

Frequently Asked Questions about Medicaid Expansion in Nebraska

On November 6, 2018, Initiative 427 was passed by a vote of Nebraska’s citizens. The ballot initiative expands the Medicaid population to Nebraskans under the age of 65 whose income is at or below 138 percent of the federal poverty level.

Nebraska Medicaid is working with the Heritage Health plans and other stakeholders on establishing and expanding the infrastructure to meet the requirements set out in the measure.

At this time, the Medicaid population and business processes remain as they were prior to the ballot measure being passed.

Below are some question you might have about the expansion of Medicaid in Nebraska. Additionally, in September, Nebraska Medicaid released a document outlining the implementation and cost of Medicaid expansion in Nebraska. This document is available at: <https://tinyurl.com/ybaldycn>.

If you have questions not listed below, please direct them to DHHS.MedicaidExpansionQuestions@nebraska.gov.

<p>What is Medicaid Expansion? / What is Initiative 427?</p>	<p>A majority of participating Nebraskans voted in favor of Initiative 427, which expands Medicaid eligibility to able-bodied Nebraska residents, ages 19 to 64, whose income is at or below 138 percent of the federal poverty level. In 2019, this is an annual income of \$17,236.20 for an individual and \$35,535 for a household of four.</p>
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<p>When can newly eligible people sign up?</p>	<p>DHHS will begin to accept applications from expansion-eligible Nebraskans starting on August 1, 2020. Benefits will begin for eligible Nebraskans on October 1, 2020. Nebraska Medicaid and the Heritage Health plans are currently building the systems, seeking federal approvals, and building the provider networks necessary to expand Medicaid.</p> <p>You might already qualify for Medicaid or be eligible for coverage on the health insurance marketplace. Please go to www.ACCESSNebraska.ne.gov for more information.</p>
<p>What timeline did the bill set?</p>	<p>The initiative stated that Nebraska Medicaid was to file a state plan amendment (SPA) with the federal Centers for Medicare and Medicaid Services on or before April 1, 2019. Nebraska Medicaid timely met this requirement.</p> <p>The drafting and submission of documents like a SPA is only one part of implementing Initiative 427. Other considerations include:</p> <ul style="list-style-type: none"> • Contract amendments with every existing Heritage Health plan; • Changes to state regulation; • Hiring and training of staff; and • Changes to existing information technology systems.
<p>Will Medicaid now cover undocumented immigrants?</p>	<p>No. Undocumented immigrants remain ineligible, except for some emergency services on a limited basis.</p>
<p>I am in a newly eligible group – what should I do next?</p>	<p>You should continue to obtain healthcare services in the way that you currently do until the Medicaid expansion program is implemented.</p>
<p>Will the eligibility process change for this group?</p>	<p>In order for eligibility to be determined, an individual must complete a Medicaid application, which is available online, by phone, or on paper. This process is not changing.</p>

<p>How much is this going to cost Nebraska taxpayers?</p>	<p>Medicaid expansion under the provisions of the Patient Protection and Affordable Care Act of 2010 is funded 90 percent by the federal government and 10 percent by state funds. Nebraska Medicaid has determined the complete fiscal impact to DHHS through state fiscal year 2029 will increase expenditures by \$5.5 billion, \$669.89 million of that figure coming from state funds.</p>
<p>How do I know if I'm already in an eligible population?</p>	<p>Medicaid is a joint federal and state program that traditionally pays for health care for persons with disabilities, the aged, and low-income children and families. Current federal law requires certain services and populations to be covered: poverty-related infants, children, pregnant women, low-income families, elderly and disabled individuals receiving Supplemental Security Income, certain working individuals with disabilities, certain low-income Medicaid enrollees, children with Title IV-E adoption assistance, foster care or guardianship care and children aging out of foster care.</p> <p>Initiative 427 elects the federal option to expand Medicaid to able-bodied Nebraskans, ages 19 to 64, who meet all necessary eligibility requirements.</p>
<p>How many people are newly eligible? How many people were already on Medicaid?</p>	<p>MLTC estimates that there will be about 93,000 Nebraskans newly eligible. In total, about 240,000 Nebraskans currently receive Medicaid.</p> <ul style="list-style-type: none"> • Children comprise 66.8 percent of the current eligible persons by category • Blind and disabled Nebraskans comprise 14.7 percent • the Aged, 7.7 percent • Parent/caretaker relatives, 10.8 percent <p>Regarding expenditures for each group, 26.8 percent is spent on children, 43.2 percent on the blind and disabled, 21.7 on the aged and 8.3 percent on parent/caretaker relatives.</p>

<p>When determining eligibility, are income levels gross or net?</p>	<p>Income for Medicaid expansion eligibility is based upon a person's modified adjusted gross income. To determine this amount, start with your gross income, which is your total taxable income. If you have multiple income streams, add them all together to get your total income. Taxable income may include wages, salaries, or bonuses.</p> <p>You may also be receiving income that is not considered taxable. You do not have to include this income when applying for Medicaid. Types of non-taxable include may include child support, gifts, veterans' benefits, insurance proceeds, beneficiary payments, TANF payments, injury payments, relocation pay, workers' compensation, federal income tax refunds, and SSI payments.</p>
<p>Are college students eligible if they're self-supporting?</p>	<p>College students may be eligible if they meet all necessary Medicaid eligibility requirements including residency, income, citizenship, and immigration.</p>
<p>What services are required by federal law?</p>	<p>Services that are mandatory under federal law include inpatient and outpatient hospital services, laboratory and x-ray services, nursing facility services, home health services, nursing services, clinic services, physician services, medical and surgical services of a dentist, nurse practitioner and nurse/midwife services, pregnancy-related services, medical supplies and early and periodic screening and diagnostic treatment for children.</p>
<p>What services will be available through Medicaid expansion?</p>	<p>For able bodied adults in the expansion group, there will be two benefit packages available, Basic and Prime. The Basic benefits package includes all state plan services, with the exception of dental, vision, and over-the-counter drug coverage, which members can earn in the Prime benefits package.</p>

<p>How does someone earn prime coverage?</p>	<p>Members have the opportunity to earn Prime benefits by completing certain wellness and personal responsibility activities, which consist of picking a primary care provider and attending an annual health visit, participating in active care and case management, and fulfilling community-engagement activities.</p>
<p>How much is the administrative burden on Nebraska state government going to be?</p>	<p>The 90/10 matching rate is only available for medical services to the expanded population and IT development. Other administrative costs are matched by the federal government at 75/25 or 50/50.</p> <p>The requirements of Initiative 427 require a significant increase in staff. Not only will additional staff be required to handle the new regulatory requirements of the expanded Medicaid population, but new staff is also being hired to handle eligibility determinations and questions regarding benefits from the public. The recruitment and training of this additional staff is a significant factor in the timeline for implementing Initiative 427.</p> <p>By State Fiscal Year 2029, it is estimated 95 additional staff will be required if the state's economic condition remains stable. The general fund estimated cost for new staff will be \$26,036,313 for the full 10-year analysis. The total fund cost will be \$52,072,627.</p>
<p>Where can we find a copy of the legislation/ ballot measure about Medicaid expansion?</p>	<p>http://www.sos.ne.gov/elec/2018/pdf/medicaid-expansion-petition.pdf</p>
<p>Does the ballot measure need action from the legislature to implement the ballot measure?</p>	<p>Implementation and operation of Medicaid expansion requires ongoing appropriations from the Nebraska Legislature.</p>

<p>Is the Medicaid expansion linked to work and community engagement requirements?</p>	<p>Expanded Medicaid will include a community-engagement requirement, beginning in 2021. There is no work requirement. Choosing not to participate in community-engagement activities means an individual receives the Basic benefits package of services. No one will lose Medicaid coverage who chooses not to participate. To earn additional, Prime benefits, able-bodied adults in the expansion group will need to participate in certain activities, such as post-secondary education, working, or volunteering, for a combined total of at least 80 hours per month.</p>
<p>Was the plan submitted to CMS? Is CMS approval required to move forward?</p>	<p>Nebraska Medicaid submitted its state plan amendments and demonstration-waiver concept paper to CMS on April 1, 2019. In order to receive federal matching funds, the Medicaid expansion program must be approved by CMS. Nebraska Medicaid will submit its 1115 demonstration-waiver application in December 2019.</p>
<p>What is an 1115 Waiver?</p>	<p>An 1115 waiver is a waiver approved by the federal government that allows state Medicaid programs to waive certain federal rules surrounding Medicaid to create an innovative program that improves health outcomes. Nebraska is in the process of applying for an 1115 waiver as part of building our expanded Medicaid program. Benefit tiers are one example of an innovation Nebraska is building with the waiver.</p>