

PROVIDER BULLETIN NO. 10-41

Date: August 24, 2010

TO: Medicaid Providers of Nursing Facility Services

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

BY: Rosemary Stubbendeck, RN Program Specialist

RE: **Change in MC-10 Process for initiating changes to Medicaid payment authorization of nursing facility services**

Currently, nursing facility staff report Medicaid authorization changes to the client's caseworker, who then completes and sends a Form MC-10 to DHHS Central Office. Effective October 1, 2010, in order to improve the efficiency and timeliness of this process, nursing facility staff should begin reporting nursing facility authorization changes using the ACCESSNebraska web portal and the 'Report Changes: Other' screens to submit the relevant client information, reason for the authorization change and effective date. DHHS caseworkers will then receive an alert instructing them to view the client's information in NFOCUS.

Nursing facility staff should notify DHHS caseworkers of changes to Medicaid payment authorization, including nursing facility admissions and discharges (e.g. home, alternate facility, hospice); hospital stays that exceed the fifteen (15) day bedhold; and changes in payment sources (e.g. Medicare, private insurance). When a DHHS Caseworker is notified of a change to a client's nursing facility status that requires a change in payment authorization to be made by Central Office, he or she will send an email notification to Medicaid.

This process does not replace the process (MC-9NF) to authorize Medicaid nursing facility payment. Nursing facilities should continue to send this information directly to Medicaid Central Office.

A Manual that provides information for nursing facility staff on how to use this process is posted on the DHHS website at: <http://www.dhhs.ne.gov/med/phnf.htm>

If you have questions regarding this Memo, please contact Rosemary Stubbendeck at 402-471-9384 or rosemary.stubbendeck@nebraska.gov