

Job Aid Title: Creating a New UM Case	Job Aid Number: AC.ANG.JA.008				
Date Published: 4/5/2024	Approved by: Daniyel Bezaury				
References: Atrezzo Next Generation (ANG) User Manual					
Purpose : The purpose of this job aid is to provide step-by-step instructions to create a new UM case in ANG using either the Fax Queue or Consumer Search.					

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Populate Fax Que	eue
Click on Fax Queue	
	Work Queue Cases Create Case Consumers Providers Reports
	Change Context
	WORK QUEUE
	Assessment Queue CM Queue UM Queue Fax Queue
Select appropriate	
Contract and the appropriate File Queue	WORK QUEUE Assessment Queue CM Queue Fax Queue Deleted Files • fields are mandatory • fields are mandatory • fields are mandatory • fields are mandatory
	CONTRACT • FILE QUEUE • USER CASE ID
Click Search	DATE RECEIVED FROM DATE RECEIVED TO DATE MODIFIED FROM DATE MODIFIED TO
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	COMMENTS SEARCH RESET

The selected							
queue will							
populate	FAX QUEUE						
populato.	SELECT FLA	G FILE NAME	○ RECEIVED ON	ENTER COMMENTS	FILE SIZE M	MODIFIED ON	MODIFIED BY
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Open the		Test Copy Copy Copy tif	f 3/7/2022 11:04:15 AM	Copy	34.01 KB 3	8/7/2022 11:04:15 AM	dhezaury
document to find							
consumer s name		J Test_Copy_Copy_Copy.tin	f 3/7/2022 11:04:14 AM	Сору	34.01KB 3	8/7/2022 11:04:14 AM	dbezaury
Hover over							
document row							
and click the	FAX QUEUE						
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Create a Case fro	om Fax Queue						
Select UM in							
Case Type							
dropdown		CREATE CAS	E / SELECT CASE TYPE				
		NEW CAS	E REQUEST				
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		CASE TYPE	*				
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	Case Parameters						
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Select the							
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Request type	CASE CONTRACT * REQUEST TYPE *						
	Select One V Select One V						
Enter at least one							
search field to	_						
locate your	• Co	nsumer Information					~
consumer	SEARC	CH CONSUMER				NI (1001 101 101	
	FIRST	NAME	LAST NAME	DATE OF BIRTH	SS	SN (XXX-XX-XXXX)	
Click Search	CONT	RACT MEMBER ID	SUBSCRIBER ID/ M				
						NEXT	

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Select the radio button next to the consumer's name.	SELECT CONSUMER FIRST NAME LAST NAME DATE OF BIRTH CONTRACT CONSUMER ID CONTRACT NAME STATE CREATED BY Image: Construct of the state Aisha The Funds 92 TN File
Note: If you select the wrong consumer, you can click Change Consumer to select another.	CONSUMER NAME DATE OF BIRTH CONSUMER MEMBER ID STATE COUNTRY Aisha TN US CHANGE CONSUMER Y
Select Provider Type and enter at least one other search field. Click Search	Provider Information SEARCH PROVIDER PROVIDER TYPE FIRST NAME LAST NAME NPI COUNTRY Select One Select One PROVIDUE MORE FILTERS SEARCH CPREVIOUS CREATE CASE
Select the radio button next to the provider's name.	SELECT PROVIDER Inst NAME LAST NAME NPI MEDICAID ID ADDRESS CITY STATE COUNTRY Image: Comporary UMWA Provider 999999999 DM3949192 123 Temporary Road Temp City WV United States Displaying records 1 to 1 of 1 records Image: Comporary UMWA Provider 999999999 DM3949192 123 Temporary Road Temp City WV United States Displaying records 1 to 1 of 1 records Image: Comporary UMWA Previous Image: Comporary UMWA Previo
Enter FAX number.	Provider Information Temporary UMWA Provider / 8469154 / 999999999 / WV ~ Provider ID / NPI Address COUNTY PHONE FAX * 8469154 / 999999999 123 Temporary Road , Temp City, WV US 99999 (999) 999-9999 🐼
Click Create Case once all information is entered and all sections have green checks marking them as complete	NEW CASE REQUEST EXPAND ALL © Case Type UM © Case Parameters ~ © Consumer Information ~ © Provider Information CREATE CASE

Select appropriate Document Type in pop up window. Click Yes	Assign Fax Queue DOCUMENT TYPE 1 Select One CANCEL 2 YES
Enter Clinical Da	ata and Submit Case
Once a case has been created, it will default to an unsubmitted status and require information in the Clinical sections: Service Details , Diagnosis , and Procedures	Case Aisha The Funds 92 Member ID SVC Auth # Un-Submitted ••• Case Summary Collapse Menu Clinical Service Details Diagnosis Procedures
The case will default to Service Details. Select Intake Method, Admit Date, and Service Type from drop downs	Clinical Service Details Diagnosis Procedures INTAKE METHOD * ADMISSION SOURCE ADMIT DATE * PLACE OF SERVICE SERVICE TYPE * Select One Select One MM/DD/YYYY Select One Select One Select One Discharge DATE Discharge DisPosition AUTHORIZATION NUMBER MM/DD/YYYY Select One Select One
Click Diagnosis	
	Case Aisha The Funds 92 Member ID SVC Auth # Un-Submitted Collapse Menu Clinical Service Details Diagnosis Procedures
Click Add Diagnosis	Clinical Service Details Diagnosis Procedures ADD DIAGNOSIS ~





Once all procedure codes have been added, click Add Procedures	SELECT © CODE TYPE CODE DESCRIPTION Image: Colspan="2">CODE TYPE CODE DESCRIPTION Image: Colspan="2">CODE TYPE CODE DESCRIPTION Image: Colspan="2">CODE TYPE CODE DESCRIPTION Image: Colspan="2">OC DESCRIPTION Image: Colspan="2">Displaying records 1 to 1 of 1 records Previous 1 Next Show 10 Image: Entries ADD PROCEDURES
All added procedures populate under the request. Click on a procedure code to complete detailed information	Clinical Request 01 Un-Submitted 2/0 LOS Un-Submitted N/A - N/A E0260 Un-Submitted N/A - N/A 0 / 0 Add Procedure
Select appropriate Requested Start Date, Requested End Date, Requested Duration, and Requested Quantity	Clinical Service Details Diagnosis Procedures Request 01 Un-Submitted 2/0 Hosp bed semi-electr w/ matt LOS (Un-Submitted) E0260 Hosp bed semi-electr w/ matt Image: Construction of the second seco
Note: The Requested Duration will change the end date based on input	REQUESTED START DATE * REQUESTED END DATE * REQUESTED DURATION * 03/21/2022 IIII 05/04/2022 IIII REQUESTED FREQUENCY REQUESTED RATE DISCOUNTED RATE Select One IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII





The case is now	
	Case 220800002 Aisha The Funds 92 - Case Summary Inpatient Member ID SVC Auth #
Reference Case	Collapse Menu Task Center
status.	Consumer Details
	Provider/Facility
	REQUEST Image: Task Name CLOSED BY EDIT ACTION Image: Ima
	Questionnaires
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lick Consumers	
	Acentro Work Queue Cases Create Case Consumers Providers Reports Search by # Q ?
elect appropriate	
nter at least one	CONSUMERS Please enter at least one search field and select contract to search RESET
ther	CONTRACT * FIRST NAME LAST NAME DATE OF BIRTH SSN (XXXXXXXXXXX)
ther emographics	CONTRACT • FIRST NAME LAST NAME DATE OF BIRTH SSN (XXXXXXXXX) Select One Ile MM/DD/YYYY IIII
ther emographics eld.	CONTRACT • FIRST NAME LAST NAME DATE OF BIRTH SSN (XXXXXXXX) Select One Ie MM/DD/YYYY Im CONTRACT CONSUMER ID SUBSCRIBER ID/ MEDICAID ID Exclude deceased consumers
other lemographics ield.	CONTRACT * FIRST NAME LAST NAME DATE OF BIRTH SSN (XXXXX-XXXX) Select One Ie MM/DD/YYYY III CONTRACT CONSUMER ID SUBSCRIBER ID/ MEDICAID ID Exclude Deceased Consumers
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other demographics ield. Click Search Click on the consumer's name	CONTRACT FIRST NAME LAST NAME DATE OF BIRTH SSN (XXXXXXXX) Select One le MM/DD/YYYY Image: Consumer id contract name SEARCH
other demographics ield. <u>Click Search</u> Click on the consumer's name - blue hyperlink	CONTRACT FIRST NAME LAST NAME DATE OF BIRTH SSN (XXXXXXXXX) Select One ie MM/DD/YYYY iii iii CONTRACT CONSUMER ID SUBSCRIBER ID/ MEDICAID ID EXCLUDE DECEASED CONSUMERS SEARCH FIRST NAME DATE OF BIRTH CONTRACT CONSUMER ID EXCLUDE DECEASED CONSUMERS FIRST NAME DATE OF BIRTH CONTRACT CONSUMER ID CONTRACT NAME STATE CREATED BY Aisha The Funds 92 TN File
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other demographics ield. <u>Click Search</u> Click on the consumer's name - blue hyperlink Review consumer Jetails	

Create Case from	Consumer Profile
On consumer's page, click Create Case	CONSUMER / Aisha Consumer Summary Consumer NAME GENDER DATE OF BIRTH CONSUMER ID LOCATION CONSUMER CONTRACT Aisha The Funds 92 CREATE CASE CREATE CASE CREATE CASE
Select UM in Case Type dropdown	CREATE CASE / SELECT CASE TYPE NEW CASE REQUEST Case Type CASE Type CASE TYPE Select One Case Parameters Consumer Information Alisha CREATE CASE
The Case Contract will autofill based on consumer selected. Select appropriate Request Type	Case Parameters
Confirm Consumer Information is correct. NOTE: If the consumer is incorrect, you can click Change Consumer to select another.	Consumer Information CONSUMER NAME DATE OF BIRTH CONSUMER MEMBER ID STATE COUNTRY Aisha TN US CHANGE CONSUMER
Select Provider Type and enter at least one other search field. Click Search	Provider Information SEARCH PROVIDER PROVIDER TYPE • 1 FIRST NAME LAST NAME NPI COUNTRY Select One Select O

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Select the radio button next to the	SELECT PROVIDER		LAST NAME	NPI	MEDICAID ID	ADDRESS	СІТУ	STATE	COUNTRY
provider s hame.		Temporary UMWA	Provider	99999999999	DM3949192	123 Temporary Road	Temp City	WV	United States
	Displaying records 1 t	o 1 of 1 records					Previous	1 Next Sho	w 10 🗸 Entries
									PREVIOUS
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Enter FAX Number									
	Provid	ler Information				Temporary UMWA	Provider / 846915	54 / 9999999999	9/WV 👻
	Provider ID	/ NPI Addres	s		COUNTY	PHONE	FAX *		
	8469154 / 9	99999999999 123 Te	mporary Road , Tem	p City, WV US 99999		(999) 999-9999			0
Click Create Case									
information is		NEW CASE REQUE	ST						
entered and all		· · · ·							
sections have		Case Type					UM	^	
green checks marking them		Case Parame	ters					^	
complete		Consumer In	formation					^	
		Provider Info	rmation		Temporary UMWA	Provider / 8469154 / 999	9999999 / WV	•	
							CREATE CASE		
Continue to Enter CI	inical Data an	d Submit Case	e sections	for remai	ning steps	5.			



Version	Comments	Update by	Date Updated
1	Job Aid created	DBezaury	10/16/2020
2	Job Aid Updated	DBezaury	5/3/2022
3	Job Aid Updated	AHadlock	3/23/2023
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