



Hello and Welcome to the Acentra Health Adult Targeted Case Management Atrezzo submission training. This video has been created to provide general guidance for Providers on how to submit an Adult TCM requests in Acentra Health's Atrezzo platform.

PART ONE

General Overview



Part one will be a general overview of the May 13, 2019, changes.

General Overview

Effective May 13, 2019, providers will be required to submit authorization requests into the Acentra Health portal, Atrezzo. The initial request will be authorized for up to 30 days. The Continued Stay Review (CSR) submission cycle will be every 90 days thereafter. Each request will be reviewed for services that are considered to be duplicative or non-concurrent services, per the MaineCare Benefits Manual.

Providers will be required to have a user account in the Atrezzo portal for submissions. Any provider who needs to be set up as a user, should contact Acentra Health Provider Relations at ProviderRelationsME@kepro.com.



Procedure Codes

The following services will require an authorization request:

Section 13	
T1017HF	Case Management services for adults with substance use disorders
T1017	Case Management services for adults with HIV
T1017U5	Case Management services for members experiencing homelessness



PART TWO

Atrezzo Submission



In part two, we will walk through the Atrezzo submission process.

Accessing Atrezzo



Visit www.qualitycareforme.com to access the Atrezzo portal



To access the Atrezzo portal, go to our informational website; www.qualitycareforme.com and click on the Atrezzo login button

Accessing Login

Acentra
H E A L T H

LOGIN OPTIONS

Acentra Health Employees
Use this login button if you have a Acentra Health domain account.

LOGIN

Remember Me

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

LOGIN WITH PHONE

LOGIN WITH EMAIL

Remember Me

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

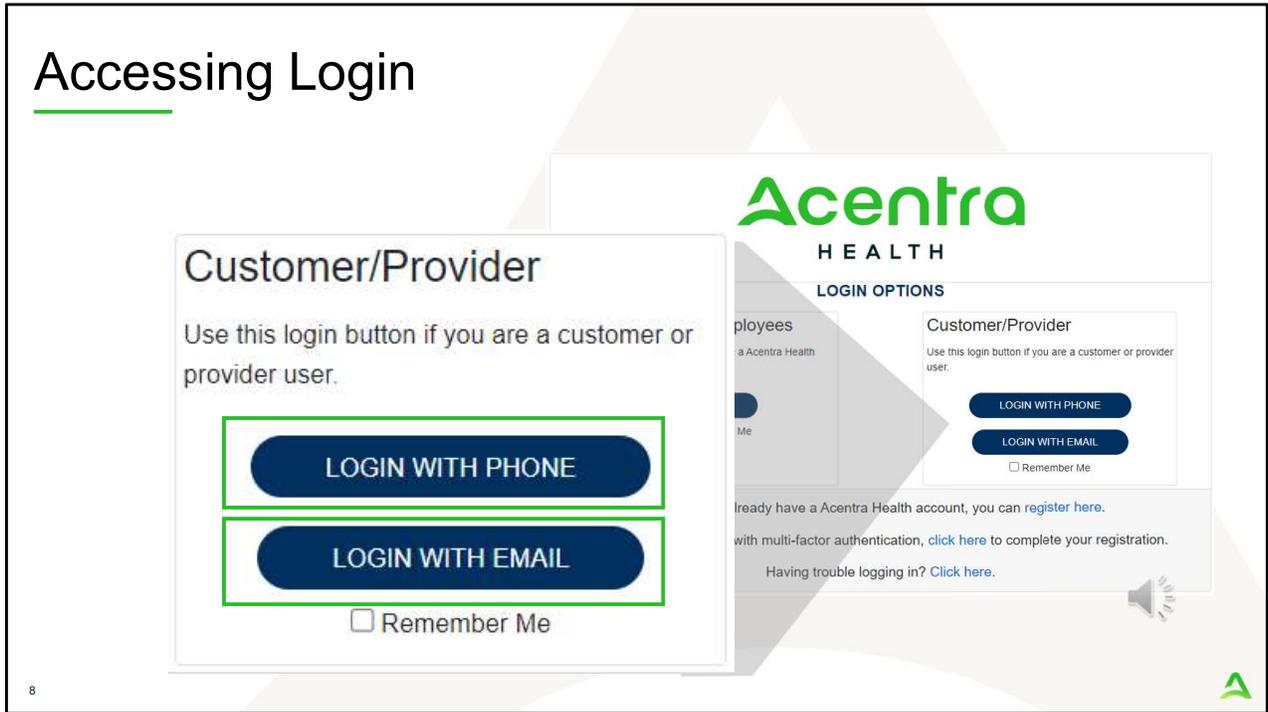
If this is your first login with multi-factor authentication, [click here](#) to complete your registration.

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

The Atrezzo system uses a Multi-Factor Authentication (MFA) login process. Each user who currently has an Acentra Health login, will click here, if this is your first with multi-factor authentication (MFA) to complete your registration.

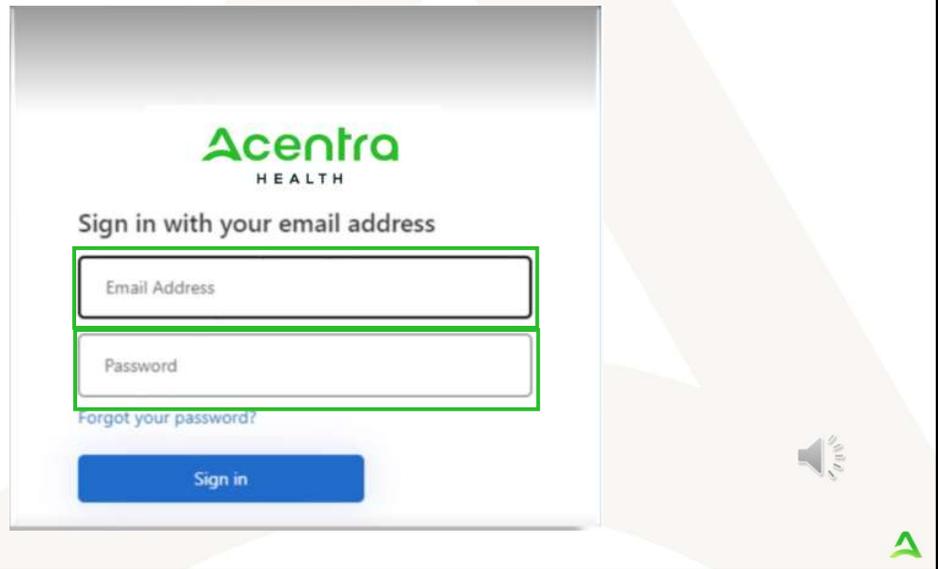


Accessing Login



When you arrive to the login screen, you will use the Customer/Provider login. Here you will choose Login with Phone or Login with email depending on how your registered for the multi-factor authentication. Please note, if you chose to register with phone and you do not currently have your phone you can still login with email. If you click remember me, the system will remember your login for four hours. Please do not use the remember me feature on a shared device. In this demonstration, we will click Login with phone because that is how we registered our multi-factor authentication.

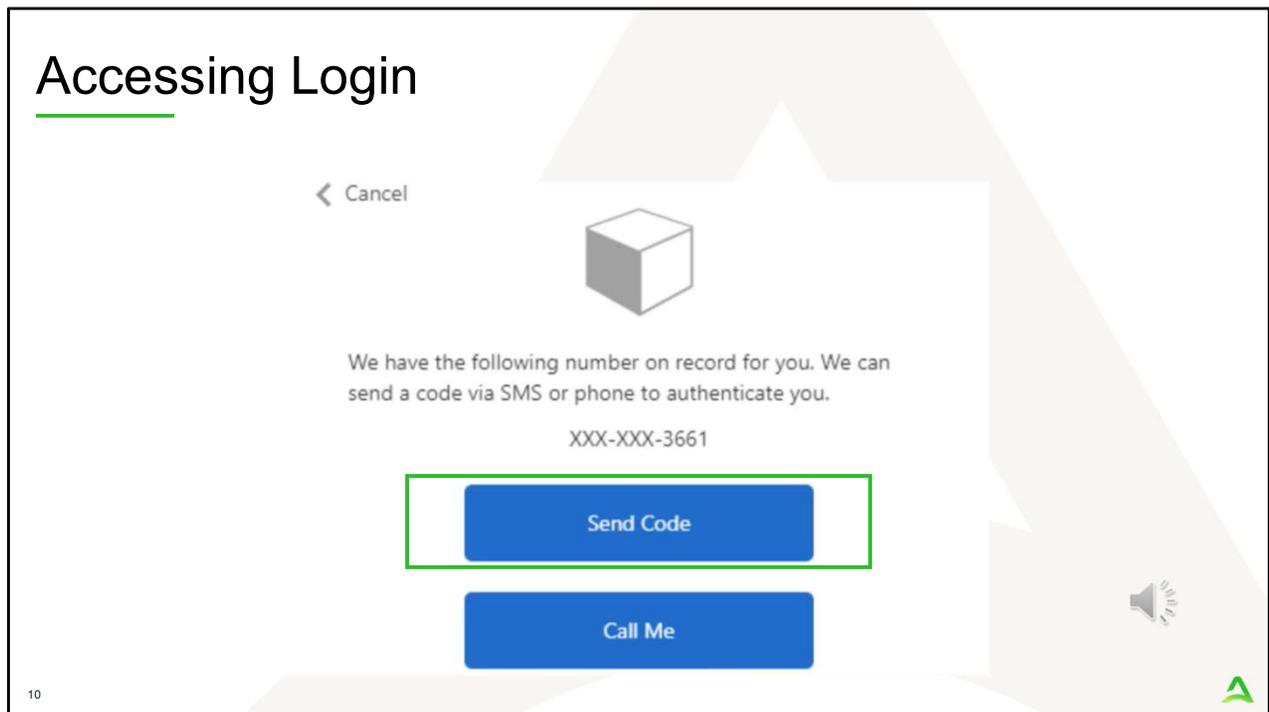
Accessing Login



The image shows a login form for Acentra Health. At the top, the Acentra Health logo is displayed in green. Below the logo, the text "Sign in with your email address" is centered. There are two input fields: "Email Address" and "Password", both of which are highlighted with a green border. Below the "Password" field is a link that says "Forgot your password?". At the bottom of the form is a blue button labeled "Sign in". To the right of the form, there is a speaker icon and a small green "A" logo in the bottom right corner of the slide.

To sign in, you will enter your email and password then click Sign in.

Accessing Login



Next, you will choose how you want to receive your verification code. You can click send code or call me. Send code will send a SMS text to your cell phone with your verification code. Call me will prompt a phone call to your phone where you will press a specific digit. In this example, we will chose send code.

Accessing Login

< Cancel



We have the following number on record for you. We can send a code via SMS or phone to authenticate you.

XXX-XXX-3661

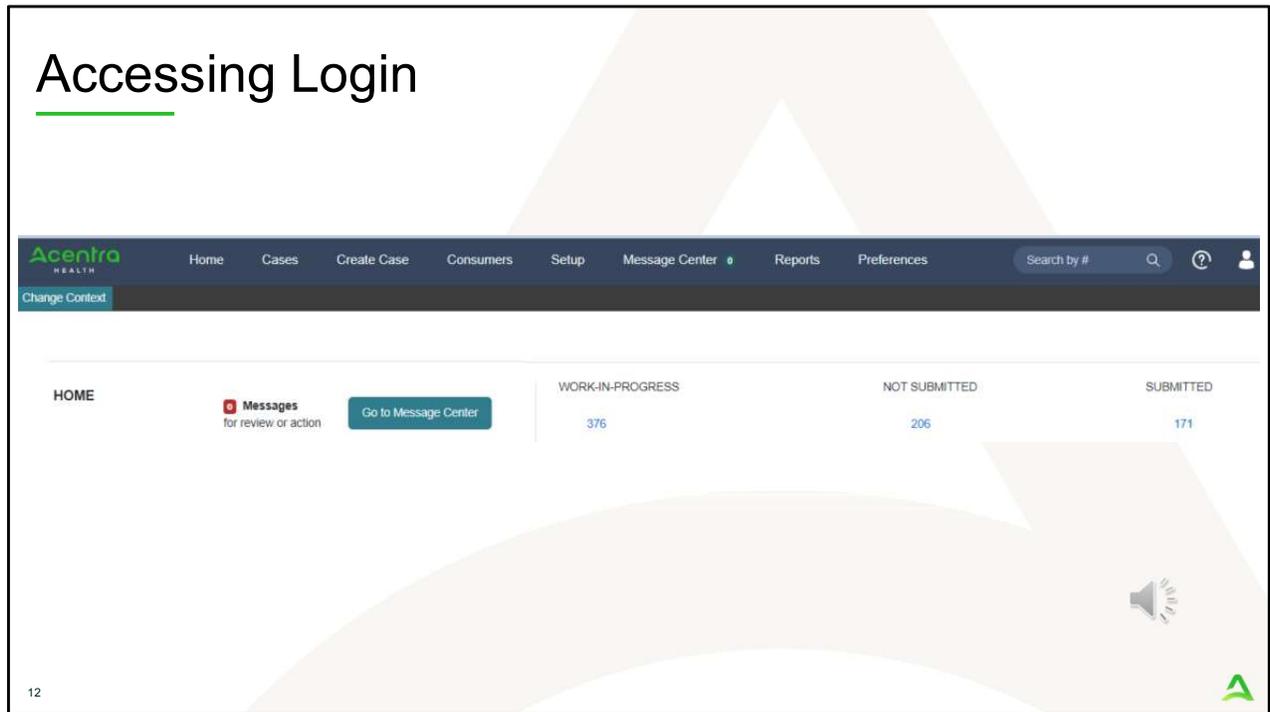
Enter your verification code below, or [send a new code](#)



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Enter in your verification code.

Accessing Login



The system will automatically verify your account and you will be logged into the home screen.

Creating the Request



To create a new request click on the create case tab.

Step 1 – Case Parameters

The screenshot displays the Acentra Health interface for creating a new UM case. The navigation bar includes 'Home', 'Cases', 'Create Case', 'Consumers', 'Setup', and 'Message Center'. The main content area is titled 'New UM Case' and shows 'Maine ASO' as the 'Requesting Provider' and 'Outpatient' as the 'Request Type'. The 'Case Parameters' section is active, with 'Case Type' set to 'UM' (1), 'Case Contract' set to 'Maine ASO' (2), and 'Request Type' set to 'Outpatient' (3). A 'Go To Consumer Information' button (4) is located at the bottom right, which is currently disabled. A 'Cancel' button is also present at the bottom left.

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Step 1 – Case Parameters:

1. Select UM for **Case Type**
2. Select Maine ASO for **Case Contract**
3. Select Outpatient for the **Request Type**
4. Click **Go to Consumer Information**. Note: Go to Consumer will remain grayed out until all required fields are completed.

Step 2 – Consumer Information

Change Context: PINES HEALTH SERVICES, Maine DHHS

New UM Case: PINES HEALTH SERVICES, Maine ASO, Requesting Provider, Outpatient

Step 1: Case Parameters, Step 2: Consumer Information

Consumer Information/ Search Consumer/ Results

CONSUMER ID: 00000001a (1)

LAST NAME: []

FIRST NAME (MIN 1ST LETTER): []

DATE OF BIRTH: MM/DD/YYYY (2)

*Combination of DOB and Last Name or Member ID

Cancel [] Search []

Name	DOB	Address	Consumer ID	Contract	Case Count	Actions
Jane Doe	11/29/1985	400 Winter Way Portland, ME	00000001A	Maine DHHS	9	Choose (3)

Showing 10 of 1

Not finding what you're looking for? Add temporary consumer

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In Step 2 – Consumer Information

1. In the **Consumer ID** box enter the Member's MaineCare number. You may also search for the Member by using their last name and Date of Birth.
2. Click **Search**.
3. Review the search results. If the correct member match is found, click **Choose**.

Step 2 – Consumer Information

The screenshot displays the 'Create Case' interface in the Acentra Health system. The top navigation bar includes 'Home', 'Cases', 'Create Case', 'Consumers', 'Setup', 'Message Center', 'Reports', and 'Preferences'. The main content area is titled 'New UM Case' and shows the following details:

- Requesting Provider: Maine ASO
- Outpatient: 01/01/1960
- Test Member 1 (M)

The interface is divided into two steps: Step 1 (Case Parameters) and Step 2 (Consumer Information). Step 2 is currently active. Below the step indicators, there is a table of previous case submissions:

Request ID	Status	Effective Date	Outpatient	Notes	Start Date	End Date	View Procedures	No letters available	No actions available	
Request 01	Un-Submitted		N/A				View Procedures	No letters available	No actions available	
Request 01	Un-Submitted		N/A	Section 65 Behavioral Health Services	2/1/2021	1/31/2022	View Procedures	No letters available	No actions available	
Request 01	Un-Submitted		N/A	Section 97 Private Non-Med Institution (PNMI)	2/16/2021	2/15/2022	View Procedures	No letters available	No actions available	
Request 01	Submitted	2/16/2021	Outpatient	N/A	Section 97 Private Non-Med Institution (PNMI)	2/16/2021	3/15/2021	View Procedures	No letters available	Actions

At the bottom of the page, there is a 'Create Case' button with a green circle and the number '1' next to it, indicating it is the next step. A mouse cursor is hovering over this button. Below the button, there is a 'Cancel' button and a note: 'Once you click **Create Case**, your changes will be saved and the case will be created **but not submitted**.'

Step 2 – Consumer Information

1. If there have been previous submissions for this member under your agency, those will display here. Scroll down and click on Create Case. Otherwise, if this is the first case that is being created for this member under your agency, you will not have this page and you will be immediately brought to step 3.

Step 3 – Additional Providers

The screenshot displays the Acentra Health web application interface. At the top, there is a navigation bar with options: Home, Cases, Create Case, Consumers, Setup, Message Center, Reports, and Preferences. Below this, a breadcrumb trail shows 'Change Content' > 'PINES HEALTH SERVICES, Maine DRHS'. The main content area is titled 'New UM Case' and shows details for 'PINES HEALTH SERVICES' (Requesting Provider), 'Maine ASO' (Outpatient), and 'Test Member 1 (M)' (01/01/1960). A progress bar indicates the current step is 'Step 3: Additional Providers', with other steps including Consumer Information, Service Details, Diagnoses, Requests, Questionnaires, Attachments, Communications, and Submit Case. Below the progress bar, there is a section for 'Additional Providers: Provider/Facility' with an 'Add Attending Physician' button. A table titled 'Selected Providers' lists two providers, both from 'PINES HEALTH SERVICES' with the same Medicaid ID (PMP000023088520) and NPI (1922449834). The table columns are Provider Type, Name, Medicaid ID, Specialty, NPI, Address, County, Phone, Fax, and Action. The 'Requesting' provider has a fax number of (123) 456-7890. The 'Servicing' provider has an 'Update' and 'Remove' action. A green circle with the number '1' and a 'Go to Service Details' button are visible at the bottom right of the table area. A small speaker icon is located at the bottom right of the screenshot.

Provider Type	Name	Medicaid ID	Specialty	NPI	Address	County	Phone	Fax	Action
Requesting	PINES HEALTH SERVICES	PMP000023088520	No Specialty Required	1922449834	1260 MAIN ST , WADE, ME US 04786	Aroostook	(207) 498-1164	(123) 456-7890	
Servicing	PINES HEALTH SERVICES	PMP000023088520	No Specialty Required	1922449834	1260 MAIN ST , WADE, ME US 04786	Aroostook	(207) 498-1164		Update Remove

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Step 3 – Additional Providers

1. The Requesting and Servicing providers will automatically be indicated based on the NPI number your login is associated with. Click on Go to Service Details

Step 4 – Service Details

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Step 4 – Service Details:

1. Select Section 13 from the **Service Type** drop down. The place of service field is not required; however, you can complete this field if you choose to.
2. Click **Go to Diagnoses**

Step 5 – Diagnosis

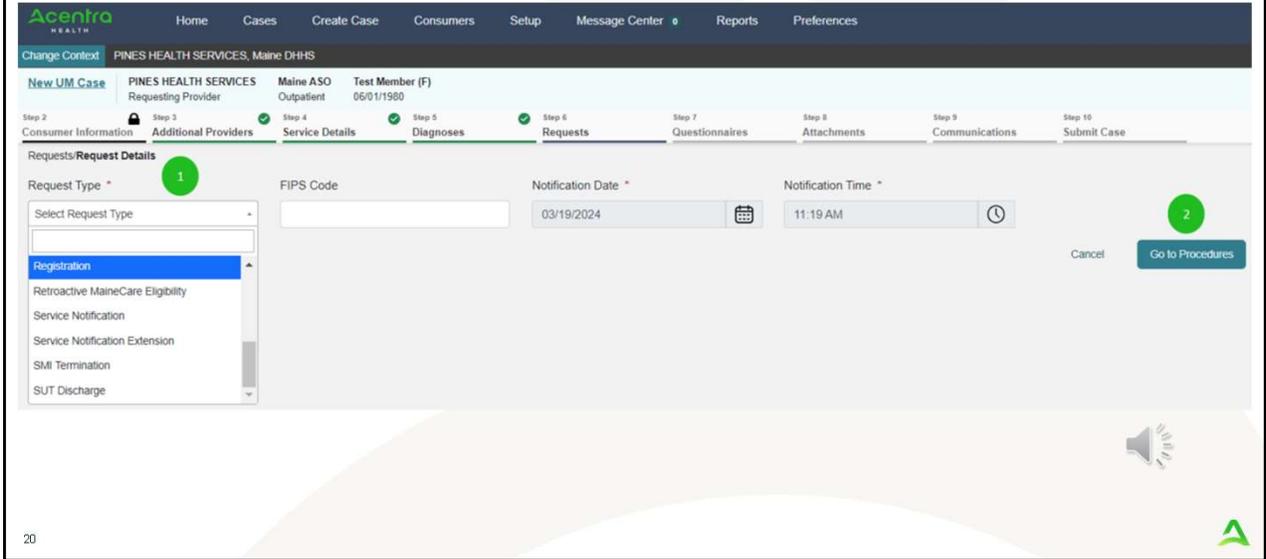
The screenshot shows the Acentra Health web application interface. The top navigation bar includes links for Home, Cases, Create Case, Consumers, Setup, Message Center, Reports, and Preferences. The main content area is titled 'New UM Case' and shows a progress indicator for steps 2 through 10. Step 5, 'Diagnoses', is currently active. Below the progress indicator, there is a 'Diagnosis/Add Diagnosis' section. This section includes a 'Code Type' dropdown set to 'ICD10', a 'Search' box containing 'f33 9', and a search result dropdown menu. The search results are displayed in a table with columns for Order Rank, Code, Description, Source, Created By, and Deactivate. The first result is 'F33.9 MAJOR DEPRESSIVE D/O RECURRENT UNS' with a rank of 1. The second result is 'F41.1 GENERALIZED ANXIETY DISORDER' with a rank of 2. There are green callout numbers 1 through 4 on the screenshot: 1 points to the search box, 2 points to the order rank column, 3 points to the 'Remove' link, and 4 points to the 'Go to Requests' button.

Order Rank	Code	Description	Source	Created By	Deactivate
1	F33.9	MAJOR DEPRESSIVE D/O RECURRENT UNS	Manual	pinest	Remove
2	F41.1	GENERALIZED ANXIETY DISORDER	Manual	pinest	Remove

Step 5 – Diagnosis:

1. In the Diagnosis **Search** box, start typing in either the diagnosis code or the description of the code. You will need to enter in at least three characters for the search feature to start finding results. Once you have found the diagnosis code, click on it to automatically add it to your request. Repeat the same search process for each additional diagnosis code.
2. If you have added more than one diagnosis code, you can rearrange the order of how the diagnosis codes appear by clicking on the diagnosis line and dragging it up or down in the list.
3. If you have added a diagnosis code in error, you may remove it by clicking on the **Remove** link. Please note: Once your request has been submitted, you will not be able to remove the diagnosis code.
4. When you have finished added the diagnosis code(s), click on **Go to Requests**

Step 6 – Requests



Step 6 – Requests:

1. In the **Request Type** box, select Registration.
2. Click **Go to Procedures**

Step 6 – Requests Continued

The screenshot displays the Acentra Health web application interface. At the top, there is a navigation bar with links for Home, Cases, Create Case, Consumers, Setup, Message Center, and Reports. Below this, a header indicates the current context: PINES HEALTH SERVICES, Maine DHHS. The main content area shows a 'New UM Case' for a 'Maine ASO Outpatient' member. A progress bar at the top of the main area shows seven steps: Step 2 (Consumer Information), Step 3 (Additional Providers), Step 4 (Service Details), Step 5 (Diagnoses), Step 6 (Requests), and Step 7 (Questionnaires). Step 6 is currently active. The 'Requests/Request 01/Procedures' section is visible, featuring a 'Code Type' dropdown set to 'CPT' and a 'Search' box. The search box contains the text 'T1017' and a dropdown menu is open, listing several procedure codes and descriptions, with 'T1017 Targeted case management' selected. A green circle with the number '1' is positioned above the search box, indicating the first step in the search process.

Step 6 – Requests Continued:

1. In the **Search** box, start typing in either the procedure code or the description of the code. You will need to enter in at least three characters for the search feature to start finding results. Once you have found the procedure code, click on it to automatically add it to your request. In this example, we have selected the T1017 Targeted Case Management

Step 6 – Requests Continued

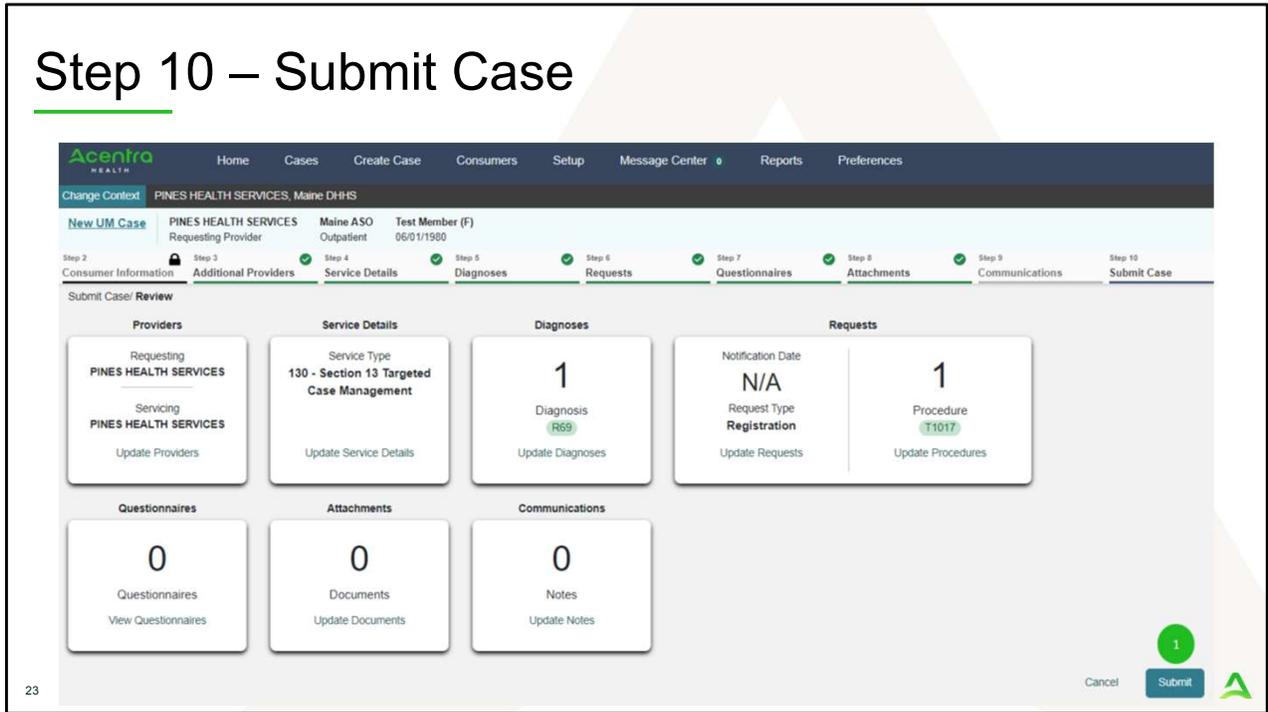
The screenshot displays the Acentra Health web application interface for Step 6: Requests. The top navigation bar includes Home, Cases, Create Case, Consumers, Setup, Message Center, Reports, and Preferences. The main header shows the case context: PINES HEALTH SERVICES, Maine DRHS, and a patient named Test Member (F) with ID 06/01/1900. The progress bar indicates the current step is 'Requests'. The form contains the following fields and controls:

- Modifier:** A dropdown menu labeled 'Select One'.
- Unit Qualifier:** A dropdown menu labeled 'Select One'.
- Requested Start Date:** A date input field with a calendar icon, containing '03/19/2024'.
- Requested End Date:** A date input field with a calendar icon, containing '04/17/2024'.
- Requested Duration:** A text input field containing '30'.
- Requested Quantity:** A text input field containing '30'.
- Requested Frequency:** A dropdown menu labeled 'Select One'.
- Requested Rate:** A text input field with a dollar sign prefix.
- Remove:** A green circular button with a minus sign.
- Jump to Submit:** A green circular button with a right-pointing arrow.

Step 6 – Requests Continued:

1. In the **Requested Start Date** box, enter the start date of this request. Please note, request must be submitted no sooner than 10 calendar days before the requested start date and no later than 5 calendar days past the requested start date.
2. In the **Requested Duration** box, enter in 30. This will automatically populate your end date out 30 days.
3. In the **Requested Quantity** box, enter in the total amount of units needed for this request. Please use the Maine ASO Service Grid located at <https://me.kepro.com/resources/manuals-forms/> to calculate the number of units based on procedure code. .
4. If you have added a procedure code in error, you can click on **Remove**.
5. Click on jump to submit.

Step 10 – Submit Case



Step 10 – Submit Case

1. Once you have completed the request, the information you have inputted will be displayed as tiles. If you need to update information prior to submitting, you can click on the tile to navigate back to that section. When you are finished, click on **Submit**.

Step 10 – Submit Case Continued

Disclaimer

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

Once you click **Agree**, a case number will be assigned and you will be taken to that case.

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In Step 10 – Submit Case

1. Once you click submit a Disclaimer popup will appear indicating that precertification does not guarantee payment and precertification only identifies medical necessity and does not identify benefits. Click on **Agree**.
2. If there are no errors, your case will submit and you will receive a case ID number. If there are errors, you will receive a message indicating what the errors are that need to be addressed before the case can be submitted.

Submitted Case

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Once the case has been submitted it will bring you to the request overview page. This will be a receipt of all information provided in the request. It is important to document the Case ID to reference this request at a later time

Please note: You will also be able to search and find the consumer by other identifying information like Name, DOB, etc. If calling Acentra Health regarding this request, three pieces of identifying information will be required to confirm the member's identity. For example, member's name, member's address, and date of birth.

PART THREE

Post Submission

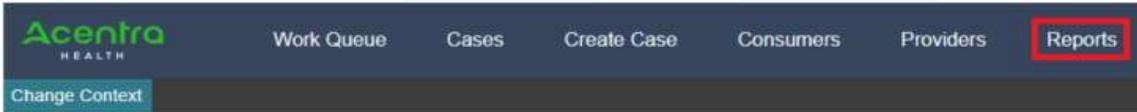


Daily Authorization Report

1

Click on the Reports Tab

Users who have been setup with report capabilities will have the reports tab in Atrezzo.



2

Select the Report

Click on the ME Daily Authorization Report to open the search parameters.



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The Daily Authorization Report is the primary way Acentra Health communicates to providers regarding the status of a case.

1. In the Atrezzo portal, users who have been setup as a Group Admin + Reports or Admin +Reports User role will have a Reports tab. Click on it to access the reports section.
2. Next, click on the ME Daily Authorization Report.

Daily Authorization Report Continued

3

Select Search Parameters

Enter in the start date and end date you want to search by. Then select the types of requests you want to search by and click view report. Anything matching your search criteria will display.

The screenshot shows the Acentra Health interface. At the top left is the logo "Acentra HEALTH". Below it are two date input fields: "Start Date" and "End Date", both containing "1/29/2024". To the right of these fields is a "Request Type" dropdown menu. The dropdown is open, showing a list of options with checkboxes: "(Select All)", "Continued Stay Review", "Critical Incident", "OBH Funded Continued Stay I", and "OBH Funded Review". To the right of the dropdown is a "View Report" button. A red box highlights the date fields, the dropdown menu, and the "View Report" button. A speaker icon is visible in the bottom right corner of the interface.

3. Enter in the start date and end date you want to search by. Then select the request types you want to search by and click view report.

Daily Authorization Report Continued

4

View Report

Once the report runs, you will be able to see all cases that match your search criteria. You can view the report right from the Atrezzo screen, or you can export into different types of files, by click on the Save icon.

The screenshot shows the Acentra Health interface. At the top, there is a search bar with 'Start Date' set to 1/30/2024 and 'End Date' set to 1/30/2024. The 'Request Type' is set to 'Continued Stay Review, Critical Inci'. Below the search bar, there is a navigation bar with a 'Save' icon highlighted in a red box. The main content area displays a 'Daily Authorization Report' for the period 01/30/2024 to 01/30/2024, with 25 total records. A table lists the records with columns for RequestID, KEPROCaseID, Submit Date, Member First Name, and Member Last Name. The table shows five rows of data, all with a Submit Date of 01/30/2024. To the right of the table, an export menu is open, listing various file formats: Word, Excel, PowerPoint, PDF, TIFF file, MHTML (web archive), CSV (comma delimited), XML file with report data, and TXT (Pipe delimited). A speaker icon is visible in the bottom right corner of the interface.

- Once the report runs, any cases that have been entered in Atrezzo under your agency's NPI number that match your search criteria will display. The report will provide you with a Acentra Health Case ID, start date, status and notes section which will show any notes that have been added to the case. You can view the report right from the Atrezzo screen, or you can click on the save icon and export it into several file types.

Questions?



- Toll-Free Phone: (866) 521-0027

- Option 1 – Member Services
- Option 2 – Katie Beckett
- Option 3 – Provider Relations
- Option 4 – Care Management
- Option 5 – Appeals
- Option 6 – Level I Critical Incident Reporting

- Email: ProviderRelationsME@Kepro.com

- To chat with an Acentra Health Representative visit www.qualitycareforme.com and click on the  icon.



Thank you for joining the Acentra Health Adult Targeted Case Management provider training. If you have further questions or need assistance, please call us at 866-521-0027. For technical assistance, please press Option 3 to reach a member of our Provider Relations Team. You can also reach a member of our Provider Relations Team via email at ProviderRelaitonsME@Kepro.com or through our online chat at www.qualitycareforme.com. Our hours of operation are Monday thru Friday 8am to 6pm.