Mobile Caregiver+

NE Specific Mobile Caregiver+ Provider Portal Quick Reference Guide

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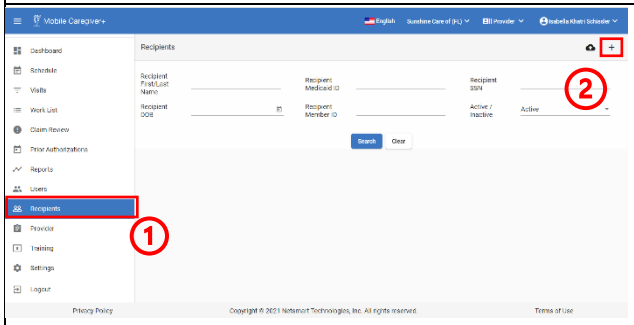
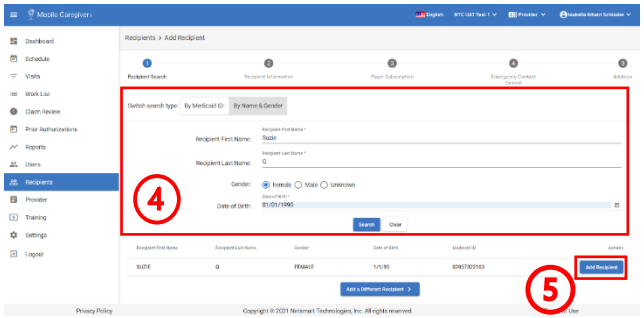
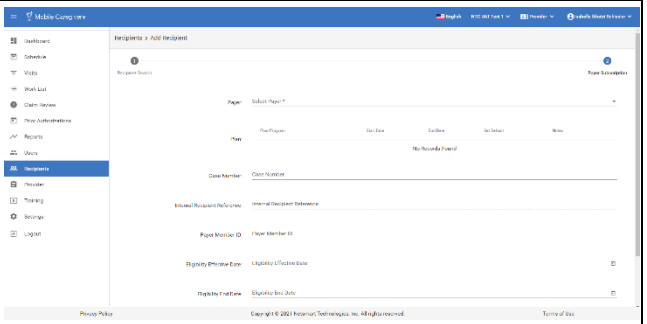
**** This Quick Reference Guide does NOT replace solution training. Those assigned to the Provider Administrator role will have access to all features of the Mobile Caregiver+ Provider Portal and have access to all Caregiver and Recipient data. A Provider Administrator is anyone that manages the EVV Solution. This quick reference guide gives step-by-step instructions on functions that Provider Administrators are most likely to do in the Mobile Caregiver+ Provider Portal. ****

How to Link a Recipient to the Mobile Caregiver+ Provider Portal

- Some Recipients may have already had existing Mobile Caregiver+ profiles; they might have previously received service from Providers that use the Mobile Caregiver+ Solution. Recipients that have existing Mobile Caregiver+ Recipient profiles can simply be linked to other Agencies.
- A Recipient **must** be enrolled in the active Agency before an Administrator can schedule visits between Caregivers and Recipients.





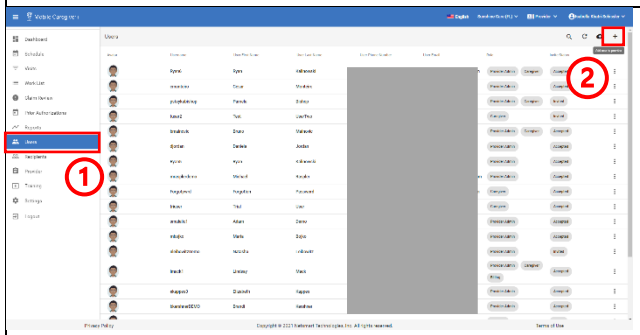


1. Log into the **Mobile Caregiver+ Provider Portal** and click on the **Recipients** tab from the Main Menu.
2. Click the **Add Recipient** icon, in the top right corner of the screen.
3. The **Add Recipient Form** will appear.
4. In the **Add Recipient** form, the user can search by Medicaid ID or by Name & Gender if the Recipient exists in the system. Enter the information and click **Search**.
5. The existing Recipient will appear and select **Add Recipient**. The Recipient will be linked to the current Agency.
6. Fill out the Payer Subscription section of the form.
7. Scroll to the bottom of the form and click **Save**. The Recipient will be linked to the active Agency.

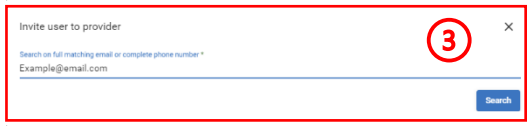
How to Manually Add a Caregiver to an Active Agency

This Quick Reference Guide does not replace solution training. This document is for those in the Provider Administrator role, or those who manage the EVV System and will have unlimited access to all Caregiver and Recipient data. This document will give step by step instructions on separate functions that Provider Administrators are most likely to use in the Mobile Caregiver+ Provider Portal.

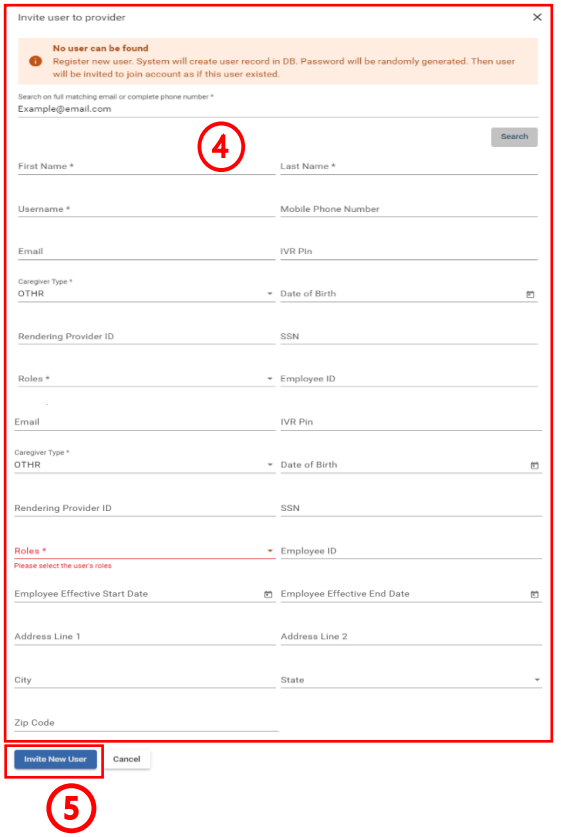
If a Caregiver is providing care, the Caregiver must be addded under the User's tab BEFORE Provider Administrators can schedule a visit.



1. Log into the **Mobile Caregiver+ Provider Portal** and click on the **Users** tab from the Main Menu.
2. Click the **Add user to provider** icon, in the top right corner of the screen.

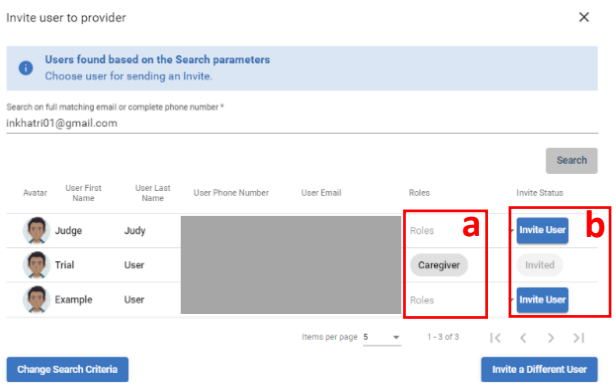


3. The **Invite user to provider** pop-up will appear. Type in the email address OR phone number of the Caregiver that needs to be added in the provided field and click **Search**.
4. The system will scan the entered email or phone number to see if an existing user exists in the system. If no existing user is found, the **Invite user to provider** form will appear.
5. Fill out the form with the required fields and click **Invite New User** at the bottom of the form.
6. The added user will receive an email or a text message, inviting the User to join the Agency.



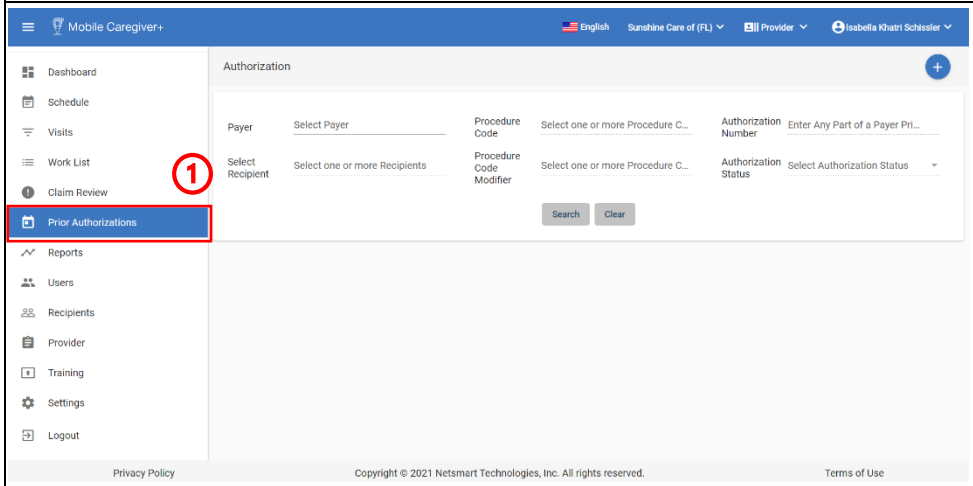
- If an existing User is in the system, the system will display a list of existing Users in the Agency:

a. Find the User that needs to be added, select a role that the User will be added as.
b. Select **Invite User**.

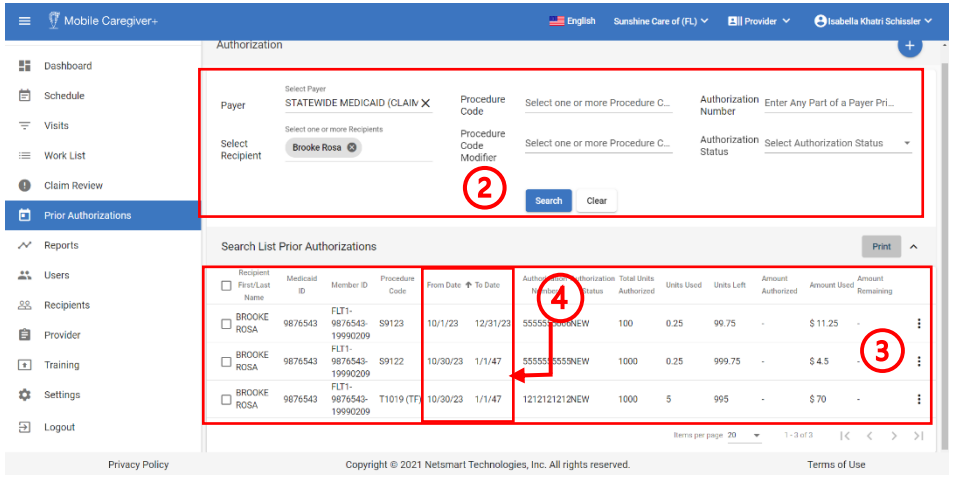


How to Review Prior Authorizations

- Providers are able to review Prior Authorization(s) that are loaded in the Mobile Caregiver+ Provider Portal. Providers must ensure that the data listed in the Prior Authoriztions are correct. As an ongoing practice, Providers should review Prior Authorizations before scheduling visits and submitting claims to increase the liklihood of receiving timely remittance.



1. Log into the Mobile Caregiver+ Provider Portal and click on **Work List** in the Main Menu.



2. Use the filter header to search and locate the Prior Authorization(s) that need to be reviewed and click **Search**.
3. The system will update to show Prior Authorizations that match the search criteria.
4. Using the **From Date** and **To Date** columns, ensure that the Prior Authorization is valid and has not expired.
   a. **Providers should complete this step BEFORE visits are scheduled. Prior Authorizations should be valid, and Providers must use the Procedure Code attached with the Prior Authorization to schedule visits and submit respective claims.**

- Using the **Total Units Authorized**, **Units Used**, **Units Left** columns, make sure there are enough units available for the respective Procedure Code to schedule and bill services.

The following tables include NE United, Molina, and Nebraska Total Care (NTC) Service Codes and Modifiers that **DO NOT require a Prior Authorization** when scheduling and billing for services.

United Healthcare	
Service Code	**Modifier**
G0151	
G0151	51
G0151	59
G0151	76
G0151	XU
G0152	
G0152	51
G0152	59
G0152	76
G0152	XU
G0153	
G0153	51
G0153	59
G0153	76
G0153	XU

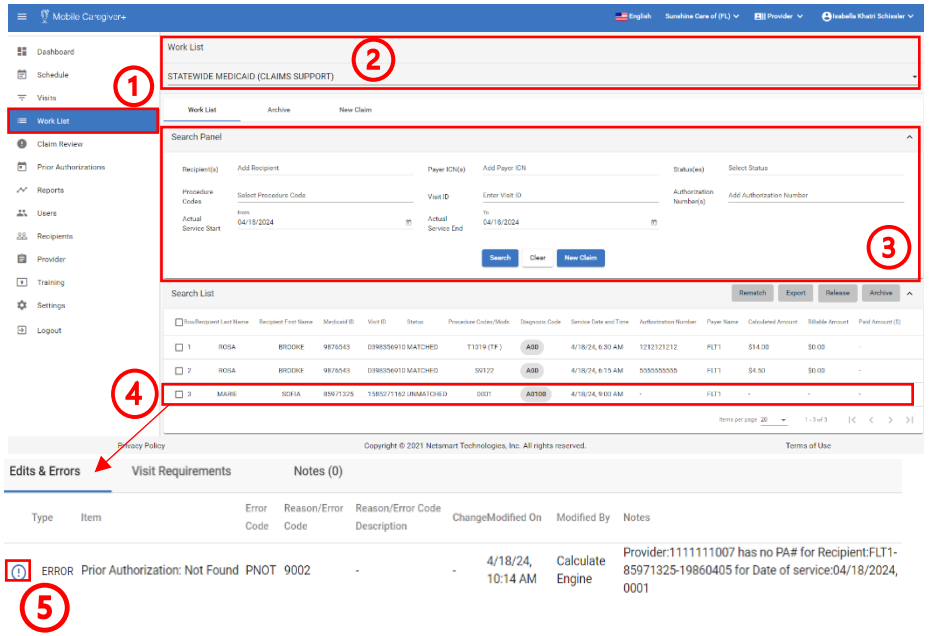
Molina	
Service Code	**Modifier**
G0151	
G0151	51
G0151	59
G0151	76
G0151	XU
G0152	
G0152	51
G0152	59
G0152	76
G0152	XU
G0153	
G0153	51
G0153	59
G0153	76
G0153	XU
S9122	
S9122	51
S9122	59
S9122	76
S9122	XU

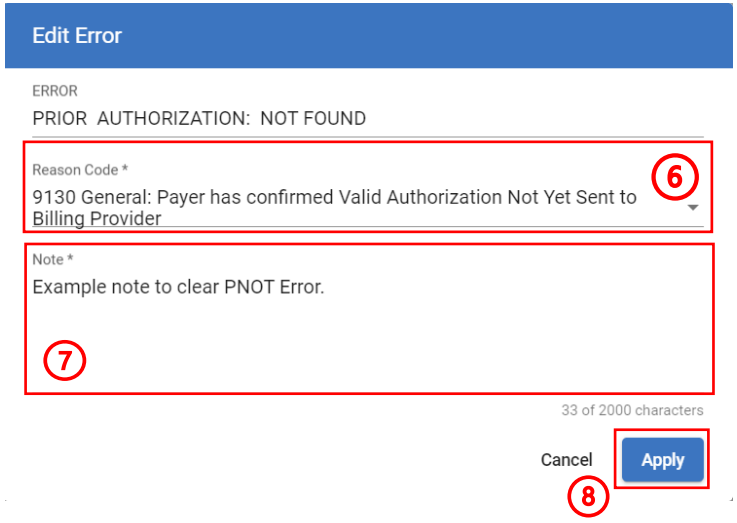
Molina Cont.	
Service Code	**Modifier**
S9123	
S9123	51
S9123	59
S9123	76
S9123	XU

NTC	
Service Code	**Modifier**
G0151	
G0151	51
G0151	59
G0151	76
G0151	XU
G0152	
G0152	51
G0152	59
G0152	76
G0152	XU
G0153	
G0153	51
G0153	59
G0153	76
G0153	XU

How to Clear PNOT Error Message

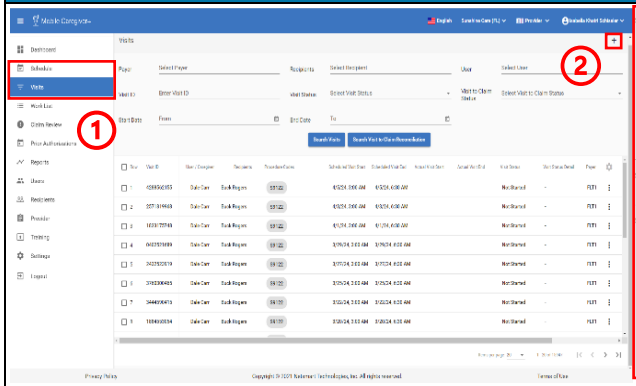
- If a Service Code not listed in the previous page, is scheduled, and billed without an authorization on file, the respective claim will receive a **PNOT** error message and will need to be cleared before submitting to the Payer.

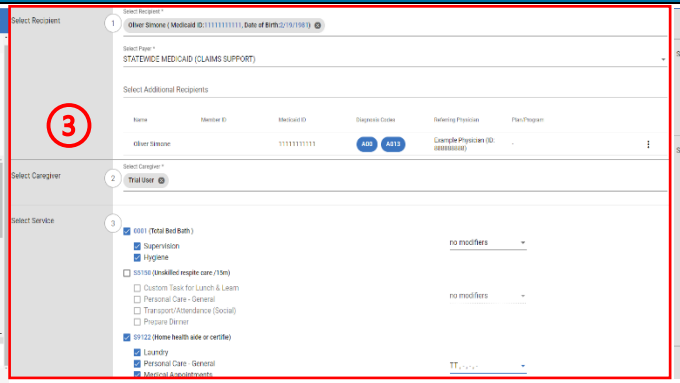


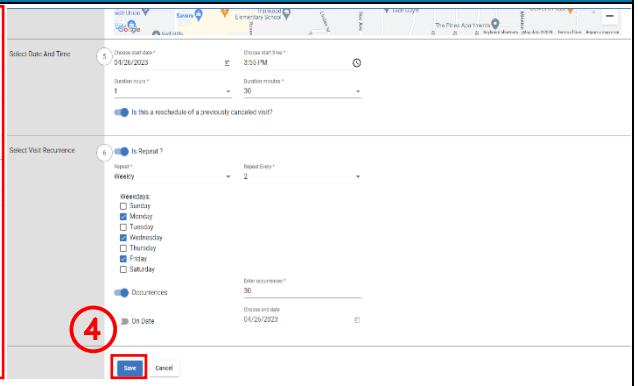


1. Log into the **Mobile Caregiver+ Provider Portal** and click on the **Work List** in the main menu.
2. Select the **Payer**.
3. Use the **Search Panel** to filter for the claim you need to clear the PNOT error message.
4. Click on the claim and scroll to the **Edits and Errors** section.
5. Click on the blue exclamation mark to the left of the ERROR.
6. Click the **Reason Code** field and select a valid reason to why an authorization was not found in the system.
7. In the **Note** field, provide further details if necessary.
8. Click **Apply** to save and clear the error message.

How to Schedule a Visit







1. Log into the **Mobile Caregiver+ Provider Portal** and click on the **Visits** OR **Schedule** tab from the Main Menu.
2. Click the **Add New Visit** icon, in the top right corner of the screen.

***Please review the policies and procedures set by Payers BEFORE filling the **Add New Visit** Form. A Provider Administrator should follow the Payer's set guidelines. ***

3. Fill out the **Add New Visit** Form with all necessary data.
   a. Section 1 – Select Recipient(s).
   b. Section 2 – Select Caregiver.
   c. Section 3 – Select Service(s).
      ⚠ i. **Select a Service Code that matches a Prior Authorization for the selected Recipient.**
   d. Section 4 – Select Location(s).
   e. Section 5 – Select Date and Time.
      ⚠ i. If the visit is a **one-time visit**, Provider Administrators can save the visit without filling out Section 6.
      ⚠ ii. If the visit being created was previously canceled and is being rescheduled, activate the **reschedule switch**. The visit will be saved as a 'rescheduled' visit and will be marked with the following icon, .
   f. Section 6 - Visit Recurrence Selection.
      ⚠ i. Section 6 is only for visits that will be **repeating**.

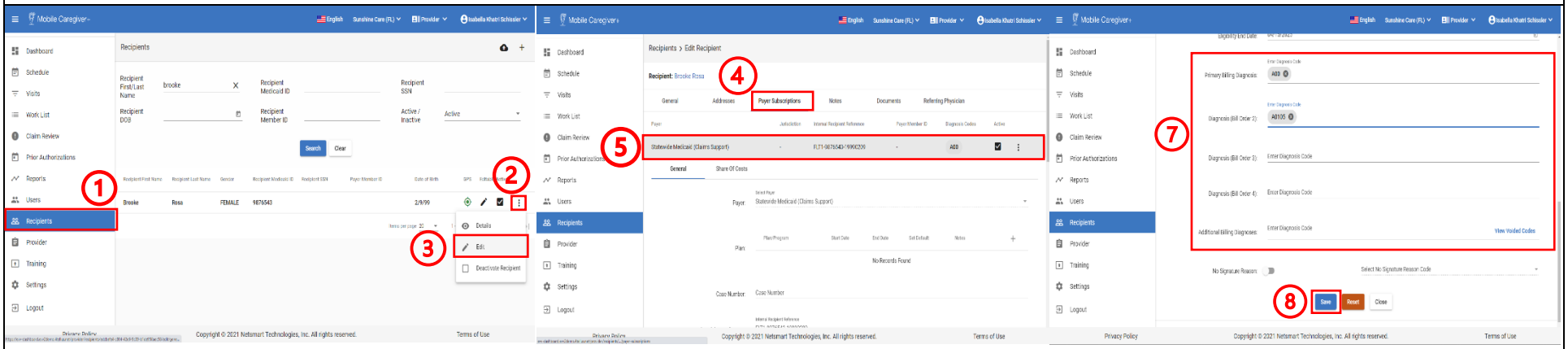
4. Click **Save** once the form has been completed. Once saved, the system will use the designated Payer's business rule to screen the scheduling entries to ensure that the visit adheres to the Payer's policies and procedures. The system will return one of the three outcomes:
   a. **No Error**: The visit being scheduled has no reported error; the system will automatically save the visit.
   b. **Critical Error**: A Critical Error indicates that the visit being scheduled has at least one major error and cannot be saved. Users will only be given the option to MAKE CORRECTIONS for the displayed error(s).
   c. **Warning Error**: A Warning Error indicates that the visit being scheduled has at least one error, but the User can save the visit without making corrections.

5. Once the recently created visit(s) are saved, they will display in the Visits List and Schedule of the Provider Portal as well as the Caregiver's Vists List in the mobile application.

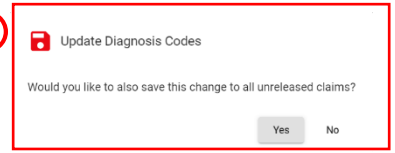
- Scheduling a visit will link the Caregiver with the Recipient. Once linked, the Recipient's PHI will display in the Caregiver's mobile application.

How to Add a Diagnosis Code to a Recipient's Profile

- Every Recipient must have a diagnosis code listed in his/her EVV profile before visits are scheduled.



1. Log into the **Mobile Caregiver+ Provider Portal** and click on the **Recipients** tab from the Main Menu.
2. Locate the Recipient that needs a diagnosis code added and click on the action's icon.
3. In the submenu, select **Edit**.
4. Click on the **Payer Subscriptions** tab.
5. Locate and click on the record for the Payer subscription for which you want to add the Recipient's Diagnosis Code.
6. Scroll to the bottom of the page.
7. In the **Primary Billing Diagnosis**, **Diagnosis (Bill Order 2)**, **Diagnosis (Bill Order 3)**, **Diagnosis (Bill Order 4)**, **Additional Billing Diagnosis** fields, add the necessary diagnosis codes.
8. Click **Save**.
9. A pop-up will appear, asking if the added diagnosis code(s) should be added to unreleased claims. Select the applicable response.



- If **Yes** is selected, the system will add the recently listed diagnosis code(s) to all the selected Recipient's unreleased claim(s).
- If **No** is selected, the system will save the listed diagnosis code(s) and will include the recently added diagnosis code(s) to all future claims for the selected Recipient.