

FREQUENTLY ASKED QUESTIONS

Who is eligible for Nebraska Medicaid?

- Nebraska Medicaid pays for medical services for certain individuals with low incomes, including parents and their children, pregnant women, and people who are aged, blind, or disabled. To receive medical benefits you must apply for Medicaid and meet specific eligibility requirements.

How do I apply for Nebraska Medicaid?

- To apply for Nebraska Medicaid you may either fill out an application online by visiting ACCESSNebraska.ne.gov or you may call one of the numbers listed below and request a paper application that you may submit by mail.

Medical Eligibility

Customer Service Contact:

Call (855) 632-7633

In Lincoln (402) 473-7000

In Omaha (402) 595-1178

8:00 am - 5:00 pm Monday thru Friday

If I have a question about my Nebraska Medicaid application who should I contact?

- You may visit ACCESSNebraska.ne.gov or speak to a caseworker by calling one of the numbers listed below.

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Customer Service Contact:

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What is the Affordable Care Act?

- The Affordable Care Act (ACA) is a federal law passed in 2010. Under this law, most U.S. citizens and legal residents will be required to have health care coverage by January 1, 2014. Under the ACA, eligibility for Nebraska Medicaid will qualify as acceptable health care coverage.

How will the Affordable Care Act affect the rules for Nebraska Medicaid eligibility?

- Under the ACA, there will be new income rules for parents, children, and pregnant women beginning January 1, 2014. The eligibility guidelines for individuals who are aged, blind, or disabled will not change. More information will be available in October.

How will the Affordable Care Act affect the application for Nebraska Medicaid?

- Beginning October 1, 2013, a new application will be available for Nebraska Medicaid. This application can be used to apply for Medicaid benefits or for other insurance affordability programs such as Qualified Health Plans or Advanced Premium Tax Credits. However, the current paper application for Nebraska Medicaid will be accepted through the end of December, 2013.

What if I am already receiving benefits from Nebraska Medicaid?

- If you have already been determined eligible for Medicaid benefits, you do not need to reapply. You must continue to comply with the requirements of the program and report changes that could affect your eligibility.

What does “No Wrong Door” mean?

- Beginning October 1, 2013, there will be several ways to apply for Medicaid and insurance affordability programs such as Qualified Health Plans or Advanced Premium Tax Credits. An individual may apply for Medicaid or health insurance through Nebraska DHHS or through the Federal Health Insurance Marketplace (by visiting Healthcare.gov). An application can be completed in person, by a telephone call, by mailing in an application, or by completing an application online.

What can I do if I am not eligible for Nebraska Medicaid but I need to find health insurance coverage?

- Visit Healthcare.gov to learn more about your options for health care coverage. Depending on your income and family size you may qualify for private health insurance, possibly with premium tax credits that may help to reduce your monthly costs for coverage.

How can I learn more about the federal Health Insurance Marketplace?

- To learn more about your health care coverage options through the federal Marketplace, visit Healthcare.gov or call 1-800-318-2596 (TTY: 1-855-889-4325). Beginning October 1, 2013, you may complete an application through the Marketplace to apply for Medicaid, a Qualified Health Plan, or Advanced Premium Tax Credits.

What is the relationship between Nebraska Medicaid and the federal Marketplace?

- Beginning October 1, 2013, Nebraska Medicaid and the federal Health Insurance Marketplace will communicate with one another regarding new applications for Medicaid and Qualified Health Plans. When NE DHHS receives an application for health care coverage and determines the person is not eligible for Nebraska Medicaid, the application will be forwarded to the federal Marketplace to determine if the person is eligible for other insurance affordability programs. Similarly, if the federal Marketplace receives an application for enrollment in a Qualified Health Plan, but assesses that the person may be eligible for Nebraska Medicaid, the application will be forwarded to NE DHHS. NE DHHS, not the Marketplace, will determine eligibility for Nebraska Medicaid.

How can I apply for Economic Assistance Programs such as SNAP (formerly known as Food Stamps), Aid to Dependent Children (ADC) and Child Care?

- Beginning January 1, 2014, you will have to complete a separate application if you would like to apply for an assistance program other than Medicaid. Visit DHHS.ne.gov and click on the Children & Family Services tab to view information on assistance programs under Economic & Family Support.