**.**