

## Atrezzo Connect DMAS Provider Portal End User Guide

Version 5

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## Section 1: Register an Account, Login, & Basic Navigation

KEPRO Atrezzo	WELCOME PLEASE LOGIN 8/28/2013 11:33:36 AM	Login
	LOGIN Please enter your username and password to access the Atrezzo Provider Portal. If you don't already have a KePRO account. you can Register here. USERNAME: PASSWORD: Username: Password? Forgot Password?	
Privacy Policy   Terms of Use   How to Use this S	Site   Powered by KePRO   Copyright © 2011 KePortal   All Rights Reserved   Version 1.7.3.7549 (Atrezzo	_Hotfix)

## **Register an Account & Login (New Users)**

Click the <b>Atrezzo</b> button located on the website.	KEPRO Atrezzo
The user is brought to the <b>Login page</b> .	<image/> <image/> <image/> <image/> <image/> <image/> <image/> <image/>
Click the <b>Register Here</b> link to begin the account set up process.	LOGIN Please enter your username and password to access the Atrezzo Provider Portal. If you don't already have a KePRO account, you can Register USERNAME: PASSWORD: Login Forgot Password?
Enter your organization's <b>NPI</b> and 1099 numbers. (1099 = YTD amount on most recent remittance advice or last remit date. If using the	ORGANIZATION INFORMATION Please Enter Your NPI: Provider Registration Code: Next
date, use the format MM/DD/YYYY) Click <b>Next</b> .	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.
	Click the Atrezzo button located on the website. The user is brought to the Login page. Click the Register Here link to begin the account set up process. Enter your organization's NPI and 1099 numbers. (1099 = YTD amount on most recent remittance advice or last remit date. If using the date, use the format MM/DD/YYYY) Click Next.

## Register an Account & Login (New Users), Continued

Step 4.1	If you enter the NPI or 1099 number incorrectly, an error message displays. Re-enter the NPI or 1099 number(s) and click Next. Note: If you need to exit, click your browser's back button.	This NPI could not be registered at this time.         ORGANIZATION INFORMATION         Please Enter Your NPI:       1111111111         You must enter the Last Remit Date or the Current       06242011         YTD Total 1099 amount:       NEXT
Step 5	If your organization has multiple locations, select the appropriate one or ones. (Select all that are applicable.)	CREATE A NEW ACCOUNT - SPECIFY YOUR LOCATIONS
Step 6	Enter a <b>user name</b> , select and confirm a <b>password</b> (minimum of 8 alpha/numeric characters). Enter a <b>secret question</b> and <b>secret answer</b> .	ORGANIZATION INFORMATION         ACCOUNT INFORMATION         Username
	Complete the <b>Contact</b> Information.	Enter a secret question: * Enter the secret answer: *
	<b>Note:</b> Fields that have an asterisk (*) by them are required fields.	CONTACT INFORMATION         First Name: *       Email Address: *         Last Name: *       Confirm Email:
	Click <b>Next</b> .	Address: Phone Number:   City: Official communication of service authorization will be sent to the fax number entered here unless otherwise specified.   Zip: Fax Number: *   * denotes required field

## Register an Account & Login (New Users), Continued

Step 7	When prompted during the registration process, enter in a secret question and answer and click <b>Update Security Question</b> .	HOME ' REQUESTS ' SEARCH ' MANAGEMENT ' REPORTS ' PROVIDER REPORTS ' MY ACCOUNT ' HEE CHANGE SECURITY QUESTION AND ANSWER Enter a secret question: Enter the secret answer:
Step 8	Review the <b>Terms of Use</b> <b>Agreement.</b> Click the <b>checkbox</b> that states <i>"I have read and</i> <i>agree to these terms of use."</i> Click <b>Continue</b> .	<image/> <image/> <text><text><section-header><section-header><text><text><text><text></text></text></text></text></section-header></section-header></text></text>
Step 9	If you complete steps 1 through 6 successfully, the <b>Homepage</b> appears.	IN THE INDERING IN THE INDERING INTERIOR IN THE INDERING INTERIOR IN THE INDERING INTERIOR INTERIORI INTERIORIN
	END ACCOUNT RE	GISTRATION AND LOGIN PROCESS FOR NEW USERS

Account Registration, Login, & Navigation

Atrezzo Provider Portal

#### Resetting a Password Step Click the Forgot Password LOGIN link on the Login page. 1 Please enter your username and password to access the Atrezzo Provider Portal. If you don't already have a KePRO account, you can Register here . USERNAME: **PASSWORD:** Login Forgot Passwo Enter your Username.\* Step **CHANGE PASSWORD** 2 \*Please contact Customer You must supply your username and answer your security question to reset your password. New passwords are required to be a minimum of 8 characters in length. Service if you cannot remember your Username. Enter Your Username: Click Next. Step Enter the answer to the CHANGE PASSWORD 3 secret question you set during the initial registration. You must supply your username and answer your security question to reset your password. New passwords are required to be a minimum of 8 characters in length. Enter in (and confirm) a new Enter Your Username: feltco password.\* Dog \*New passwords are Answer: Bailey required to me a minimum of Enter New Password: ...... 8 characters in length. Confirm Password: ...... Click Finish. You will be brought back to the Login page to enter your username and new password.

**KEPRO** Proprietary and Confidential



Request Tab	ME REQUESTS SEARCH View Request Create New Request Message Center Vou have 0 unr	MANAGEMENT / MT MESSAGES read messages - Go to Message Center / REPORTS / PROVIDER REPORTS	ACCOUNT ! HEL My account ! Help
Click View Requests to go to the View Requests search screen	ME REQUESTS SEARCH View Request Message Center You have 0 unr Case or Reference ID:	MANAGEMENT M MESSAGES ead messages - Go to Message Center REPORTS PROVIDER REPORTS	Y ACCOUNT . HEL
Click View Requests to go to the View Requests search screen	Case or Reference ID:	REPORTS PROVIDER REPORTS	MY ACCOUNT HELP
(see Search Tab section for more information)	Case Authorization Number:		Search
Click Create New Request to begin the process of creating a request (See Section 2: Prior Authorization Requests and Questionnaires for full details)	HOME REQUESTS SEARCH View Requests Create New Request Message Center N Search fo Member ID: Member Last Member Birth	MANAGEMENT MY . 1EMBER SEARCH r a member using the criteria below. or Name: idate: Search	ACCOUNT HELP

## **Messaging (Requests Tab)**

Click Mressage Center to go to the Message Center       INTERCE INTERCENTER       INTERCENTER         Wessages are marked as read if any user for the provider reads it or automatically after 30 days.         Notes: The Message Center may also be accessed from the Home Page. Once you access a message, it no longer displays in the Message Center.         Click on the message you want to read. The message displays.       HOME       REQUESTS       SEARCH       MANAGEMENT       MY Account         Messages for REPLY to the message, type the reply in the space provided (2) and click the Reply button (3).       It is Results       To stephen Feither Form Steve Feither Subject: Re: Lab Results       To stephen Feither Form Steve Feither Subject: Re: Lab Results       To stephen Feither Form Steve Feither Subject: Re: Lab Results
Center to go to the Message Center       Message to KePPO       Message to KePPO         Twe       The Providen Research       The Providen Research         Vessages are marked as read if any user for the provider reads it or automatically after 30 days.       Notes: The Message Center may also be accessed from the Home Page. Once you access a message, it no longer displays in the Message Center.         Click on the message you want to read. The message displays.       HOME       REQUESTS       SEARCH       MANAGEMENT       MY Account         MESSAGES FOR CASE 1125       To: Stephen Fetther From: Step Fether Reply button (3).       To: Stephen Fether From: Step Fether Subject: Re: Lab Results       The Results       MY Account         Q       Subject: Re: Lab Results       The Results       To: Stephen Fether From: Step Fether From: Step Fether From: Step Fether From: Stephen Fether From: Step Fether Reply button (3).       Subject: Re: Lab Results       The Results
The Miessage Center       The message PE: First message to KePRO       To message (splays)       From bate Seat (splays)       Date Seat (splays)         Click on the message you want to read. The message displays.       Notes: The Message Center may also be accessed from the Home Page. Once you access a message, it no longer displays in the Message Center.         Click on the message you want to read. The message displays.       Notes: The Message Center may also be accessed from the Home Page. Once you access a message, it no longer displays in the Message Center.         To REPLY to the message, type the reply in the space provided (2) and click the Reply button (3).       To the message that besute       To stephen Feither set at \$222011 17:160 Subject: Te: Lab Results
Center       Interview of the control of the control of the provider reads it or automatically after 30 days.         Notes: The Message Center may also be accessed from the Home Page. Once you access a message, it no longer displays in the Message Center.         Click on the message you want to read. The message displays.       HOME       REQUESTS       SEARCH       MANAGEMENT       MY ACCOUNT         MESSAGES FOR CASE 1125       To: Stephen Feiture From: Steve Feiture Sent At: 8/22/011 17:1500       State the labs as soon as possible to ensure this request is finalized today.       Image: Context of the labs as soon as possible to ensure this request is finalized today.         (2) and click the Reply button (3).       Results       Image: Center is finalized today.       Image: Center is finalized today.
*Messages are marked as read if any user for the provider reads it or automatically after 30 days.         Notes: The Message Center may also be accessed from the Home Page. Once you access a message, it no longer displays in the Message Center.         Click on the message you want to read. The message displays.       HOME       REQUESTS       SEARCH       MANAGEMENT       MY Account         MESSAGES FOR CASE       1125         To REPLY to the message, type the reply in the space provided (2) and click the Reply button (3).       To is to be an use this request is finalized today. (1)
Discrete as read in any user for the provider reads it of addinatically after so days.       Notes: The Message Center may also be accessed from the Home Page. Once you access a message, it no longer displays in the Message Center.       Click on the message you want to read. The message displays.     Note REQUESTS     SEARCH     MANAGEMENT     MY Account       To REPLY to the message, type the reply in the space provided (2) and click the Reply button (3).     To: Stephen Feitner Forward the labs as soon as possible to ensure this request is finalized today.     1
Notes: The Message Center may also be accessed from the Home Page. Once you access a message, it no longer displays in the Message Center.         Click on the message you want to read. The message displays.       Image: Mome image: Message Center image: Message Center image: Message Center image: Message For Case image: Message For Case image: Comparison of Center image: Comparison of Center image: Center im
Once you access a message, it no longer displays in the Message Center.         Click on the message you want to read. The message displays.         To REPLY to the message, type the reply in the space provided (2) and click the Reply button (3).         Provide the space provided (2) and click the Reply button (3).       The space forward the labs as soon as possible to ensure this request is finalized today.
Click on the message you want to read.       HOME       REQUESTS       SEARCH       MANAGEMENT       MY ACCOUNT         The message displays.       To: Stephen Feltner From: Steve Feltner Steve Feltn
message you want to read.       HOME       REQUESTS       SEARCH       MANAGEMENT       MY ACCOUNT         The message displays.       MESSAGES FOR CASE 1125       To: Stephen Feltner       State From: Steve Feltner       State From: Steve Feltner         To REPLY to the message, type the reply in the space provided (2) and click the Reply button (3).       To: Stephen Feltner       State Steve Feltner         Subject:       Re: Lab Results       Thank you - please forward the labs as soon as possible to ensure this request is finalized today.       1
want to read. The message displays. To REPLY to the message, type the reply in the space provided (2) and click the Reply button (3). MESSAGES FOR CASE 1125 To: Stephen Fether From: Steve Feltner Sent At: 8/22/2011 17:16:00 Subject: Re: Lab Results Thank you - please forward the labs as soon as possible to ensure this request is finalized today. (2) Comparison of the second se
The message displays.       MESSAGES FOR CASE 1125         To REPLY to the message, type the reply in the space provided (2) and click the Reply button (3).       To: Stephen Feltner From: Steve Feltner Sent At: 8/22/2011 17:16:00 Subject: Re: Lab Results         Thank you - please forward the labs as soon as possible to ensure this request is finalized today.       1
displays. To: Stephen Feltner From: Steve Feltner Sent At: 8/22/2011 17:16:00 Subject: Re: Lab Results Thank you - please forward the labs as soon as possible to ensure this request is finalized today. (2) and click the Reply button (3).
To REPLY to the message, type the reply in the space provided (2) and click the Reply button (3).
To REPLY to the message, type the reply in the space provided (2) and click the Reply button (3).
message, type the reply in the space provided (2) and click the Reply button (3).
the reply in the space provided (2) and click the Reply button (3).
space provided (2) and click the Reply button (3).
(2) and click the Reply button (3).
Reply button (3).
Reply 3
l ype in the
Subject and MESSAGES FOR CASE 11259
message body in
To: Stephen Feltner
click Penly to Sent At: 8/22/2011 17:16:00
send the Subject: updates of case
message to
KEPRO
Subject: Additional Clinical Information
We will be sending the lab results to attach to this case later today when received.
Replyn
(m)

## Messaging (Requests Tab), Continued

The message has been sent and is now a part of the request record.		To: Steve Feitner From: Stephen Feitner Sent At: 9/15/2011 09:39:49 Subject: updates of case We will be sending the lab results to a Subject: updates of case	ttach to this case later today w	hen received				
	Case ID (Reference ID)	Member Info	Status	Request Info	Service Type	Service Date(s)	Providers	
To SEND a message to KEPRO about a submitted case	130920678 (N/A) [Procedures] [Diagnosis]	0 18 DOB: 12	Submitted Approved: 0 Denied: 2 Pending: 0 Void: 0	Outpatient Letters: 0 Messages: 0	089 - Private Duty Nursing	5/14/2013 - 5/13/2014	[Servicing]	[Select] [Extend] [Copy]
find the case by clicking either Requests or	130921396 (N/A) [Procedures] [Diagnosis]	SR DOB: 03	Submitted Approved: 2 Denied: 0 Pending: 0 Void: 0	Outpatient Letters: 0 Messages: 0	089 - Private Duty Nursing	4/11/2013 - 4/10/2014	[Servicing]	[Select] [Extend] [Copy]
Search. Locate the case from the search results	130981639 (N/A) [Procedures] [Diagnosis]	37 I DOB: 112	Submitted Approved: 2 Denied: 0 Pending: 0 Void: 0	Outpatient Letters: 0 Messages: 0	089 - Private Duty Nursing	4/10/2013 - 5/24/2013	[Servicing]	[Select] [Extend] [Copy]
Click Select to bring up the Request Overview			Service Date(s) 12/28/2012 10/8/2012 10/27/2012 12/27/2012 8/6/2012 - 12/25/2012 10/1/2012 12/31/2012	Servic Provid 1 - (Info 1 - (Info 2 (Info 2 (Info	ing ler[Select] [Extend]o)[Select] [Extend]o)[Select] [Extend]o)[Select] [Extend]			
Scroll down to the Messages and Attachments section of the overview and click the Send New Message link.		MESSAGES View Messages (1) Send New Message LETTERS No Letters exist for DOCUMENTS No Documents exis QUESTIONNAIR No Questionnaires	MESSAG this request at for this request ES exist for this request	ES AND ATTA	CHMENTS			



## Search Tab, Continued

displays	Case ID (Reference ID)	Member Info	Status	Request Info	Service Type	Service Date(s)	Providers	
the requests matching	130920678 (N/A) [Procedures] [Diagnosis]	0- 18 DOB: 12	Submitted Approved: 0 Denied: 2 Pending: 0 Void: 0	Outpatient Letters: 0 Messages: 0	089 - Private Duty Nursing	5/14/2013 - 5/13/2014	[Servicing]	[Select] [Extend] [Copy]
your search criteria.	130921396 (N/A) [Procedures] [Diagnosis]	5.R DOB: 03	Submitted Approved: 2 Denied: 0 Pending: 0 Void: 0	Outpatient Letters: 0 Messages: 0	089 - Private Duty Nursing	4/11/2013 - 4/10/2014	[Servicing]	[Select] [Extend] [Copy]
	130981639 (N/A) [Procedures] [Diagnosis]	37 I DOB: 112	Submitted Approved: 2 Denied: 0 Pending: 0	Outpatient Letters: 0 Messages: 0	089 - Private Duty Nursing	4/10/2013 - 5/24/2013	[Servicing]	[Select] [Extend] [Copy]



#### **Management Tab, Continued**



#### **Management Tab, Continued**



## **Management Tab, Continued**



#### **Management Tab, Continued**

Enter the account information for the new user.	New passwords are required to be a minimum of 8 characters in langth. Lise the form below to change your account information. CONTACT INFORMATION User Name * minh
The new user is added to the user group.	HOME REQUESTS SEARCH MANAGEMENT MY ACCOUNT HELP USERS FOR DESTINY HOME CARE
Permission access can be set for the user (Group Admin, Admin, User).	Available Users from your Provider Group: Z242-MSAUNDERS 28242-YMARTIN Users that are associated with this provider: Users that are associated with this provider: Users that are associated with this provider: Stephen Feltner  Group Admin  User [remove] Jeffrey Jones  Group Admin  User [remove] John Smith  Group Admin  User [remove] John Smith  Group Admin  User [remove]
All Changes when finished.	
This message window appears when you delete a provider from the group.	Select a Provider to manage its pr         Message from webpage         Name         SOUTHWESTERN VA MTLHLTH         INST         Register New NPI             OK    Cancel

	Setting User Preferences (Management Tab)
From the Manage Providers and eferences ropdown, select eferences	HOME     REQUESTS     SEARCH     MANAGEMENT     MY ACCOUNT     HELP       MANAC     Manage Providers and Preferences Manage Users Register New Provider     UP     UP       Select a Provider to manage its preferences:     Image Users     Image Users     Image Users       Select a Provider to manage its preferences:     Image Users     Image Users     Image Users       Good Hospital     077 - Psych Residential Inpatient     101 Main St. Anytown, VA     Users Preferences Remove
Click Servicing Providers Facilities to set preferred (favorites) list.	PREFERENCES AND SETTINGS FOR TEST HOSPITAL         Servicing Providers/Facilities       PCP/Facility         Attending Physicians       Procedure Codes         Diagnosis Codes         Provider       Provider         Provider       Provider         Provider Name       Provider Speciality         Find       Find
Click CP/Facility to set preferred (favorites) list.	Servicing Providers/Facilities     PCP/Facility     Attending Physicians     Procedure Codes     Diagnosis Codes       Provider ID     PREFERRED OUTPATIENT ALT SERVICING PROVIDERS       Provider Name     Provider Specialty     Find
Click Attending Physicians to set preferred (favorites) list.	Servicing Providers/Facilities     PCP/Facility     Attending Physicians     Procedure Codes     Diagnosis Codes       Provider ID     Image: Code state sta
Click Procedure Codes to set preferred (favorites) list.	Servicing Providers/Facilities     PCP/Facility     Attending Physicians     Procedure Codes     Diagnosis Codes       Code Type     CPT •     Code Starts With     Code Starts With     Description     Find
Click Diagnosis Codes to set preferred (favorites) list.	Servicing Providers/Facilities     PCP/Facility     Attending Physicians     Procedure Codes     Diagnosis Codes       Code Starts With

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## **Steps for Setting User Preferences (Management Tab)**

Step 1	Search for <b>Provider</b> by ID, Name, or Specialty (1). Once you find the provider to add to your preferred (favorites) list, click <b>Select</b> from the search results (2).	Servicing Providers/Facilities       PCP/Facility       Attending Physicians       Procedure Codes       Diagnosis Codes         Provider ID
		Note: The system returns a list sorted alphabetically by first name, to a maximum of 50. Enter additional criteria to further limit the search.
Step 2	Provider is added to the preferred list. Click <b>Remove</b> to take off of the list. This process works the same for <b>PCP</b> / <b>Facilities</b> , <b>Attending</b> <b>Physicians</b> , <b>Procedure</b> <b>Codes</b> , and <b>Diagnosis</b> <b>Codes</b> .	Imaximum of bot. Enter additional criteria to further limit the Search.         Imaximum of bot. Enter additional criteria to further limit the Search.         Imaximum of bot. Enter additional criteria to further limit the Search.         Imaximum of bot. Enter additional criteria to further limit the Search.         Imaximum of bot. Enter additional criteria to further limit the Search.         Imaximum of bot. Enter additional criteria to further limit the Search.         Imaximum of bot. Enter additional criteria to further limit the Search.         Imaximum of bot. Enter additional criteria to further limit the Search.         Imaximum of bot. Enter additional criteria to further limit the Search.         Imaximum of bot. Enter additional criteria to further limit the Search.         Imaximum of bot. Enter additional criteria to further limit to further

Account Reg	istration, Login, & Navigation	Atrezzo Provider	Portal
	Му	Account Tab	
My Account Tab	HOME REQUESTS	SEARCH MANAGEMENT	MY ACCOUNT HELP My Account Change Security Question
Use this tab to change your password or update your contact information.			
			Continued on next page

Account Registrati	n, Login, & Navigation Atrezzo Provider Portal
	<b>My Account Tab, Continued</b>
Use this tab to change your secret question	CHANGE SECURITY QUESTION AND ANSWER
and answer for resetting your password.	Enter a secret question: Enter the secret answer: Enter your password:
	Update Security Question





# Section 2: Requests & Questionnaires

### **Service Authorization Request (Inpatient)**

Step 1	Click the <b>New</b> <b>Request</b> button (located at the bottom of the home screen) <b>Or</b> Click <b>Create New</b> <b>Request</b> from the Requests tab.	HOME REQUESTS SEARCH MANAGEMENT HEALTH INTELLIGENCE CENTER MY ACCOUNT HELP View Requests Greate New Request Message Center You have 0 unread messages - Go to Message Center REQUESTS SAVED BUT NOT SUBMITTED New Request
Step 2	Search for member by: • Member ID Or • Last Name • Birthdate Click the Search button.	Member ID: or Member Last Name: Member Birthdate:
		Note: If there are two members with the same last name and DOB, the system does not display both choices (for HIPAA reasons). The operator needs to enter the Member ID.
Step 3	Select the Member from the search results by clicking on the	Member ID Case Name First Name Address Birthdate Case Count Actions 3 SMITH Records per page: 10 Records: 1 - 1 of 1 - Pages: Case Count Case Case Case Case Case Case Case Case
Step 4	Verify member information and click the <b>New</b> <b>Request</b> button. Select request type ( <b>Inpatient or</b> <b>Outpatient</b> ) Select Sub contract <b>DMAS</b> or <b>Expansion</b> based on the members eligibility Click <b>Create</b> <b>Request</b> .	NOME       REQUESTS       SEARCH       MANAGEMENT       MY ACCOUNT       HEP         REQUESTS       FOR       NSON       Service       NSON       Service       Service       Service       Contact:       Primary Phone: 434       Service       Service       Service       Providers       Service       Service       Providers       Service       Service       Providers       Service       Service       Providers       Service       Service<
KEPRO	Proprietary and Confi	dential Continued on next page 24

Step 5	Patient Detail information defaults. Click either the next section link or the Next button to continue through the Inpatient Service Request process.	HOME REQUESTS SEARCH MANAGEMENT HEALTH INTELLIGENCE CENTER MY ACCOUNT HELF INPATIENT SERVICES REQUEST PATIENT DETAIL Requesting Provider Attending Physician Service Detail Procedures Diagnoses Clinical Information Attached Documents @ Questionnaires Patient Detail Procedures Diagnoses Clinical Information Attached Documents @ Questionnaires
Step 6	Requesting Provider Information defaults. Note: Enter in the fax # where official communication about this Service Authorization should be sent. Click either the next section link or the Next button to continue through the Inpatient Service Request process.	NDME       AEQUESTS       SEARCH       MY ACCOUNT       HEP         Important Detail       Important Detail       Requesting Provider       Requesting Provider       Requesting Provider       Requesting Provider To       Important Detail       Name       0000 H058%L         Provider To       Important Detail       Requesting Provider To       Important Detail       Name       0000 H058%L         Provider To       Important Detail       Name       0000 H058%L       Name       Name <td< th=""></td<>



### Service Authorization Request (Inpatient), Continued

Step 7.1	Select the facility from the <b>search</b> results.	HOME REQUESTS SEARCH MY ACCOUNT HELP Facility Search × Facility ID
	Note: Hovering the cursor over the Info column will display a bubble with more detailed Facility information that can be reviewed before selecting.	Facility Name       Image         The Tarket Wing Speciality       The Mathematical Select Entre         The Tarket Wing Speciality       The Mathematical Select Entre         The Tarket Wing Speciality       The Mathematical Select Entre         The Tarket Wing Speciality       The Speciality         Facility Speciality       User Good         Facility Speciality       User Good         Facility Speciality       User Good         Name       Very Good Hospital         Very Good Hospital       Provider Type         Out of State Hospital       Name         Very Good Hospital       Provider Type         Very Good Hospital       Phone         Reserver       Anytown         Total Reserver       Total Reserver         Were Good Hospital       Phone         Reserver       Total Reserver         Reserver       Total Reserver         Reserver       Total Reserver         Reserver       Total Reserver
		Note: The system returns a list sorted alphabetically by first name, to a maximum of 50. Enter additional criteria to further limit the search.
Step 7.2	Facility information populates the fields from the search selection.	FACILITY         Use the search below to change the selected Facility.         Name       Verv Good Hosoital         Facility ID       11111111         Location       TAMPA FL 33614-0000

Step 8	Select the appropriate <b>service detail</b> using the corresponding drop down menus and fields. Click <b>Next</b> to continue.	INPATIENT SERVICES REQUEST
Step 9	If your contract requires you to identify a specific procedure, click Find to select a <b>Procedure Code</b> . If you created a list of Procedure codes using the Preference function, click Show Preferred to bring up the list.	INPATIENT SERVICES REQUEST  Patient Detail Requesting Provider Facility Attending Physician Service Detail Procedures Diagnoses Clinical Information Attached Documents Questionnaires  Previous Ret
	Enter the code or the description. Select the code from the list that displays.	HDML       ALGUESTS       SLAKEH       MY ACCOUNT       HEEP         Procedure Search *

Step Continue adding												
0.1		1	NPA	LIENT	SER	VICES	REQ	UEST				
9.1	codes, as needed. If a code needs to be deleted, click Remove.	<ul> <li>Patient Detail</li> <li>Requesting Provider</li> <li>Facility</li> <li>Attending Physician Service Detail</li> <li>Procedures</li> <li>Diagnoses</li> <li>Clinical Information</li> <li>Attached Documents</li> <li>Questionnaires</li> </ul>		Use the 335: Dat 1 MC 335: Dat 1 MC	search be 10 - CABG e: * DD(5): -MO 17 - CABG e: * Rate: DD(5): -MO 0D(5): -MO	PROCEE low to add VEIN SING DD- V ARTERY-VE	Find	E [ren	nove]			
Step 9.2	Select the requested date of the procedure by clicking the appropriate date	Use the search 33510 - 0	h bel	PRO ow to a	add p	URES rocedu	res to	this r	request	t		
	on the <b>dropdown</b>	Rate	0	0 Contombor 2012				2	0			
	calendar.	MODIS	- Sep		prei	ptember 201		13 •				
	After completing		Su	Мо	Tu	We	Th	Fr	Sa			
	After completing	33517 - 1	1	2	3	4	5	6	7			
	Next to continue	Date: *	8	9	10	11	12	13	14			
		Rate	15	16	17	18	19	20	21			
		MOD(S	22	23	24	25	26	27	28			
			29	30								
						Find		Sho	w Prefe	erred		
				denot	es requ	ired fie	Id					

#### Service Authorization Request (Inpatient), Continued



#### Service Authorization Request (Inpatient), Continued

Step	Enter any clinical	INPATIENT SERVICES REQUEST				
11	<b>notes</b> in the text field.	MULTICUT SERVICES REQUEST				
	Click <b>Next</b> to continue.	<ul> <li>Patient Detail</li> <li>Requesting Provider Information</li> <li>Facility <ul> <li>Attending Physician (Optional)</li> <li>Service Detail</li> <li>Procedure Codes (CPT)</li> <li>Diagnosis Codes (ICD 9)</li> <li>Clinical Information</li> <li>Attachments (Documents)</li> <li>Questionnaires</li> </ul> </li> <li>Previous Next</li> </ul>				
Step 12	Attach clinical documentation by clicking the browse button.	INPATIENT SERVICES REQUEST  Patient Detail Requesting Provider Facility Attending Physician Service Detail Procedures Diagnoses Clinical Information Attached Documents Questionnaires  Previous Next				
Step 12.1	<b>Browse and find</b> the file and click Open to attach. Once attached, click <b>Attach File</b> .	Attach File				

Step 12.2	File name appears when it is successfully uploaded. To remove the file, click the <b>Remove</b> link.	ATTACHED DOCUMENTS Browse Attach Attached: c\users\sfeltner\documents\sample clinical notes.docx Remove
Step	Questionnaires*	INPATIENT SERVICES REQUEST
13	to all services)	
	*Soo tho	Patient Detail Requesting Provider Information Reading
	Questionnaires	Attending Physician (Optional) U Service Detail Proceedure Codes (CPD
	section in this manual for more	Diagnosis Codes (CT) 9 Clinical Information Attachments (Documents)
	detailed information	Questionnaires
	monnation	
Step 14	VERY IMPORTANT!	I understand that precertification does not guarantee payment I understand that precertification only identifies medical necessity and does not identify herefits
	Click the	Save for late Cancel Submit
	checkbox at the	
	and click either	arantee payment I understand that p
	Save for Later or Submit.	Please, select check box
	You cannot	or later Cancel Submi
	proceed if you do	
	checkbox.	
Step 14.1	It any required portion of the	TUEINECAUAU IICUAEC
	request is missing, these alerts	Missing Information: Diagnosis Code(s) Missing Information: Service Type Missing Information: Facility
	appear.	Missing Information: Length of Stay - Start Date Missing Information: Length of Stay - End Date
		Missing Information: Admit Date

## Service Authorization Request (Inpatient), Continued

Step	Once a request is	HOMA ANDUATES. SPANON MEACOUNT ATTA-
15	successfully	REQUEST OVERVIEW
	submitted, a	CASE INFORMATION
	Request	Case The Case Schwitz Date: SRV Auto: Beforenze Th
	Overview is	122420001 M/M/002111127194 N/A N/A Member ID: Member Name: Gender: 008
	displayed.	M 9/15/1995 Service Type: Admission Seame FIPS Code:
		0400 - Experient Admission - Onclive Request Type: Instake Method: Discharge Dispositions: Percenter
		REQUERT
		Pacifilitys 340:741-1200
		Attending Physician:
		Diagnosts codes Primary Code Description 421.0 Heart codast unterio:
		PROCEDURES
		LCD Longthen All Stay Restaurces State Adminit Outer W100163 Requested Certified Proceedure Dates W100163 N/A Meet http:// Rate: 10/A End Dates W100163 N/A
		MESSAGES AND ATTACHMENTS MESSAGES Vanis Mercages (B) Tand there Mercages
		LETTERS No Latters and far the request
		ATTACHED DOCUMENTS Rec Descriments and the this request
		Altain New Document (2 Mill size limit)
		Address Statistical Resources
		QUESTIONNAIRES Re-Questionnaires and for this required
		QUENTIONNAIREN Des Questionisations and for this import
		CLANECAL INFORMATION

## **Service Authorization Request (Inpatient) Summary**

Step 1	•	Click the <b>New Request</b> button (located at the bottom of the home screen).
Step 2	•	Search for member by: – Member ID OR – Last Name – Date of Birth Click the Search button.
Step 3	•	Select the Member from the search results by clicking on the Select link.
Step 4	•	Verify member information and click the <b>New Request</b> button. Select request type ( <b>Inpatient or Outpatient</b> ) and click <b>Create Request</b> .
Step 5	•	Enter <b>Patient Detail</b> . Click either the <b>next section link</b> or the <b>Next</b> button to continue through the <b>Inpatient Service</b> <b>Request</b> process.
Step 6	• •	Enter <b>Requesting Provider Information</b> . (Automatically defaults to how you are logged in.) If necessary, add the fax number. Click <b>Next</b> to continue.
Step 7	• • •	Enter <b>Facility information</b> . To search for facility information, click Find to bring up the search screen. Type in the NPI number, keyword, or Specialty in the appropriate search field and click <b>Find</b> . Select the facility from the <b>search results</b> . Facility information will populate the fields from the search selection.
Step 8	•	Select the appropriate <b>service detail</b> using the corresponding drop down menus and fields. Click <b>Next</b> to continue.
Step 9 optional	•	Add <b>CPT Code</b> by clicking the <b>Find</b> button to bring up the search screen, or click <b>Show Preferred</b> to bring up a list of previously-identified preferred procedure codes. <b>Select the requested date</b> of the procedure by clicking the appropriate date on the <b>dropdown calendar</b> . Complete remaining information. Repeat process to add additional codes. Click <b>Next</b> to continue.
Step 10	•	At least one diagnosis code must be attached to the case. If there are more than one, one must be selected as the primary. To add a new code, click the <b>Find</b> button to bring up the search screen, or click <b>Show Preferred</b> to bring up a list of previously-identified preferred diagnosis codes Enter the code or description and select from the search results. Click <b>Next</b> to continue.
Step 11	•	Enter any <b>clinical notes</b> in the text field. Click <b>Next</b> to continue.
Step 12	•	Attach clinical documentation by clicking the <b>browse</b> button. Browse and find the file and click Open to attach. Once attached, click Submit.
Step 13	•	Questionnaires (if applicable)

Prior	Authorization	Red	uest
	/ WILLIAM MEDICION		4000

Step 14	•	Click the <b>checkbox</b> at the bottom of the page and click either <b>Save for Later</b> or <b>Submit</b> .
Step 15	•	A Request Overview is displayed.

#### END INPATIENT PROCESS FLOW

#### **Service Authorization Request (Outpatient)**

Sten		
1	have located	OUTPATIENT SERVICES REQUEST
	and brought	
	up a member	Patient Detail PATIENT DETAIL
	(see stens 1-	Requesting Provider Name LOPEZ
	(See Steps 1=	Service Provider DOB
	Innationt	Attending Physician Service Detail
	npatient	Procedures PLICKIN EL 33570
	Patient	Diagnoses
	Dotail	Clinical Information
	information	Attached Documents
	dofaulto	Questionnaires
	uerauns.	
	Click <b>Next</b> to	Next
	continue.	
Step	Requesting	
2	Provider	OUTPATIENT SERVICES REQUEST
	Information	
	data defaults.	Patient Detail REQUESTING PROVIDER
		Requesting Provider Name NORTH TAMPA IMAGING LLC Provider ID 1205832631
	Note: Enter	Attending Physician Provider Type 247 - FACILITY
	in the fav #	Service Detail Address 14302 BRUCE B DOWNS BLVD
	whore official	Procedures TAMPA FL 33613-2601
		Diagnoses Clinical Information Phone 813-975-1111
	on about this	Attached Documents
	Somioo	Questionnaires     Official communication of service authorization will     be sent to the fax number entered here unless
	Service	otherwise specified.
	Authorization	Fax *
	should be	t denote conviced field
	sent.	- uenous requireu neu
		Previous Next
	Click <b>Next</b> to	
	continue.	
Step	Service	
3	Provider	OUTPATIENT SERVICES REQUEST
	Information	Patient Detail SERVICE PROVIDER
	defaults. If	Use the search below to change the selected Service     Provider
	the Service	Service Provider Attending Physician Name GOOD MEDICAL SUPPLY INC
	Provider is	Service Detail Provider ID 1111111111 Version WASHINGTON DC 20001-3212
	different from	Procedures Diagnoses
	the	Clinical Information Find Show Preferred
	Requesting	Attached Documents
	Provider,	
	click Find to	
	bring up the	Previous Next
	search	
	screen.	I understand that precertification does not guarantee payment. I understand that precertification only identifies medical necessity and does not identify benefits.
		Save Save for later Cancel Request Submit
1	1	

#### **Continued on next**

## Service Authorization Request (Outpatient), Continued

Step 3.1	Enter Provider ID, Name or Specialty. Click <b>Find</b> .	OUTPATIENT SERVICES REQUEST         SERVICE PROVIDER         Requesting Provider         Bender Browlder         Browler ID         Provider ID         Provider Name         Facility Speciality diric         Provider * Facility • All
Step 3.2	Select the facility from the <b>search results</b> .	HOME     REQUESTS     SEARCH     MY ACCOUNT     HELP       Facility Search     X       Facility ID     Facility Name     Very Good       Facility Specialty     Find       Hover over the "Info" link to see more details.       Name     NP2       Very GOOH (055774)     1111111       OSI - Out-of-State Hospital     Select       Very GOO HOSPTAL EMEDICAL     1111111       OSI - Out-of-State Hospital     Select       Very GOO     HOSPTAL AMEDICAL     1111111       OSI - Out-of-State Hospital     Select       Very GOO HOSPTAL AMEDICAL     1111111       OSI - Out-of-State Hospital     Select       CENTER.     DOSITIAL AM MEDICAL     11111112
	Note: Hovering the cursor over the Info column will display a bubble with more detailed Facility information that can be reviewed before selecting.	Facility Search ×         Facility Specialty         Facility Specialty         Hover over the "info" link to see m         Name         Very Good Hospital         Provider Type       Out of State Hospital         Provider Specialty         Network         Phone       800-555-1212         Address         City       101 Main St         City       Anytown         State       Va         Memory Health       Three
		Note: The system returns a list sorted alphabetically by first name, to a maximum of 50. Enter additional criteria to further limit the search.
Step 3.3	Facility information populates the fields from the search selection.	SERVICE PROVIDER         Use the search below to change the selected Facility.         Name       Very Good Hospital         Provider II       1111111

**Continued on next** 

Step 4	Complete the drop down fields for Service Detail.	OUTPATIENT SERVICES REQUEST
	Note: The Attending Physician section is optional.	<ul> <li>Patient Detail</li> <li>Requesting Provider Information</li> <li>Service Provider</li> <li>Attending Physician (Optional)</li> <li>Service Detail</li> <li>Procedure Codes (CPT)</li> <li>Diagnosis Codes (ICD 9)</li> <li>Clinical Information</li> <li>Attachments (Documents)</li> <li>Questionnaires</li> </ul> Previous Next
Step	Click <b>Find</b> to select a <b>Procedure Code</b> .	OUTPATIENT SERVICES REQUEST
5	If you created a list of Procedure codes using the Preference function, click <b>Show Preferred</b> to bring up the list.	<ul> <li>Patient Detail</li> <li>Requesting Provider</li> <li>Service Provider</li> <li>Attending Physician</li> <li>Service Detail</li> <li>Procedures</li> <li>Diagnoses</li> <li>Clinical Information</li> <li>Attached Documents</li> <li>Questionnaires</li> </ul>
	Enter the code or the description. Select the code from the list that displays.	HOME       HERDISSS       SEARCH       MY-ACCOUNT       HERD         Procedure Search       #         Code Starts with

Step 5.1	Enter the <b>Start</b> <b>Date</b> and <b>End</b> <b>Date</b> using the calendar dropdowns.	PROCEDURES         Use the search below to add procedures to this request         K0108 - W/C COMPONENT-ACCESSORY NOS [remove]         Date: *       To         Qty: *       September 2013         MOD(S)       Su Mo Tu We Th Fr Sa         1       2       3       4       5       6       7         8       9       10       11       12       13       14         15       16       17       18       19       20       21         22       23       24       25       26       27       28         29       30       Int       Next
Step 5.2	Enter the quantity. If appropriate, select the number of Units, Visits, etc. from the Frequency dropdown, the rate, and the model number (if applicable).	PROCEDURES         Use the search below to add procedures to this request         KO108 - W/C COMPONENT-ACCESSORY NOS         Date: * 06/17/2013       Image: [remove]         Date: * 06/17/2013       Image: [remove]         Qty: * 1       -Frequency-         Rate:       Model No.         MOD(S):       -MOD-         Bi-Weekly       Daily         Hourly       SEARCH         Quarterly       Units         Units       PT *         Co       Weekly         Date       PI *         Co       Weekly         Date       Find
Step 5.3	If appropriate, choose the modifier from the dropdown. A new field displays after you enter one. The maximum number of modifiers is 3.	PROCEDURES         Use the search below to add procedures to this request         KOIO8 - W/C COMPONENT-ACCESSORY NOS         Date: * 06/17/2013         Date: * 06/17/2013         Qty: * 1         - Frequency-         Rate:         MOD         MOD(S):       NU         MOD         S         AG         AG         AG         AG         AG         AG         AG         Code         HX         Descript         HX         MOD         MOD         S         Code         HX         Descript         HX         HX

Step 5.4	Repeat steps to add all the Procedure Codes for this request. <b>Note:</b> There is no limit to the number of codes that may be added to the case.	PROCEDURES         Use the search below to add procedures to this request         KO108 - W/C COMPONENT-ACCESSORY NOS [remove]         Date: * 6/17/2013       III       0       8/15/2013       III         Qty: * 1       -Frequency-        Rate:       Model No. 25362         MOD(S): NU        -MOD-        [remove]         K0195 - ELEVATING WHLCHAIR LEG RESTS [remove]         Date: * 6/17/2013       III       to       8/15/2013       III         Qty: *       -Frequency-        Rate:       Model No.       Model No.         MOD(S): -MOD-         Model No.       Model No.       Model No.
Step 6	Click <b>Find</b> to select a diagnosis code for this case. If you created a list of Diagnosis codes using the Preference function, click <b>Show Preferred</b> to bring up the list.	
	Enter the code or the description. Select the code from the list that displays.	Diagnosis Search × Code Starts with Description Cose Cose Cose Cose Cose Cose Cose Cose
		Notes: At least one diagnosis code must be attached to the case. If there is more than one, one must be selected as the primary.
		Continued on next page

### Service Authorization Request (Outpatient), Continued

Sten	Enter any clinical	
Step 7	Enter any <b>clinical</b> <b>notes</b> in the text field.	OUTPATIENT SERVICES REQUEST         Patient Detail         Requesting Provider Information         Service Provider         Attending Physician (Optional)         Service Detail         Procedure Codes (CPT)         Diagnosis Codes (ICD 9)         Clinical Information         Attachments (Documents)         Questionnaires
Step	Attach clinical	OUTPATIENT SERVICES REQUEST
8	documentation by clicking the <b>browse</b> button.	<ul> <li>Patient Detail</li> <li>Requesting Provider</li> <li>Service Provider</li> <li>Attending Physician Service Detail</li> <li>Procedures</li> <li>Diagnoses</li> <li>Clinical Information</li> <li>Attached Documents</li> <li>Questionnaires</li> </ul>
Step	Browse and find	5/19/2011 10:50 AM
8.1	the file and click	- 7-20-11 7/20/2011 12:25 PM - IS 7/20/2011 9:55 AM
		tion in accordance to pt any files you wist
	Once attached, click <b>Attach File</b> .	All File Browse

Step 8.2	File name will appear when it is successfully uploaded.	ATTACHED DOCUMENTS Browse Attach Attached: c\users\sfeltner\documents\sample clinical notes.docx Remove
Step 9	The indicator icons on the left of the screen should be visible in all service request areas to show that all required data has been inputted.	OUTPATIENT SERVICES REQUEST         Patient Detail         Requesting Provider Information         Service Provider         Attending Physician (Optional)         Service Detail         Frocedure Codes (CPT)         Diagnosis Codes (ICD 9)         Clinical Information         Attachments (Documents)         Questionnaires         Previous         Next
Step 10	Questionnaires* (Does not apply to all services) *See the Questionnaires section in this manual for more detailed information	Patient Detail Requesting Provider Information Facility Attending Physician (Optional) Service Detail Procedure Codes (CPT) Diagnosis Codes (ICD 9) Clinical Information Attachments (Documents) Questionnaires Previous Finish

## Service Authorization Request (Outpatient), Continued

Step 11	VERY IMPORTANT! Click the checkbox at the bottom of the page and click either Save for Later or Submit. You will not be able to proceed if you do	I understand that precertification does not guarantee payment I understand that precertification only identifies medical necessity and does not identify benefits Save for later Cancel Submit Inarantee payment I understand that p and does not identify benefits Please, select check box or later Cancel Submit
	checkbox.	
Step 11.1	If any required portion of the request is missing, these alerts will appear.	Error: Procedure Code T1016 Requires Modifier Code Monthly Error: Procedure codes don't match Service Type Missing Information: X-RAY EXAM OF JAW - Unit Missing Information: X-RAY EXAM OF JAW - Start Date Missing Information: X-RAY EXAM OF JAW - End Date OUTPATIENT SERVICES REQUEST

### Service Authorization Request (Outpatient), Continued



## **Service Authorization Request (Outpatient) Summary**

12	
Step	<ul> <li>shown to the right.</li> <li>The Request Overview is displayed.</li> </ul>
Step 11	<ul> <li>Click the checkbox at the bottom of the page and click either Save for Later or Submit.</li> <li>You will not be able to proceed if you do not click the checkbox. An error message will appear as</li> </ul>
Step 10	Questionnaires (if applicable)
Step 9	<ul> <li>The indicator icons on the left of the screen should be visible in all service request areas to show that all required data has been inputted.</li> </ul>
Step 8	<ul> <li>Attach clinical documentation by clicking the browse button.</li> <li>Browse and find the file and click Open to attach.</li> <li>Once attached, click Submit.</li> </ul>
Step 7	<ul> <li>Enter any clinical notes in the text field.</li> <li>Click Next to continue.</li> </ul>
	<ul> <li>Search by Code Starts With or Description.</li> <li>Click Search.</li> <li>Select the appropriate code.</li> <li>At least one diagnosis code must be attached to the case. If there are more than one, one must be selected as the primary.</li> </ul>
Step 6	<ul> <li>Add Diagnosis Code by clicking Find, or click Show Preferred to bring up list of diagnosis codes identified as preferences.</li> <li>Like the CPT Codes, search, locate, and attach Diagnosis Codes by using the search function</li> </ul>
	<ul> <li>Enter the modifier(s), to a maximum of three</li> <li>Add additional procedure codes as needed.</li> </ul>
	<ul> <li>Enter the quantity and select the number of Units, Hours, etc. from the dropdown, rate and model number.</li> </ul>
Step 5	<ul> <li>Click Find to select a Procedure Code, or click Show Preferred to bring up list of procedure codes identified as preferences. Search and select procedure codes for this case.</li> <li>Enter the Start Date and End Date using the calendar dropdowns.</li> </ul>
Step 4	<ul> <li>Complete the drop down fields for Service Detail.</li> <li>Note: The Attending Physician section is optional.</li> </ul>
Step 3	<ul> <li>Enter in Service Provider Information. If not known, click the Find button to bring up the searc screen.</li> <li>Select the facility from the search results.</li> </ul>
Step 2	<ul> <li>Enter Requesting Provider Information data.</li> <li>Click Next to continue.</li> </ul>
Step 1	<ul> <li>Once you have located and brought up a member (see steps 1-4 of Inpatient process), input Patient Detail.</li> <li>Click Next to continue.</li> </ul>

Prior Authorization Request

#### Atrezzo Provider Portal

## **Complete Questionnaires**

Step 1	If a review requires the completion of a <b>questionnaire</b> , one will appear as link as shown.	Patient Detail       Requesting Provider         Service Provider       Questionnaire Name       Staus         Attending Physician       Questionnaire Name       Staus         Service Detail       Procedures       Diagnoses       Diagnoses         Clinical Information       Attached Documents       Meetionnaires       Not Completed
Step 2	Click the questionnaire link to begin completing it.	QUESTIONNAIRES Questionnaire Name Status DME QUESTIONNAIRE Not Completed
Step 3	Complete the questionnaire. The status (1) of the questionnaire is displayed. Click in the fields or checkboxes to complete the questionnaire (2). To save the questionnaire incrementally, click Save Changes (3). Once complete, Mark as Completed (4). If you choose not to complete the questionnaire, click Return to Request (5).	<form>         Figure and the complete       Image: Complete</form>

### **Complete Questionnaires, Continued**



**Prior Authorization Request** 

#### **Atrezzo Provider Portal**

#### **Extend a Request**



**Prior Authorization Request** 

#### Atrezzo Provider Portal

## **Extend a Request, Continued**

Step	Add clinical	
3	Add clinical information or attach documents. Important! To notify KEPRO of other changes to be made, indicate the details in the Clinical Information	Impartment Services Requests         Patient Detail         Requesting Provider         Facility         Attending Physician         Service Detail         Procedures         Diagnoses         Clinical Information         Attached Documents         Questionnaires         IPS Code         IPS Code         Previous         Next
	section, and KEPRO staff will make those changes on the case.	
Step 4	Click the disclaimer checkbox and click <b>Submit</b> .	I understand that precertification does not guarantee payment. I understand that precertification only identifies medical necessity and does not identify benefits.