

Revision: HCFA-AT-80-38
0193

(BPP)

OMB No. 0938-

May 22, 1980

State/Territory: Nebraska

Citation

1.2 Organization for Administration

42 CFR 431.11
AT-79-29

- (a) ATTACHMENT 1.2-A contains a description of the organization and functions of the Medicaid agency and an organization of the agency.
 - (b) Within the State agency, the Division of Medicaid & Long-Term Care has been designated as the medical assistance unit. ATTACHMENT 1.2-B contains a description of the organization and functions of the medical assistance unit and an organization chart of the unit.
 - (c) ATTACHMENT 1.2-C contains a description of the kinds and numbers of professional medical personnel and supporting staff used in the administration of the plan and their responsibilities.
 - (d) Eligibility determinations are made by State or local staff of an agency other than the agency named in paragraph 1.1(a). ATTACHMENT 1.2-D contains a description of the staff designated to make such determinations and the functions they will perform.
- Not applicable. Only staff of the agency named in paragraph 1.1(a) make such determinations.

TN No. MS-07-05

Supersedes

Approval Date Nov 29 2007

Effective Date Jul 1 2007

TN No. MS-97-6