

## Good Life, Great Mission.

## **DEPT. OF HEALTH AND HUMAN SERVICES**



July 31, 2025

James G. Scott, Director Centers for Medicare & Medicaid Services Kansas City Regional Operations Group Division of Medicaid Field Operations-North 601 East 12<sup>th</sup> Street, Suite 355 Kansas City, Missouri 64106-2898

RE: Nebraska State Plan Amendment NE 25-0020

Dear Mr. Scott:

Enclosed please find the above referenced amendment to the Nebraska Medicaid State Plan regarding Nebraska Medicaid's rates for applied behavior analysis services.

The Division of Medicaid and Long-Term Care sent notice on June 30, 2025 (attached) to the federally recognized Native American Tribes and Indian Health Programs within the State of Nebraska to discuss the impact the proposed state plan amendment might have, if any, on the Tribes. No comments were received.

If you have content questions, please feel free to contact Jeremy Brunssen at jeremy.brunssen@nebraska.gov or 402-540-0380. For submittal questions, please contact Dawn Kastens at dawn.kastens@nebraska.gov or 531-893-3379.

Sincerely,

Drew Gonshorowski, Director

Division of Medicaid and Long-Term Care

Department of Health and Human Services

cc: Tyson Christensen

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Enclosures

22. REMARKS	ZI. TILL OF ALTROVING OFFICIAL
18. EFFECTIVE DATE OF APPROVED MATERIAL  20. TYPED NAME OF APPROVING OFFICIAL	19. SIGNATURE OF APPROVING OFFICIAL  21. TITLE OF APPROVING OFFICIAL
	ONE COPY ATTACHED
16. DATE RECEIVED	17. DATE APPROVED
	S USE ONLY
July 31, 2025	
14. DATE SUBMITTED	7
Director, Division of Medicaid & Long-Term Care	
Drew Gonshorowski 13. TITLE	301 Centennial Mall South Lincoln, NE 68509
12. TYPED NAME	Nebraska Department of Health and Human Services
Duo Luhi	Dawn Kastens Division of Medicaid & Long-Term Care
11. SIGNATURE OF STATE AGENCY OFFICIAL	15. RETURN TO
10. GOVERNOR'S REVIEW (Check One)  GOVERNOR'S OFFICE REPORTED NO COMMENT COMMENTS OF GOVERNOR'S OFFICE ENCLOSED NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL	OTHER, AS SPECIFIED: Governor has waived review
Nebraska Medicaid's Rates for Applied Behavior Analysis Services	
9. SUBJECT OF AMENDMENT	
7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT Att. 4.19-B, Item 13d, Pg 1c (new)	PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)     Click or tap here to enter text.
42 CFR 447	a. FFY <u>2025</u> \$ <u>0</u> b. FFY <u>2026</u> \$ <u>0</u>
DEPARTMENT OF HEALTH AND HUMAN SERVICES  5. FEDERAL STATUTE/REGULATION CITATION	6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)
TO: CENTER DIRECTOR CENTERS FOR MEDICAID & CHIP SERVICES	4. PROPOSED EFFECTIVE DATE August 1, 2025
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL SECURITY ACT ⊠ XIX □ XXI
TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL	1. TRANSMITTAL NUMBER 2. STATE N E

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT State Nebraska METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES	
APPLIED BEHAVIORAL ANALYSIS	
Effective August 1, 2025, Nebraska Medicaid's applied behavioral analysis (ABA) rates were adjusted in alignment with ABA rates from Medicaid agencies located in states with geographic proximity to Nebraska. Nebraska Medicaid's adjusted rates reflect a blended average of these nearby states' Medicaid rates for ABA services.	
Nebraska Medicaid's rates are published on the agency's website at <a href="https://dhhs.ne.gov/Pages/Medicaid-Provider-Rates-and-Fee-Schedules.aspx">https://dhhs.ne.gov/Pages/Medicaid-Provider-Rates-and-Fee-Schedules.aspx</a> . From the landing page, scroll down to the fee schedule for the specific program.	
These rates will be the same for governmental and private providers of applied behavioral analysis.	

TN # NE 25-0020
Supersedes Approval Date \_\_\_\_\_ Effective Date \_\_\_\_\_
TN # New