NEBRASKA
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DEPT. OF HEALTH AND HUMAN SERVICES

Jim Pillen, Governor

05.06.26 - NE Tribal/Medicaid Monthly Call Agenda

Conference Access Number **+1-408-418-9388**

Access Code- **2495 538 5383**

Present: Adam Proctor, Amber Draper, Andrea Herrera, Becky Crase, Betha/Winnebago, Chasity Davis, Courtney Edwards, Cynthia, Cynthia Gillaspie, Jacquelyn Urban, Jonathan Rich, Jacob Kawamoto, Keith Morrow, Ken Powell, Leah Belgrade, Lori Busboom, Nancy Mackey, Tracy Nelson, Aaron Reece, Bailey Reigle, Robyn Salerno, Tashina Provost, Theresa, Tim Easton, Tonya Yale, Tuesday Kuhlman, Kendra Wiebe, Michelle/Ponca, Vietta Swalley

SPA/Waiver Updates

- SPA
    - NE 26-0002: Community Engagement
        - Effective May 1, 2026, Nebraska Medicaid will begin enforcing work requirements for new applicants and existing Medicaid members under the Medicaid adult expansion group.
        - Members of federally recognized Native American Tribes, Urban Indians, California Indian, or individuals who are otherwise eligible to receive services through Indian Health Service (IHS) are considered exempted from work requirements
        - Individuals or Tribes can communicate tribe membership to Medicaid by calling, sending documentation, a letter from IHS, or answering the questions on the Medicaid application.
- Waiver Authority
    - Nebraska Medicaid will not proceed with the submission of the Section 1115 Sustainable Coverage Demonstration waiver. There are no changes to retroactive coverage at this time.
    - Thank you to the Tribes for providing feedback on this waiver

Additional Items

- Bailey Reigle will also be a Tribal Liaison for NE Medicaid, alongside Jacob Kawamoto
    - Please include Bailey on emails and correspondence with NE Medicaid regarding Tribal policy/matters- bailey.reigle@nebraska.gov
- Medicaid Work Requirements
    - Summary of Tribal comments MLTC has received thus far – more discussion planned for the May Medicaid Tribal Consultation Meeting
        - Nebraska Medicaid Tribal Consultation Process:
            - Consultation time frame extended to 60 days if MLTC receives comments from the Tribes
            - Questions and comments will be circulated to all Tribes (will be attached to the Consultation Agenda and discussed at the Consultation)
            - MLTC will review and hold meetings with the Tribes
            - MLTC will submit the SPA following the 60-day timeframe

        - Question themes:
            - What documentation will be required to verify Native exceptions?
                - Can indicate Native status on the application, new Screening questions, call in or send info to DHHS, submit Tribal documents, Tribal provider could provide a letter
                - DHHS will automatically check info available before reaching out to beneficiaries – but this may be limited
            - SPA submission timelines and authority
            - Operational questions and considerations (time lines to provide info, appeals, etc.)
            - What outreach will be provided by MLTC?
                - MLTC can bring draft fliers to Tribal Consultation for Tribal facilities and partners to post
        - Question: Are Tribes excluded from having to complete Work Requirements?
            - Answer: Yes, but the Department has to be aware that someone is Native American to exempt them.
        - Question: How is the eligibility team entering this information? Ponca has sent verification of Native American status three different ways and some cases still aren't marked as being a Tribal member.
            - Answer: Jake will take this back and bring more information to the May Tribal Consultation. Please send specific cases and information and MLTC will look into this.
        - Question: Work requirements only pertain to the expansion Medicaid group, right?
            - Answer: Yes, only those in the Medicaid Expansion eligibility category are required to meet work requirements. Nebraska Medicaid has sent out notices to those who must comply with work requirements.
        - Question: Do you have any information on how many people were notified? Or how many have lost Medicaid coverage since May 1?
            - Answer: There are approximately 70,000 people enrolled in the expansion group. Initial notifications went out in late 2025 and early 2026. As new people enter the expansion group, Nebraska Medicaid has continued to send out notices to them. At this time 0 people have been disenrolled from Medicaid due to work requirements. The earliest somebody may be disenrolled due to not meeting work requirements is July 1.
    - Please submit comments and questions related to this proposed SPA **by EOD Monday, May 11th** to help ensure the Medicaid Team can adequately address and respond to feedback from the Tribes at the May Tribal Consultation meeting.
- May Quarterly In-Person Tribal Consultation Meeting
    - May 14th at the Santee Health and Wellness Center
    - Reach out to Vietta Swalley (vietta.swalley@ihs.gov) to RSVP for lunch and to coordinate room reservations for stays
        - 11:00am – Optional tour of the Boys and Girls' Club
        - 12:00pm – Lunch provided by Santee
        - 1:00pm-4:00pm – Consultation Meeting

- Ponca will be hosting a cultural day on Friday, May 15th from 8:00am-12:00pm at their Powwow grounds

- February Consultation Follow Ups
  - MWR February Consultation
    - MLTC will post meeting minutes with that information
  - DSNP Billing / Timeframe question
    - The question raised at the February Consultation was – If a provider misses the Medicare timely filling window for a DSNP claim, can the claim still be submitted to Medicaid?
    - Per state regulations at 471 NAC 3 – failure to bill claims timely for third party coverage is grounds for Medicaid claims denials. If a provider misses a Medicare or DSNP timely filing window, Medicaid/the MCOs would deny as well.
    - Vietta noted that each MCO has varied timely filling deadlines. This topic will be discussed more at the May Consultation
  - UHC Credentialling
    - We won't have a larger group meeting to resolve. MLTC will work with UHC and the Tribes to set up meetings to resolve with each Tribe.
    - Generally – UHC has the leeway to implement a new credentialing process for other lines of business. But notify Jacob and Bailey where there are Medicaid claims issues and we will work with Plan Management to resolve
- Data Sharing Agreements
  - MLTC is working on Data Sharing Agreements for May 2026. The Data Sharing Agreements from last year will not expire until 2030
  - Also working on a Data Sharing Agreement for White Cloud
- Medicare Crossover Claims – Update
  - MLTC has received and is reviewing the final Crossover Claims from the period of 07.01.17 – 06.30.19 from Omaha
- NEMT
    - To be reimbursed for NEMT services, the Tribes need to submit an exemption request to the PSC, enroll with Maximus as a PSC-exempt NEMT provider, and then work with the MCO transportation subcontractor(s).
- Questions/Discussion