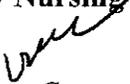


# PROVIDER BULLETIN

NO. 10-06

Date: February 25, 2010

TO: Nebraska Medicaid **Home Health Service** Providers  
Nebraska Medicaid **Private-Duty Nursing Service** Providers

FROM: Vivianne M. Chaumont, Director   
Division of Medicaid & Long-Term Care

BY: Gaylene Jeffries, RN Program Specialist

RE: Change in Medicaid Utilization Control and Quality Management Review Services

The Nebraska Department of Health and Human Services Division of Medicaid and Long-Term Care has contracted with Qualis Health, a Quality Improvement Organization (QIO), to perform utilization control and quality management review services for Nebraska Medicaid clients not enrolled in a Managed Care Organization (MCO), effective April 1, 2010. These reviews, commonly known as prior authorization reviews, were previously performed by Medicaid staff.

The advantages of this change to Medicaid clients and providers are expected to include quicker review and response times; improved consistency in authorization of services; increased provider education and assistance with initiating secure electronic exchange of client information; and improved efficiency of operation. The advantages to the Department are expected to include improved access to accurate and reliable data on which to base policy decisions and to respond to questions regarding service utilization and quality management.

You will receive additional information directly from Qualis Health, under separate cover. Qualis Health may be contacted at:

Qualis Health  
301 South 13<sup>th</sup> Street, Suite 220  
Lincoln, Nebraska 68508  
Phone: 877-560-2618  
Fax: 877-560-2619  
Website: [www.qualishealth.org](http://www.qualishealth.org)

The current policies and procedures governing the Nebraska Medical Assistance Program (Medicaid) will remain in effect.

If you have questions regarding this bulletin, please contact Gaylene Jeffries at 402-471-9415 or [gaylene.jeffries@nebraska.gov](mailto:gaylene.jeffries@nebraska.gov)