

## Mobile Caregiver+ Quick Reference Guide Changing Rates in the Mobile Caregiver+ Provider Portal


EVV administrators using Mobile Caregiver+ have the option to override the default pay rate for each service code. **Rates can only be adjusted up to the max rate for the service.** A rate override is only necessary if a paid caregiver receives a rate less than the max rate for the service. The listing of max rates is available in each waiver Kentucky Administrative Regulation (KAR), except Supports for Community Living. Links are provided below.

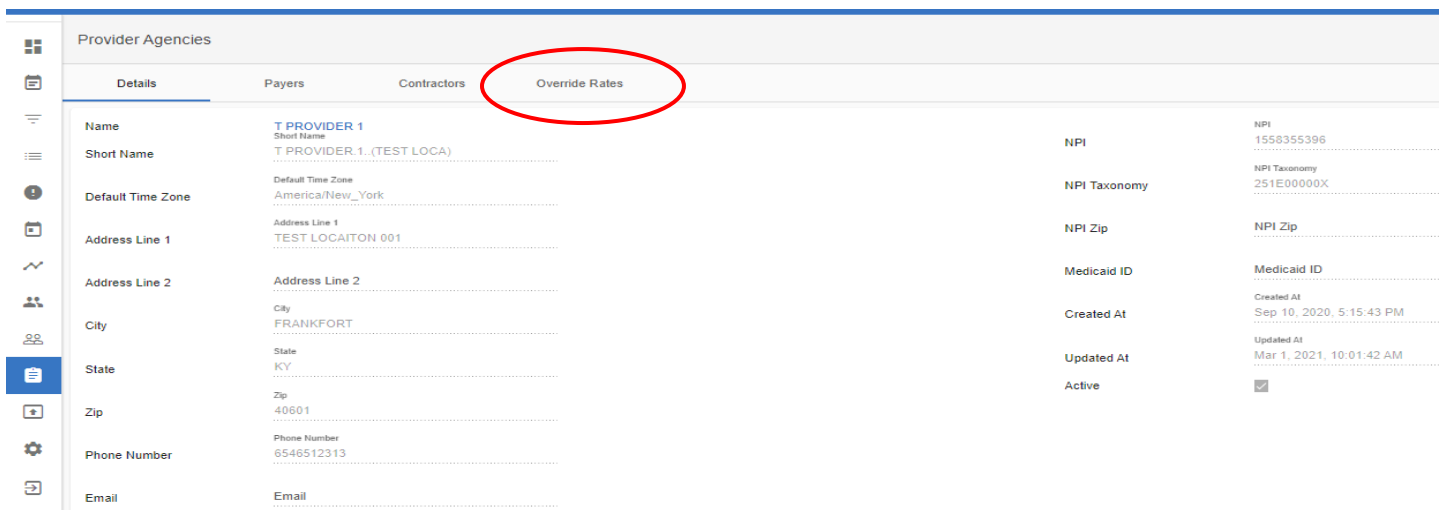
- Acquired Brain Injury – [907 KAR 3:100](#)
- Acquired Brain Injury Long Term Care – [907 KAR 3:210](#)
- Home and Community Based – [907 KAR 7:015](#)
- Michelle P. Waiver – [907 KAR 1:835](#)
- Supports for Community Living – [Provider Letter #A-53](#)

Rate overrides can be entered for several different types of situations.

If a rate override is entered for...	The rate will be paid to...
A service code only.	Any paid caregiver providing that service.
A service code and a specific paid caregiver.	The listed paid caregiver when providing that service.
A service code and a specific participant.	All of the participant's paid caregivers who provide that service.
A service code, a specific paid caregiver, and a specific participant.	The listed paid caregiver when providing that service to the listed participant.

### Entering a New Rate

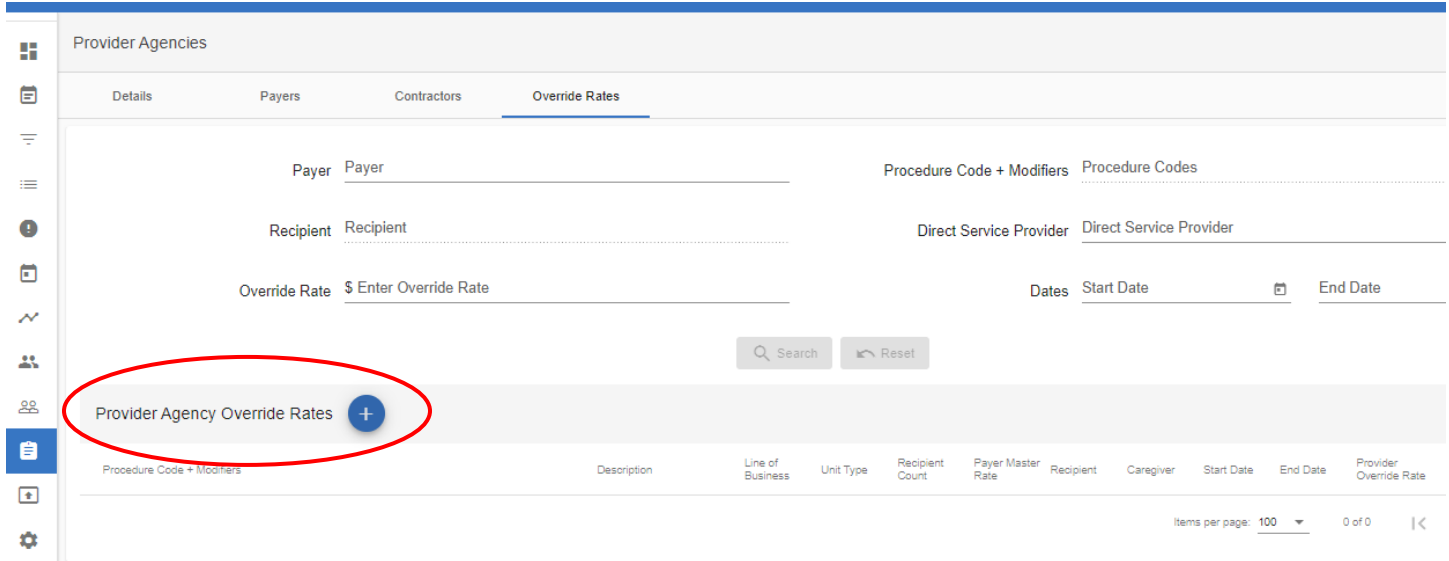
To override a rate, log into the [Mobile Caregiver+ Provider Portal](#). Select the **Provider Agency**  icon on the left side. Once the **Provider Agency** screen loads, select **Override Rates** at the top.



The screenshot shows the 'Provider Agencies' screen with the 'Override Rates' tab highlighted in red. The details for 'T PROVIDER 1' are visible, including fields for Name, Short Name, Default Time Zone, Address Line 1, Address Line 2, City, State, Zip, Phone Number, and Email. On the right side, there are fields for NPI, NPI Taxonomy, NPI Zip, Medicaid ID, Created At, Updated At, and Active status.

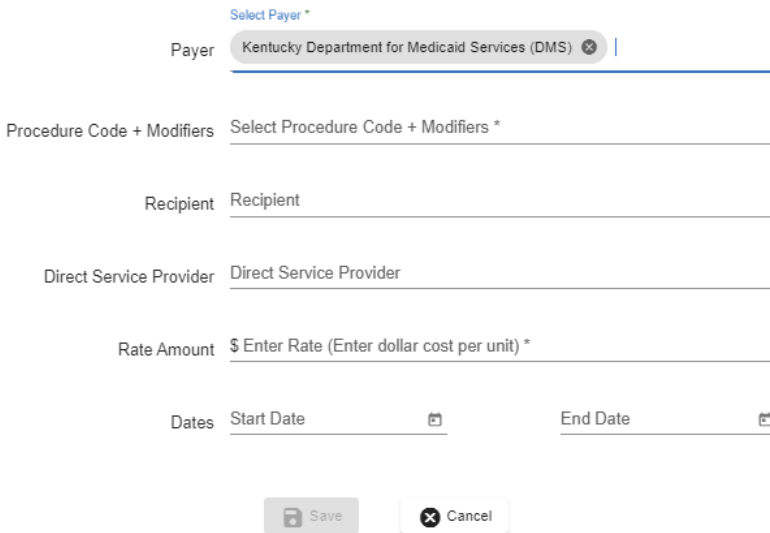
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Click the blue plus sign next to **Provider Agency Override Rates**.



The screenshot shows the 'Provider Agencies' section with tabs for 'Details', 'Payers', 'Contractors', and 'Override Rates'. The 'Override Rates' tab is active. Below the tabs, there are input fields for 'Payer', 'Procedure Code + Modifiers', 'Recipient', 'Direct Service Provider', 'Override Rate', 'Start Date', and 'End Date'. A search bar and a 'Reset' button are also visible. At the bottom, there is a table with columns: Procedure Code + Modifiers, Description, Line of Business, Unit Type, Recipient Count, Payer Master Rate, Recipient, Caregiver, Start Date, End Date, and Provider Override Rate. A red circle highlights the 'Provider Agency Override Rates' button with a blue plus sign.

### Add Provider Agency Override Rate



The form shows the following fields and values:

- Payer:** Select Payer \*  
Kentucky Department for Medicaid Services (DMS)
- Procedure Code + Modifiers:** Select Procedure Code + Modifiers \*
- Recipient:** Recipient
- Direct Service Provider:** Direct Service Provider
- Rate Amount:** \$ Enter Rate (Enter dollar cost per unit) \*
- Dates:** Start Date, End Date

Buttons: Save, Cancel

The **Add Provider Agency Override Rate** box will appear. Click the **Payer** field to populate Kentucky Department for Medicaid Services (DMS) as the payer.

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Add Provider Agency Override Rate

Select Payer \*

Payer

Select Procedure Code + Modifiers \*

Procedure Code + Modifiers

Recipient

Direct Service Provider

Rate Amount

Dates

Start Date  End Date

580 (-, -, -, -)
(I) Attendant Care
580 (-, -, -, -)
(M) Attendant Care
580 (-, -, -, -)
(N) Attendant Care
581 (-, -, -, -)
(I) Personal Care
582 (-, -, -, -)
(I) Homemaker

Once you have populated the payer field, choose the **Procedure Code + Modifier** from the dropdown menu. You'll notice there are letters next to each service code. The letters correspond to each waiver.

Waiver	Letter
ABI Acute – Traditional & PDS	F
ABI LTC – Traditional & PDS	J
HCB – ADHC and PDS	N
HCB Traditional	M
MPW – Traditional & PDS	I
SCL – Traditional & PDS	L

After a **Procedure Code + Modifier** is chosen, select a **Recipient** (participant) and/or **Direct Service Provider** (paid caregiver), and enter the **Rate Amount**. The amount entered is the cost per unit.

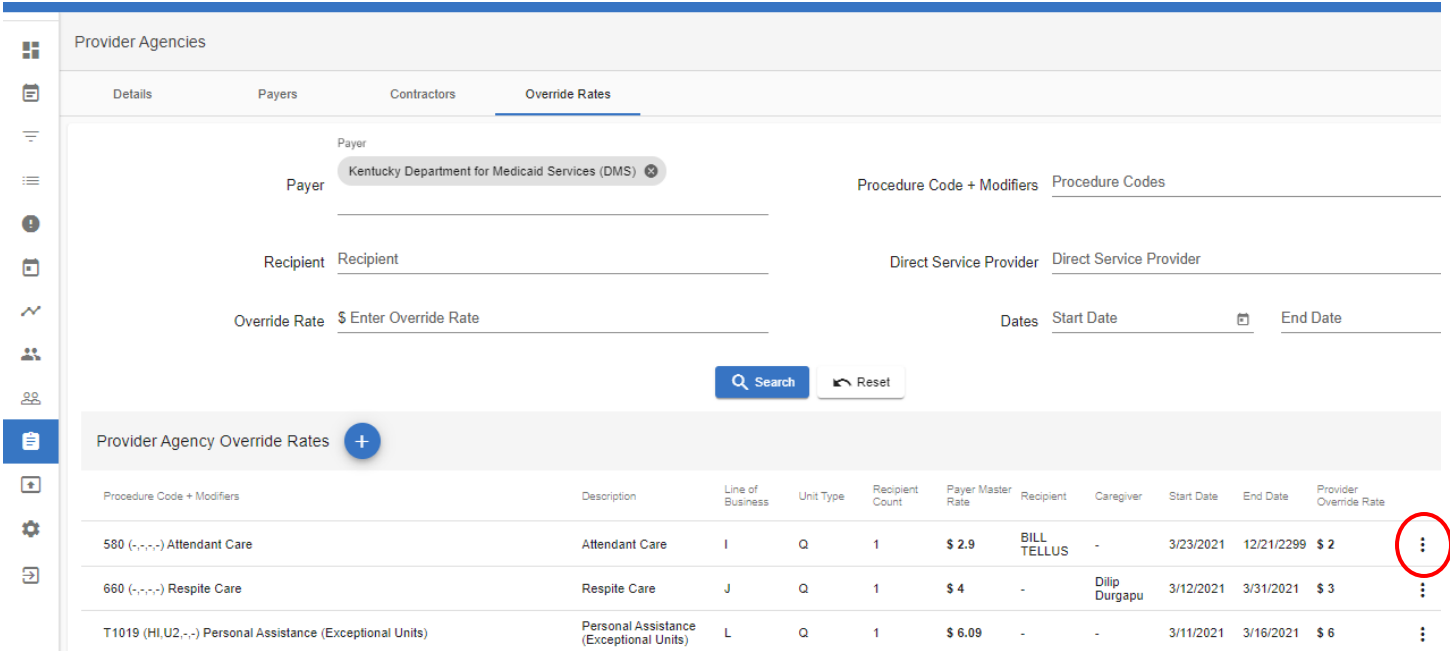
Finally, you must select a date range for when the rate is valid. The start date cannot be earlier than the date on which you are entering the rate because claims may already be paid. If there is no end date for the rate, enter 12/31/2299 as the end date. After you have entered all information in the required fields (**Procedure Code + Modifier**, **Start Date**, and **End Date**), the **Save** button will turn blue. Click it to save the override rate.

### Editing a Previously Entered Rate

To generate a list of previously entered override rates, select the **Provider Agency** icon on the left side of the [Mobile Caregiver+ Provider Portal](#). Once the **Provider Agency** screen loads, select **Override Rates** at the top. Click in the **Payer** field to populate Kentucky Department for Medicaid Services (DMS) as the payer. This will generate a list of all entered override rates. If you're looking for a specific rate, you can further refine your search using the **Procedure Code + Modifiers**, **Recipient**, **Direct Service Provider**, **Override Rate**, and/or the **Dates** fields.

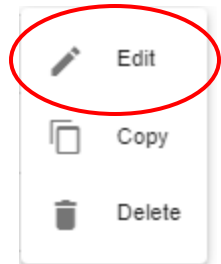
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Once you have found the rate you want to update, click the three dots to the right of the rate.



Procedure Code + Modifiers	Description	Line of Business	Unit Type	Recipient Count	Payer Master Rate	Recipient	Caregiver	Start Date	End Date	Provider Override Rate
580 (-,-,-) Attendant Care	Attendant Care	I	Q	1	\$ 2.9	BILL TELLUS	-	3/23/2021	12/21/2299	\$ 2
660 (-,-,-) Respite Care	Respite Care	J	Q	1	\$ 4	-	Dilip Durgapu	3/12/2021	3/31/2021	\$ 3
T1019 (HI,U2,-,-) Personal Assistance (Exceptional Units)	Personal Assistance (Exceptional Units)	L	Q	1	\$ 6.09	-	-	3/11/2021	3/16/2021	\$ 6

Clicking the dots will open a box. Select **Edit**. The **Edit Provider Agency Override Rate** box will open. From there, adjust the fields as needed and hit the blue save button when you are finished.



Edit Provider Override Rate

Select Payer  
Payer Kentucky Department for Medicaid Services (DMS)

Select Procedure Code + Modifiers  
Procedure Code + Modifiers 580 (-,-,-) (I) Attendant Care

Recipient  
Recipient BILL TELLUS

Direct Service Provider  
Direct Service Provider

Rate Amount  
Enter Rate (Enter dollar cost per unit) \*  
\$ 2

Dates  
Start Date 03/23/2021 End Date 12/21/2299

Save Cancel

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### **Additional Resources**



For additional electronic visit verification information, review the [EVV QRG – Who to Call](#), visit the [DMS EVV website](#), or scan the QR code to the left using your mobile device.

If your direct service provider agency or FMA has a technical issue with Netsmart EVV, you can submit a support ticket using the [Netsmart Customer Support Portal](#) or by calling Netsmart Customer Support at (833) 483-5587.

If you have a question about EVV policy, contact the 1915(c) Waiver Help Desk at [1915cWaiverHelpDesk@ky.gov](mailto:1915cWaiverHelpDesk@ky.gov) or (844) 784-5614.