



# QiRePort – Provider Portal Training

NCIA- Provider Training



October 2014

# Objectives

- **Inform** - Gain knowledge of a resource tool to assist in the management of servicing beneficiaries
- **Teach** - Understand how to utilize the tool for more efficient and effective management of servicing beneficiaries
- **Empower** - Become more empowered in the management of servicing beneficiaries

# What is QiRePort?

**QiReport** is an integrated web service designed to support the operation of the PCS program. PCS provider agencies access QiRePort to receive and acknowledge service referrals, view assessments, and submit electronic requests directly to the Independent Assessment Entity (IAE). QiRePort was developed and is hosted by VieBridge, Inc.



# What can I do with QiRePort?

## Provider Agencies utilize QiRePort to do the following:

- Receive service referrals and accept/reject them electronically
- Manage servicing beneficiaries' accounts, including access to historical assessments and PA's
- Submit Discharges
- Submit Change of Status Requests
- Manage servicing territories
- Update/Correct Modifiers
- Update NPI association

# How do I access QiRePort?

## Registration and Access Requires 3 Steps:



1. Have a registered NCID. For more information on NCID, visit <https://www.ncid.its.state.nc.us/>
2. Complete a Provider Registration Form and submit to Viebridge, Inc. via the following:  
**Fax:** 919-301-0765  
**Email:** [support@qireport.net](mailto:support@qireport.net)  
**Mail To:** 8130 Boone BLVD, STE 350, Vienna, VA 22182  
A registration form can be obtained by visiting <https://www.qireport.net>
3. Log in!

**Important:** Registration is now required for all PCS Providers.

## The Home Page allows you to do the following:

- Get up-to-date news regarding PCS under the announcements section
- Ask system related questions directly to Viebridge, Inc.
- Access Liberty Healthcare of North Carolina's web page for detailed information regarding PCS
- Access 'Frequently Asked Questions' about the provider portal and PCS

# Home Page

## Functionality on the Home Page:



Home | Referrals

Home

- Home
- Logoff
- Personal
- Logon Maintenance
- Information
- Learn More
- Frequently Asked Questions
- Getting Started
- Privacy Guidelines

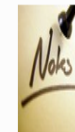
### Direct access to Liberty's webpage

Welcome Lyneka

#### Announcements

##### 8/20/2014 - October 2014 Provider Training

Liberty Healthcare of North Carolina and the Division of Medical Assistance will be presenting PCS program updates during the month of October. For more information on dates and locations, please view the schedule and locations [here](#).



##### 8/20/2014 - Discharging Beneficiaries

According to Clinical Policy 3L, section 5.4.5(c), "Providers shall report discharges to the IAE within 30 calendar days of the beneficiary discharge." For those who have a provider account setup in QiReport, you are able to save time and do your discharges right from the portal. [Click here to see the instructions for discharging beneficiaries.](#)

##### 8/14/2014 - Personal Care Services (PCS) Stakeholders - PCS Payment Adjustment Plan Webinar

The upcoming Payment Adjustment Plan webinar will provide additional details and the opportunity to ask questions. Registration is required.

Wednesday, **August 20, 2014 at 9:30am**. Please [click here](#) to register.

Webinar will be recorded and posted to the PCS Web page: [www.ncdhhs.gov/dma/pcs/pas.html](http://www.ncdhhs.gov/dma/pcs/pas.html)

##### 6/25/2014 - Personal Care Services (PCS) Program Highlights

Access to FAQ's about the portal and PCS

#### Give us your Feedback!

Have a Comment, Problem or a Suggestion? Tell us.

Send

Submit questions directly to Viebridge

Access important announcements

# Referrals

Access to all beneficiary information and account management can be found under the 'Referrals' tab

The screenshot displays the QiRePort web application. At the top, the logo "QiRePort" is visible. A navigation bar contains "Home" and "Referrals" tabs, with "Referrals" being the active tab. Below the navigation bar, the main content area is titled "Referrals / Notifications for Review". A table with the following columns is shown: Name, MID, Notification Type, Action Date, Provider No., Notification Letter, and Hours. On the left side, there is a vertical toolbar with several menu items: Referral Info, Referrals for Review, Accepted (last 1 year), Denials (last 6 months), Recipients w/ IA, Search Recipients, Recipient Summary, Change of Status Request, Discharge, Provider Number Change, Maintenance, Counties Served, and Legacy MPN Reference. A brown arrow points from the text "Access links are located in the left side toolbar" to the toolbar. Another brown arrow points from the text "Click the 'Referrals' tab to access beneficiary information" to the "Referrals" tab in the navigation bar.

QiRePort

Home | Referrals

Referrals

Referrals / Notifications for Review

Name	MID	Notification Type	Action Date	Provider No.	Notification Letter	Hours
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Access links are located in the left side toolbar

Click the 'Referrals' tab to access beneficiary information



## Referrals for Review

This page displays the list of beneficiaries who have selected your agency as a provider of choice and Liberty has submitted a request for services on their behalf.

From this page you can:

- Review the beneficiaries demographic information
- See the total amount of approved PCS hours
- Review the completed PCS assessment
- Accept/Reject a beneficiary for services

# Referral Info

## Referrals for Review, continued

**Referrals**

Referral for Acceptance Review

\* = Required [Print](#)

Recipient Data			
Recipient Name		Medicaid ID	
Address 1		Address 2	
City, State Zip		County	
Phone		DOB	
Gender		Status	

Requests for Independent Assessment				
Recipient Name	MID	Phone Number	Request Date	Request Type

Independent Assessments on file for Recipient			
Assessment Date	Comments	Assessment Type	Hours
<a href="#">4/25/2014</a>	<a href="#">[ comments ]</a>	Change of Status	39
<a href="#">5/7/2013</a>	<a href="#">[ comments ]</a>	Admission	39

Referral Decision *	-- select --
Comment	

Click here to access a copy of the assessment

Provider should select a response to request by selecting the appropriate response decision

Hours awarded is displayed here

Save

## Accepted (last 1 year)

This page displays the list of beneficiaries who have been accepted by your agency to provide PCS. From this page you can:

- Access notifications regarding the status of PCS for a beneficiary
- Review current approved hour totals
- Access historical assessments
- Review demographic information

# Referral Info

## Accepted (last 1 year), continued



Home | Referrals

### Referrals



#### Referrals Accepted/Reviewed Last 1 Year

Name	MID	Accept Date	Notification Type	Action Date	Provider No.	Notification Letter	Recipient Notice	Hours
		02/12/2014	Appeal Resolution	02/13/2014		[ letter ]	Not Available	0
		03/17/2014	Appeal Resolution	03/11/2014		[ letter ]	Not Available	0
		11/21/2013	Annual Assessment	11/11/2013		[ letter ]	[ letter ]	63
		03/20/2014	Annual Assessment	03/20/2014		[ letter ]	[ letter ]	80
		06/04/2014	Appeal Resolution	06/04/2014		[ letter ]	Not Available	0
		02/05/2014	Annual Assessment	02/05/2014		[ letter ]	[ letter ]	80
		09/15/2014	MOS	09/09/2014		[ letter ]	[ letter ]	80
		08/21/2014	Change of Status	08/21/2014		[ letter ]	[ letter ]	77
		07/07/2014	Annual Assessment	07/03/2014		[ letter ]	[ letter ]	80
		08/25/2014	Annual Assessment	08/25/2014		[ letter ]	[ letter ]	80



Displays notification type



Click active link to access notifications



See total hrs

# Referral Info

## Accepted (last 1 year) – Select a beneficiary to access their assessments



Home | Referrals

Referrals

### Recipient Summary

Recipient Data	
Recipient Name	Medicaid ID
Address 1	Address 2
City, State Zip	County
Phone	DOB
Gender	Status

### Requests for Independent Assessment

Recipient Name	MID	Phone Number	Request Date	Request Type
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### Independent Assessments on file for Recipient

Assessment Date	Comments	Assessment Type	Hours
<a href="#">1/9/2012</a>	<a href="#">[ comments ]</a>	Annual Review	0
<a href="#">1/26/2011</a>	<a href="#">[ comments ]</a>	Change of Provider	37



Click date to access assessment



Displays assessment type



Displays total hours

## Denials (last 6 months)

This page displays almost identical to the 'Accepted (last 1 year) page. The 'Denials' page provides a list of beneficiaries who have been accepted by the provider agency but since denied PCS. From this page you can:

- Access notifications regarding the denial of PCS for a beneficiary
- Review current approved hour totals
- Access historical assessments
- Review demographic information

## Search Recipients/Recipient Summary

The 'Search Recipients' link allows you to search for a particular beneficiary and access the following:

- Review demographic information
- Review the request entry entered by the IAE
- Review current approved hour totals
- Access historical assessments

# Recipients w/IA

## Recipient Summary, continued



Home | Referrals

Referrals

### Recipient Summary

#### Recipient Data

Recipient Name	[REDACTED]	Medicaid ID	[REDACTED]
Address 1	[REDACTED]	Address 2	[REDACTED]
City, State Zip	[REDACTED]	County	[REDACTED]
Phone	[REDACTED]	DOB	[REDACTED]
Gender	[REDACTED]	Status	[REDACTED]

#### Requests for Independent Assessment

Recipient Name	MID	Phone Number	Request Date	Request Type
[REDACTED]	[REDACTED]	[REDACTED]	11/12/2013	Change of Status
[REDACTED]	[REDACTED]	[REDACTED]	12/10/2010	Change of Provider

Can review request entries entered by the IAE

#### Independent Assessments on file for Recipient

Assessment Date	Comments	Assessment Type	Hours
<a href="#">12/3/2013</a>	<a href="#">[ comments ]</a>	Change of Status	80
<a href="#">1/8/2013</a>	<a href="#">[ comments ]</a>	Annual Review	52
<a href="#">1/10/2012</a>	<a href="#">[ comments ]</a>	Annual Review	80
<a href="#">1/26/2011</a>	<a href="#">[ comments ]</a>	Change of Provider	51



## Change of Status Request

The 'Change of Status (COS) Request' link allows the provider to submit an electronic COS request form directly to the IAE as well as access historical requests submitted and review the status of approval.

**Important:** Physician attestation cannot be submitted through this link



Review historical requests and the approval status

Referrals

Home | Referrals

Change of Status Requests for [Redacted]

Request Date	Request Type	PCP Name	Complete Date	Disposition
<a href="#">11/12/2013</a>	Change of Status	[Redacted]	11/12/2013	Accepted

Add

Click the 'Add' button to submit a new request. Complete the request form and hit 'save'.

## Discharge

In accordance of Clinical Policy 3L, providers are expected to discharge a beneficiary no longer under their care, within 30 days. Discharge submission can be completed electronically through the provider portal.

The screenshot shows the QiRePort provider portal interface. At the top left is the QiRePort logo. A navigation bar contains 'Home' and 'Referrals'. Below the navigation bar, the page title is 'Referrals'. On the left side, there is a help icon and a legend: '\* = Required'. The form fields are: Last Name, First Name, Medicaid Id, Date of Birth, Provider Name/Number \*, Discharge Date \*, and Discharge Reason \*. On the right side, there is a 'Discharge for' field with a redacted name, a large redacted area for the discharge date and reason, a date picker, a dropdown menu with '-- select --', and a 'Save' button. A red arrow points from the text 'Enter the discharge date, most appropriate reason and hit 'save' to submit discharge to IAE' to the dropdown menu.

QiRePort

Home | Referrals

Referrals

Discharge for [Redacted]

\* = Required

Last Name

First Name

Medicaid Id

Date of Birth

Provider Name/Number \*

Discharge Date \*

Discharge Reason \*

Enter the discharge date, most appropriate reason and hit 'save' to submit discharge to IAE

## Billing Modifier Change – ACH Only

For ACH facilities, the ability to manage modifier codes for each beneficiary is available in the provider portal. After selecting the appropriate beneficiary, select the 'Billing Modifier Change' link.



Home | Referrals

Referrals

Billing Modifier Change for [REDACTED]

\* = Required

Recipient Data	
Recipient Name	[REDACTED]
Address 1	[REDACTED]
City, State Zip	[REDACTED]
Phone	[REDACTED]
Gender	[REDACTED]
Medicaid ID	[REDACTED]
Address 2	[REDACTED]
County	[REDACTED]
DOB	[REDACTED]

Current Modifier

New Modifier \*

← Select appropriate modifier here and hit 'save'.

## Provider Number Change

If a provider has multiple locations or manage multiple NPI's, they have the ability to manage the associated NPI's to their serviced beneficiaries under the 'Provider Number Change' link.



\* = Required

Last Name	
First Name	
MID	
Old Provider Number *	
New Provider Number *	Select the appropriate NPI and the effective date and hit 'Save'.
Effective Date *	

Save

## Counties Served – IHC Only

Every beneficiary is provided a ‘Random Provider List’ during the time of assessment. This list only includes providers who have indicated they service the county the beneficiary resides in. The ‘Counties Served’ link allows providers to identify the counties they serve.



Home | Referrals

Referrals



Counties Served by Provider Office

Provider Name	License No.	# Counties
[Redacted]		13

Indicates how many counties currently serving



# Maintenance

## Counties Served, continued

After selecting your provider agency name, a page will display listing all individual counties. This page allows you to delete or add counties as appropriate.

**QiRePort** Home | Referrals

Referrals

Counties Service by Office

\* = Required

Provider Name [Redacted]

Provider No. [Redacted]

County	Effective Date	End Date	
BLADEN	4/1/2010		[edit]
CUMBERLAND	4/1/2010		[edit]
DUPLIN	4/1/2010		[edit]
HARNETT	4/1/2010		[edit]
HOKE	4/1/2010		[edit]
JOHNSTON	4/1/2010		[edit]
LEE	4/1/2010		[edit]
MOORE	4/1/2010		[edit]
PENDER	4/1/2010		[edit]
RICHMOND	4/1/2010		[edit]
ROBESON	4/1/2010		[edit]
SAMPSON	4/1/2010		[edit]
SCOTLAND	4/1/2010		[edit]

Add County Save

↑ Add a new county here

# Additional Questions?

**For any additional questions  
regarding the use of QiRePort,  
please contact Viebridge at  
888-705-0970.**



**THANK YOU FOR YOUR INTEREST IN  
QiRePort and the Provider Portal.**