

Hello and Welcome to the Acentra Health MaineMOM service request training. This video has been created to provide general guidance for Providers on how to submit a MaineMOM request in Acentra Health's Atrezzo platform.

PART ONE

# Atrezzo Submission Process



## Accessing Atrezzo



Visit [www.qualitycareforme.com](http://www.qualitycareforme.com) to access the Atrezzo portal

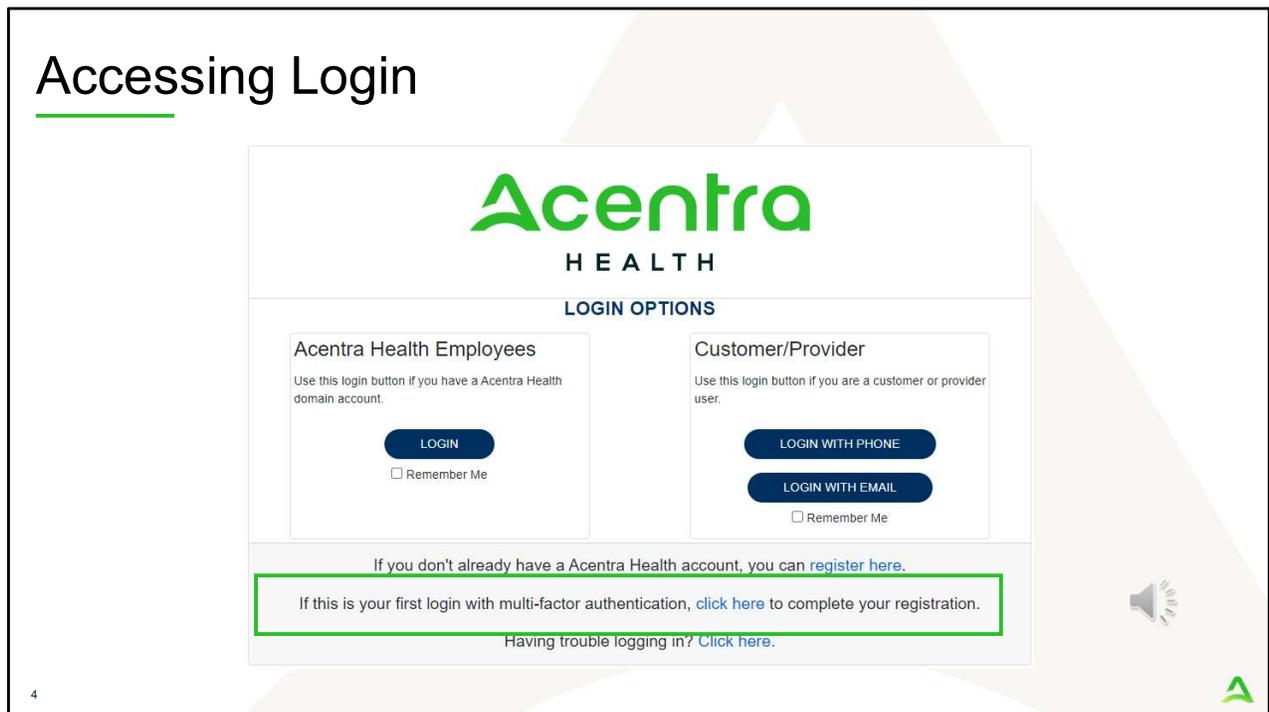


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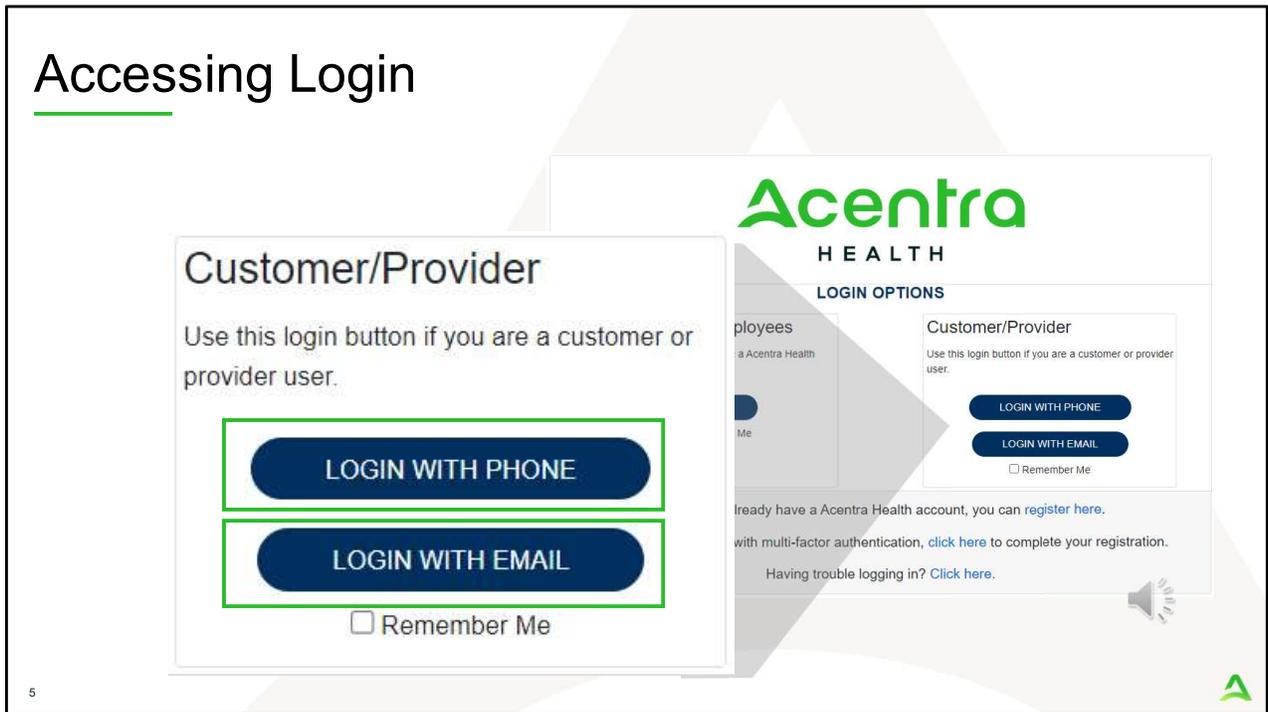
To access the Atrezzo portal, go to our informational website; [www.qualitycareforme.com](http://www.qualitycareforme.com) and click on the Atrezzo login button

## Accessing Login



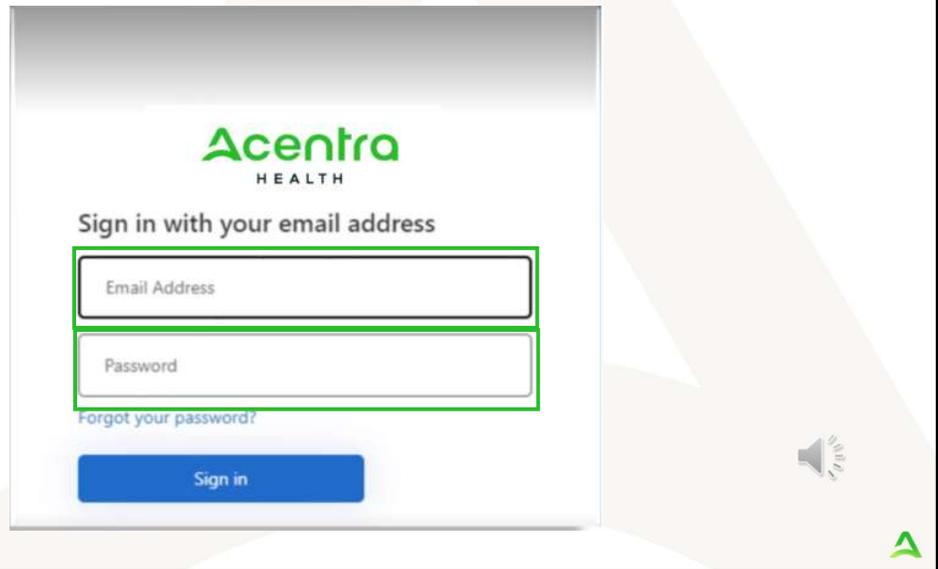
The Atrezzo system uses a Multi-Factor Authentication (MFA) login process. Each user who currently has an Acentra Health login, will click here, if this is your first with multi-factor authentication (MFA) to complete your registration.

## 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.

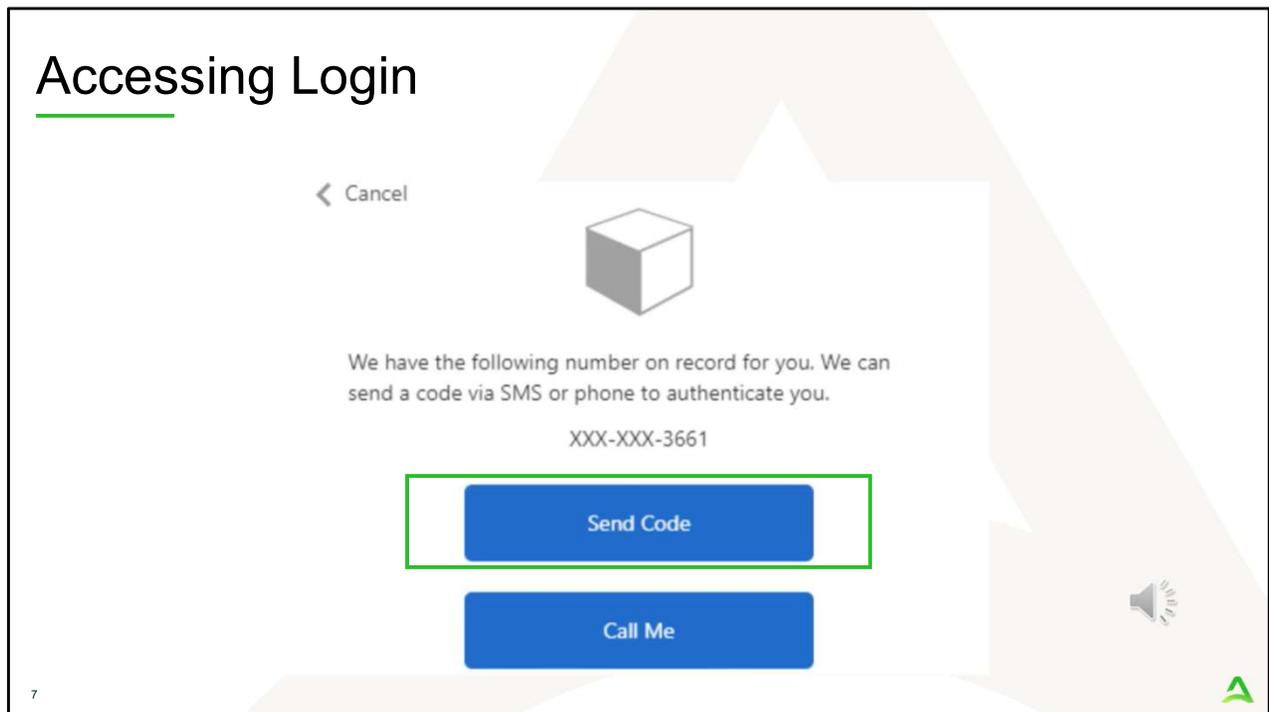
## Accessing Login



The image shows a login form for Acentra Health. At the top is the Acentra Health logo. Below it is the text "Sign in with your email address". There are two input fields: "Email Address" and "Password", both 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 "Sign in" button. To the right of the form is a speaker icon, and in the bottom right corner of the slide is a small green "A" logo.

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

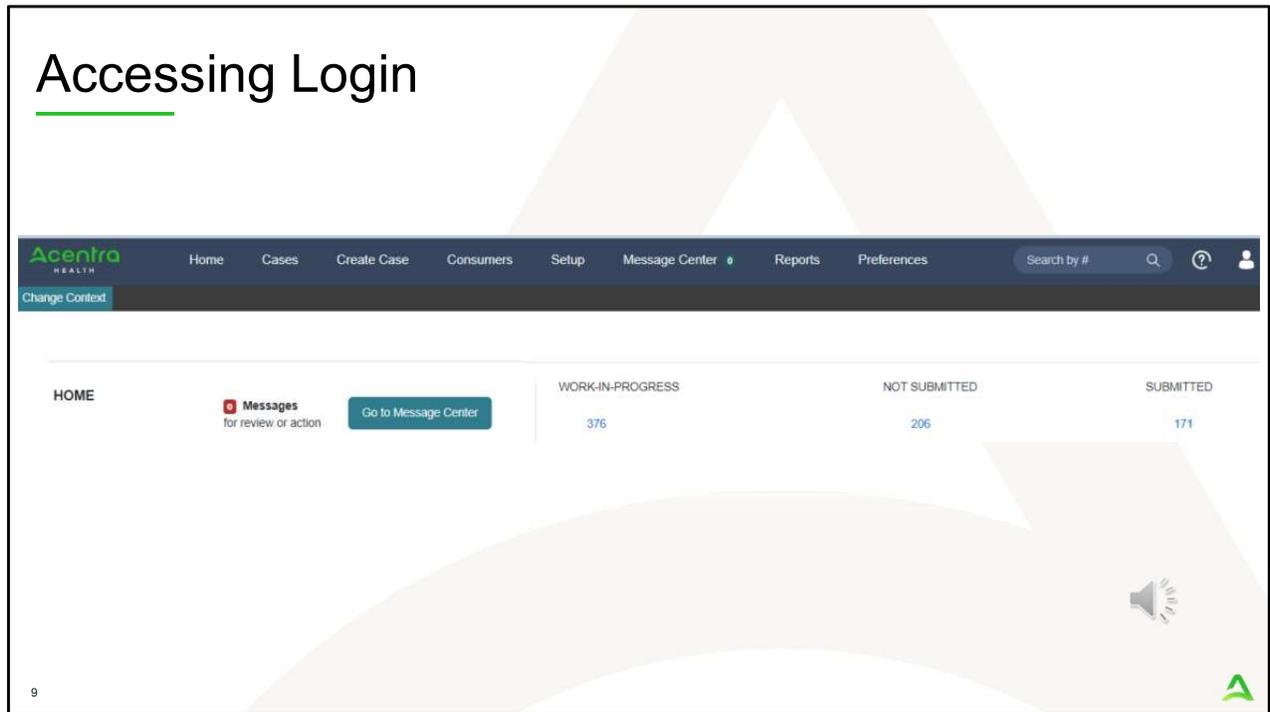
Enter your verification code below, or [send a new code](#)



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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 shows the Acentra Health interface for creating a new UM case. The top navigation bar includes 'Home', 'Cases', 'Create Case', 'Consumers', 'Setup', and 'Message Center'. Below the navigation, there's a 'Change Context' button and a header for 'New UM Case' with 'Requesting Provider' set to 'PINES HEALTH SERVICES' and 'Maine ASO'. The form is divided into two steps: 'Step 1: Case Parameters' and 'Step 2: Consumer Information'. Under 'Case Parameters / Choose Request Type', there are four numbered callouts: 1. 'Case Type' with radio buttons for 'Assessment' and 'UM' (selected). 2. 'Case Contract' with a dropdown menu showing 'Maine ASO'. 3. 'Request Type' with radio buttons for 'Inpatient' and 'Outpatient' (selected). 4. A 'Go To Consumer Information' button, which is currently grayed out. A 'Cancel' button is also present.

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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

**Acentra HEALTH** Home Cases Create Case Consumers Setup Message Center Reports Preferences Search

Change Context

New UM Case Requesting Provider Maine ASO Outpatient

Step 1 Case Parameters Step 2 Consumer Information

Consumer Information/ Search Consumer/ Results

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

00000001A

\*Combination of DOB and Last Name or Member ID

Cancel Search

Name	DOB	Address	Consumer ID	Contract	Case Count	Action
Test Member 1	01/01/1960	123 St Anywhere, ME	00000001A	Maine DHHS	45	Choose

Showing 10 of 1 Previous Page 1

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

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### 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 Acentra Health web application interface for creating a new case. The 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 'Case Parameters' section is active, and the 'Consumer Information' tab is selected. A table lists previous case submissions:

Request ID	Status	Request Date	Request Type	Requestor	Request Period	View Procedures	No letters available	No actions available	
Request 01	Un-Submitted		Outpatient	N/A		View Procedures	No letters available	No actions available	
Request 01	Un-Submitted		Outpatient	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		Outpatient	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 'Cancel' button and a 'Create Case' button, which is highlighted with a green circle and a '1'. A message states: 'Once you click **Create Case**, your changes will be saved and the case will be created **but not submitted**.'

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## 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 lists 'Selected Providers' with columns for Provider Type, Name, Medicaid ID, Specialty, NPI, Address, County, Phone, Fax, and Action. Two providers are listed, both for 'PINES HEALTH SERVICES' with the same details. A green circle with the number '1' and a 'Go to Service Details' button are visible at the bottom right of the provider table area.

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 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 dropdown menu showing search results. The search results are displayed in a table with columns for Order Rank, Code, Description, Source, Created By, and Deactivate. Two diagnosis codes are listed: 'F33.9 MAJOR DEPRESSIVE D/O RECURRENT UNS' and 'F41.1 GENERALIZED ANXIETY DISORDER'. The first code is selected, and the second code has a 'Remove' link next to it. At the bottom right of the 'Diagnosis/Add Diagnosis' section, there is a 'Go to' button.

### Step 5 – Diagnosis:

1. In the Diagnosis **Search** box, start typing in the member's primary OUD 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. Please note, the diagnosis code(s) you enter must be the billable version of the code, otherwise when Acentra Health sends the authorization request to MIHMS, it will error out and you'll be requested to provide an updated 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 adding the diagnosis code(s), click on **Go to**

## Requests

## Step 6 – Requests

The screenshot displays the Acentra Health software interface. At the top, there is a navigation bar with the Acentra Health logo and menu items: Home, Cases, Create Case, Consumers, Setup, Message Center, Reports, and Preferences. Below this is a sub-header for 'Change Context' and 'PINES HEALTH SERVICES, Maine DHHS'. The main content area shows a 'New UM Case' for 'Maine ASO Outpatient' with a requesting provider of 'Jane Doe (F)' and a date of '11/29/1985'. A progress bar indicates the current step is 'Step 6: Requests', with previous steps (Consumer Information, Additional Providers, Service Details, Diagnoses) completed. The 'Requests/Request Details' section contains a 'Request Type' dropdown menu with 'Registration' selected, a 'FIPS Code' input field, a 'Notification Date' field set to '03/11/2024', and a 'Notification Time' field set to '12:41 PM'. A 'Go to Procedures' button is visible on the right, and a 'Cancel' button is also present. A green circle with the number '1' is placed over the 'Request Type' dropdown, and another green circle with the number '2' is placed over the 'Go to Procedures' button. A speaker icon is located in the bottom right corner of the interface.

Step 6 – Requests:

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

## Step 6 – Requests Continued

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Step 6 – Requests Continued:

1. In the **Search** box, start typing in the procedure code T2022TH. 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.

## Step 6 – Requests Continued

The screenshot displays the Acentra Health web application interface. At the top, there is a navigation bar with options like Home, Cases, Create Case, Consumers, Setup, Message Center, Reports, and Preferences. Below this, a progress indicator shows steps from 2 to 10, with Step 6 (Requests) currently active. The main content area shows a form for a request titled 'T2022TH (Un-Submitted)'. The form includes fields for 'Requested Start Date' (03/11/2024), 'Requested End Date' (12/08/2025), 'Requested Duration' (638), 'Requested Quantity' (21), and 'Requested Frequency' (Select One). A 'Jump to Submit' button is highlighted with a green circle and the number 4. The page number '19' is visible in the bottom left corner.

### Step 6 – Requests Continued:

1. In the **Requested Start Date** box, enter the start date of this request. Please note, MaineMOM Registrations can be submitted ten (10) calendar days prior to the enrollment date and five (5) calendar days after the enrollment date.
2. In the **Requested Duration** box, enter in the total amount of days you need for this request. The length of a MaineMOM Registration is for 21 months from date of enrollment.
3. In the **Requested Quantity** box, enter in the total amount of units needed for this request. There should be 1 unit per month. For example a full 21 month Registration should have 21 units.
4. Click on Jump to Submit.

# Duplication of Service

The image shows a screenshot of a software interface. On the left, a notification box from 'Atrezzo' displays the message: 'Requested service conflicts with an existing concurrent service. Please coordinate services with the Member [E]'. Below the message is an 'Ok' button. To the right of the notification, a green-bordered box contains a list of services considered duplicative with MaineMOM. The list includes Targeted Case Management (Section 13), Community Support Services (Section 17) with sub-items Community Integration (CI), Assertive Community Treatment (ACT), Community Rehabilitation Services (CRS), and Day Support Services; Behavioral Health Homes (Section 92); and Opioid Health Homes (Section 93) with sub-items OHH without case management and OHH with case Management. A speaker icon is visible in the bottom right of the screenshot area, and a small green 'A' logo is in the bottom right corner of the overall slide.

The following services are considered duplicative with MaineMOM:

- Targeted Case Management (Section 13)
- Community Support Services (Section 17)
  - Community Integration (CI)
  - Assertive Community Treatment (ACT)
  - Community Rehabilitation Services (CRS)
  - Day Support Services
- Behavioral Health Homes (Section 92)
- Opioid Health Homes (Section 93)
  - OHH without case management
  - OHH with case Management

## Duplication of Service:

If a duplication of service exists, you will receive a real-time notification when entering in your request. Practices should notify the member and offer the choice for the member to call Acentra Health or to the other service provider to discharge from services. MaineMOM teams can call in to Acentra Health with the member.

## Step 10 – Submit Case

The screenshot shows the Acentra Health web application interface for the 'Submit Case' step. The top navigation bar includes 'Home', 'Cases', 'Create Case', 'Consumers', 'Setup', 'Message Center', 'Reports', and 'Preferences'. The main content area displays a progress bar with steps 2 through 10, where Step 10 is highlighted. Below the progress bar, there are six tiles representing different sections: Providers, Service Details, Diagnoses, Requests, Questionnaires, and Attachments. Each tile shows a count and a link to update that section. A 'Submit' button is visible at the bottom right.

Section	Count	Action
Providers	2	Update Providers
Service Details	1	Update Service Details
Diagnoses	1	Update Diagnoses
Requests	1	Update Requests
Questionnaires	0	View Questionnaires
Attachments	0	Update Documents
Communications	0	Update Notes

### 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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### Step 10 – Submit Case Continued

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 TWO

# Post Submission

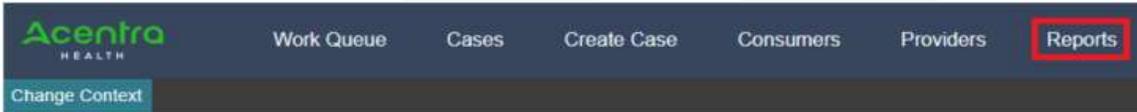


# Daily Authorization Report

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 set to "1/29/2024". To the right of these fields is a "Request Type" dropdown menu. The dropdown is open, showing a list of options: "(Select All)", "Continued Stay Review", "Critical Incident", "OBH Funded Continued Stay I", and "OBH Funded Review". A "View Report" button is located to the right of the dropdown. A red box highlights the date fields and the dropdown menu. 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 Registration as your **Request Type** 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 for a 'Daily Authorization Report'. The search filters are: Start Date: 1/30/2024, End Date: 1/30/2024, and Request Type: Continued Stay Review, Critical Inci. The report shows 25 total records. A table displays the first few records with columns for RequestID, KEPROCaseID, Submit Date, Member First Name, and Member Last Name. 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). The 'Save' icon (a floppy disk) is highlighted with a red box.

RequestID	KEPROCaseID	Submit Date	Member First Name	Member Last Name
		01/30/2024		
		01/30/2024		
		01/30/2024		
		01/30/2024		
		01/30/2024		

- 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](mailto:ProviderRelationsME@Kepro.com)

- Chat with an Acentra Health Representative at [www.qualitycareforme.com](http://www.qualitycareforme.com)



Thank you for joining the Acentra Health MaineMOM 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](mailto:ProviderRelaitonsME@Kepro.com) or through our online chat at [www.qualitycareforme.com](http://www.qualitycareforme.com). Our hours of operation are Monday thru Friday 8am to 6pm.