

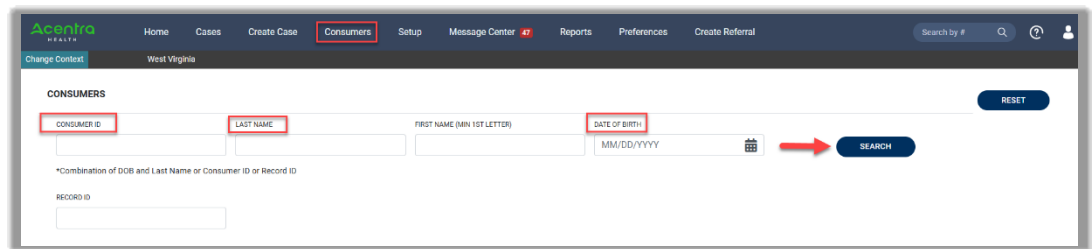
Job Aid Title: WV ADW Provider Portal: Transfer Requests	Job Aid Number: WV.ADW.ANG.JA.002
Date Published: 10/20/2025	Approved by: Melody Cottrell, Kim Sang
References: Provider Portal Assessment User Guide	
Purpose: To guide providers through the process of submitting a transfer request in the Atrezzo portal.	

Consumer Search

Click the Consumer tab

Enter the **Consumer ID, or combination of Last Name and Date of Birth**

Click **Search**



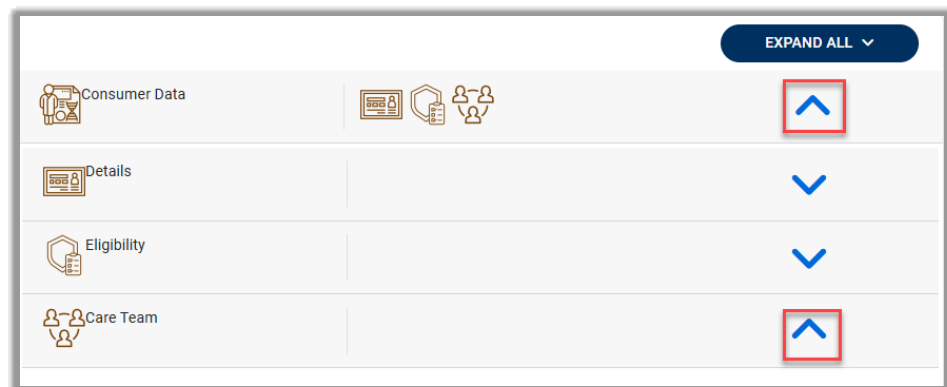
Click the Consumer's Name **Hyperlink**

NAME	DATE OF BIRTH	CONSUMER ID	SSN	Record ID	CONTRACT	ACTIONS	CASE COUNT
BETTY WHITE	12/11/1926	W0059000020841	233367578	10000123	West Virginia	View Eligibility	2

Displaying records 1 to 1 of 1 records

Transfer Request

Expand **Consumer Data > Care Team**





Navigate to the agency you wish to initiate the transfer **FROM** in the list. Select the **Action** button, then click **Initiate Transfer**

Enter the **Transfer Effective Date** and **Reason**

Enter the Transfer recipient's **Provider Type** and search criteria, then click **Search**

Select the appropriate radio button from the results and click **Submit**

Note: Boss will approve or reject the transfer. If **rejected**, the provider will be notified via the portal. If **approved**, the transfer recipient will receive a message to accept or reject the referral.

Once the transfer is pending BoSS approval, the status will display as **Transfer Approval Pending**

BoSS Approval: Accept Transfer

To access the consumer's dashboard, from the Message Center click the consumer's name directly from the message



- 1) Expand **Consumer Data**
- 2) Expand **Care Team**
- 3) Click the **Action** Button
- 4) Click **Edit**

*Confirm the correct contract is populated

CONSUMER NAME	DATE OF BIRTH	CONSUMER ID
	04/25/1962	WXM5R0000270783

CONSUMER DATA	DETAILS	ELIGIBILITY	CARE TEAM

CONTRACT *
WV ADW

CARE TEAM MEMBER INFORMATION	SPECIALTY/ TYPE	ADDRESS	PHONE/ FAX	START DATE	END DATE	STATUS/ REJECTED REASON	TRANSFER REASON	ACTION
Right At Home Beckley PAA Homemaker Agency (HMA) 1205044765	Personal Attendant Agency ADW Waiver	130 George Street	(304) 929-2670 (304) 929-2671	10/17/2025		Transfer Pending		Edit View History Action

Select the **Status** Dropdown to **accept** or **reject** the transfer

Contract: WV ADW

ADD CARE TEAM MEMBER

EDIT CARE TEAM MEMBERS

FACILITY NAME: Right At Home Beckley PAA
NP#: 1205044765
SPECIALTY: Personal Attendant Agency
TYPE: ADW Waiver
ADDRESS: 130 George Street WV, 25801
PHONE: 3049292670
FAX: 3049292671

ROLE: Homemaker Agency (HMA)

START DATE: 10/17/2025
END DATE: MM/DD/YYYY
STATUS: Select One

COMMENTS:

DONE UPDATE COMMENT

When a transfer is approved, the status will update from **Terminated** under the old agency to **Accepted** under the new agency. Be sure to monitor the status updates to confirm successful transition

CARE TEAM MEMBER INFORMATION	SPECIALTY/ TYPE	ADDRESS	PHONE/ FAX	START DATE	END DATE	STATUS/ REJECTED REASON	TRANSFER REASON	ACTION
Homemaker Agency (HMA) 1205044765 msadiprov	Personal Attendant Agency ADW Waiver	130 George Street	(304) 929-2670 (304) 929-2671	10/17/2025		Accepted		Action
Homemaker Agency (HMA) 1336447465 Advantage_MC	Personal Attendant Agency ADW Waiver	15 Bank Street	(304) 587-9992 (304) 587-9993	10/15/2025	10/16/2025	Terminated - Transfer	Consumer moved	Action

Locate updated authorization within the **UM Case**:

Expand **Cases** and select the **UM Case** tab

Click the applicable **Request number** to view the details

Attachments (3)

Cases

Submitted Requests

Request	Status	Submit Date	Category	Discharge Date	Service Type	Service Dates	Procedures	Letters	Actions
Case Level Consumer ID / CaseID: 00601049666 / 252880034	Completed	10/15/2025	Outpatient	N/A	ADW - Traditional	11/1/2025 - 10/1/2026	Approved: 12 View Procedures	No letters available	Actions
Case Level Consumer ID / CaseID: 00601049666 / 252900008	Completed	10/15/2025	Outpatient	N/A	ADW - Traditional	11/1/2025 - 10/31/2026	Approved: 12 View Procedures	No letters available	Actions

Clicking the **View Procedures** link displays the procedure details. **Note:** The previous authorization will be rolled back as a result of the transfer. Any future authorizations will show as zero.



After selecting the Request number:
To view authorization numbers for a specific month, expand the **Clinical** section. Scroll down to view the corresponding auth numbers by month

Service Details

PLACE OF SERVICE: Select One
SERVICE TYPE: TRA - ADW - Traditional
AUTHORIZATION NUMBER: [Empty Field]

DISCHARGE REASON: Select One

Diagnosis

RANK	CODE	DESCRIPTION	SOURCE	CREATED BY	DEACTIVATE
1	I10	ESSENTIAL PRIMARY HYPERTENSION	Manual	RulesEngine	

Displaying records 1 to 1 of 1 records

Procedures(Request/Review)

Message Portal: Rejection
If the transfer recipient rejects the referral, the initiating provider will receive a notification message in the portal

MESSAGE CENTER									
CASE ID	REQUEST	CONTRACT	CONSUMER	FROM	SUBJECT	TO	SENT ON	ACTION	
252880033		WV ADW		Acentra Health	SDM Referral Rejected	Provider Demo	10/17/2025 9:48:54 AM	View	Clear
252880033		WV ADW		Acentra Health	Transfer Request approved by BoSS - Referral Sent	Provider Demo	10/17/2025 9:47:56 AM	View	Clear



Version	Comments	Revision History	Date Updated
1	Job Aid Created	JMulbah	10/17/2025
1	Job Aid Approved	DBryan	10/20/2025