




## PROVIDER BULLETIN

No. 19-06

DATE: February 11, 2019

TO: All Providers Participating in Nebraska Medicaid Program

FROM: Matthew A. Van Patton, DHA, Director  
Division of Medicaid & Long-Term Care 

BY: Danny Vanourney, Provider Relations Program Manager  
Division of Medicaid & Long-Term Care

RE: Provider Enrollment Five Year Revalidation Process

The purpose of this provider bulletin is to notify providers about changes to the provider enrollment revalidation process effective January 31, 2019. Per 471 NAC 2-001.02D and 42 CFR 455.414, the Department must revalidate the enrollment of all providers every 5 years.

Beginning 1/31/19, providers who are in a revalidation period (within 6 months prior to the revalidation due date) will be subject to the following regarding the revalidation of their Medicaid provider enrollment:

- Providers will begin receiving revalidation notifications every 30 days starting 6 months prior to the expiration of their provider enrollment.
- Providers who are currently in a revalidation period at the time of implementation (1/31/19) will receive revalidation notices based on their revalidation date (i.e. a provider who is 60 days away from their revalidation date at time of implementation on 1/31/19 will receive a 60 day revalidation notice on 1/31/19 and a 30 day notice a month after).
- Providers who are completing updates to their provider agreement within 6 months of their revalidation due date will be required to complete the revalidation of their provider enrollment as part of that update.
- All required attestations, updates, group member confirmations (when applicable), and other required action must be completed in their entirety in order for the revalidation to be completed.

- If revalidation is not completed (completed meaning Service Provider Agreement has been submitted and all required screenings have been completed) by the revalidation date, the provider enrollment will be closed.
- Providers who do not revalidate by their due date must start the enrollment process over and may have a gap in enrollment. Note: This may also impact other agreements including the electronic trading partner agreement for claim submission and the receipt of Medicaid Remittance Advices.
- Payment for fee-for-service claims and managed care claims will be impacted for providers who do not revalidate by their revalidation due date.

Questions concerning this bulletin should be directed to Maximus at [nebraskamedicaidpse@maximus.com](mailto:nebraskamedicaidpse@maximus.com) or 1-844-374-5022.

Medicaid Provider Bulletins, such as this one, are posted on the DHHS website at [http://dhhs.ne.gov/medicaid/Pages/med\\_pb\\_index.aspx](http://dhhs.ne.gov/medicaid/Pages/med_pb_index.aspx). The “Recent Web Updates” page will help you monitor changes to the Medicaid pages.