



PROVIDER BULLETIN

No. 07-09

04/10/2007

TO: Podiatrists participating in the Nebraska Medicaid Program

FROM: Mary Steiner, Administrator
Nebraska Medicaid

BY: Jane Athey, Program Specialist
Podiatry Services

RE: Medicare Explanation of Benefits (EOB) Requirement

Please share this information with billing staff.

Effective Date: 5/1/2007

In an effort to assure services are billed to Medicare as primary payer and to establish a consistent billing process, a Medicare EOB will be required when billing for all podiatrist services for dual eligible Medicare/ Nebraska Medicaid clients. Nebraska Medicaid will no longer accept any podiatry claim for a dual eligible Medicare/Medicaid client without an EOB from Medicare. The effective date for this change will be 5/1/2007.

All current Nebraska Medicaid Fee Schedules can be viewed on the HHSS web site at the following site: www.hhss.ne.gov/med/medindex.htm .

For regulations, updates and printable forms, please check the Health and Human Services website at www.hhss.ne.gov/reg/t471.htm.

For questions regarding Nebraska Medicaid Podiatry Services, please contact Jane Athey at (402) 471-9119.

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