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All Dental Providers Participating in Nebraska Medicaid Program

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Dental Benefits Managed Care Program; Contracting and Credentialing

Please share this information with administrative, clinical, and billing staff.

The Department of Health and Human Services, Division of Medicaid and Long-Term Care (MLTC) and Managed Care of North America Insurance Company (“MCNA”), the new Dental Benefits Manager (DBM), continue to prepare for implementation of the new dental services delivery system. MCNA begins operations on October 1, 2017. MCNA will handle claims payment, prior authorizations, and work with providers and Medicaid clients to coordinate dental care.

Beginning October 1, 2017, almost all of the Medicaid population eligible for dental services will be members of MCNA’s dental plan. Providers must contract and credential with MCNA to continue to serve these members and receive reimbursement for services provided. Please note, only providers enrolled with Nebraska Medicaid are eligible to contract and credential with MCNA. It is important to note that when contracting and credentialing with a Nebraska Medicaid managed care organization, providers must use the same identifying information that was used to enroll with Nebraska Medicaid.

Providers may visit http://www.mcnane.net to enroll in MCNA’s network. At the website, providers can create an account to enroll online or find the necessary forms to complete and submit by fax, e-mail, or mail. MCNA’s provider manual is posted to the above website, as well as dhhs.ne.gov/dbm. The provider manual can also be directly accessed at: http://manuals.mcna.net/nebraska.

Please utilize the contact information included below for questions and concerns related to contracting and credentialing with MCNA:

This guidance document is advisory in nature but is binding on an agency until amended by such agency. A guidance document does not include internal procedural documents that only affect the internal operations of the agency and does not impose additional requirements or penalties on regulated parties or include confidential information or rules and regulations made in accordance with the Administrative Procedure Act. If you believe that this guidance document imposes additional requirements or penalties on regulated parties, you may request a review of the document.
MLTC will encourage the DBM to contract with all interested and willing providers, but it will be up to the provider and MCNA to negotiate and agree upon the terms of their contract.

Providers may visit [dhhs.ne.gov/medicaid](http://dhhs.ne.gov/medicaid) to find information related to enrolling as a Nebraska Medicaid provider. Maximus is responsible for provider screening and enrollment. Providers can find Maximus’ website at [http://www.nebraskamedicaidproviderenrollment.com](http://www.nebraskamedicaidproviderenrollment.com), which includes provider education and training resources as well as a provider portal for enrollment.

If you have questions regarding this bulletin, please contact the Department via email at [dhhs.dbm@nebraska.gov](mailto:dhhs.dbm@nebraska.gov).

DHHS posts Medicaid Provider Bulletins, such as this one, on our 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.

MLTC will also post this Provider Bulletin at [http://dhhs.ne.gov/DBM](http://dhhs.ne.gov/DBM), which is the dedicated DBM website. Please check that website regularly to keep current with the DBM’s progress.