

To: All Providers Participating in Nebraska Medicaid Program
From: Kevin Bagley, Director *KB*
Date: April 10, 2023
Re: Pandemic Flexibilities That End After May 11, 2023

This provider bulletin is being issued to let providers know that certain flexibilities introduced during the federal public health emergency (PHE) will end after May 11, 2023. These flexibilities were intended to help providers continue to provide quality care during that extraordinary time.

What follows is a list and explanation of those flexibilities that will end after May 11, 2023.

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Flexibilities

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Nebraska Medicaid’s authority to grant flexibilities comes from the federal government and impacts many providers. The flexibilities listed in this bulletin are specific to Medicaid. Learn more about these flexibilities, including Medicare flexibilities, on the [Centers for Medicare and Medicaid Services website](#).

Provider Bulletins, such as this one, are posted on the DHHS website at <http://dhhs.ne.gov/pages/Medicaid-Provider-Bulletins.aspx>. Please subscribe to the page to help you stay up to date about new Provider Bulletins.

Annual Physicals for Long-Term Care Residents

Nebraska Medicaid generally requires annual physical examinations of long-term care (LTC) residents.

What flexibility was granted during the PHE?

During the PHE, Nebraska Medicaid allowed annual physical examinations for LTC residents to be performed through telehealth.

What will be allowed as of May 11, 2023?

Annual physical examinations for LTC residents will be required to be conducted in person. These in-person examinations for each LTC resident must be completed by November 11, 2023.

Home Health

Nebraska Medicaid generally covers home health services ordered by physicians and APRNs that are deemed medically necessary.

What flexibility was granted during the PHE?

During the PHE, Nebraska Medicaid expanded coverage for home health services prescribed by nurse practitioners and physician assistants.

What will be allowed as of May 11, 2023?

Nebraska Medicaid will continue to cover home health services provided by each of these provider types.

Hospice Aides

Hospice aides generally are required to be supervised in person by registered nurses (RNs).

What flexibility was granted during the PHE?

During the PHE, this in-person requirement was suspended but allowed by telehealth to sustain quality care during an extraordinary time.

What will be allowed as of May 11, 2023?

Hospice aides will once again need to have supervisory visits by RNs at least every 14 days.

Presumptive Eligibility

Certain providers are allowed to make on-the-spot initial Medicaid presumptive eligibility determinations for certain applicants.

What flexibility was granted during the PHE?

During the PHE, pregnancy-only providers were allowed to make presumptive eligibility determinations for not only pregnant women, but also for parents and caretaker relatives, children, persons formerly in the foster care system, adults of working age without a disability (adult expansion), and breast and cervical cancer patients.

What will be allowed as of May 11, 2023?

Pregnancy-only providers will no longer be allowed to make presumptive eligibility determinations for anyone other than their pregnant patients.

Other providers who have signed up and completed the [necessary training](#) to perform presumptive eligibility determinations will continue to be allowed to make these determinations for those other groups mentioned above.

Prior Authorizations for Fee-For-Service

Certain services require prior authorization (PA). Both fee-for-service (FFS) and the health plans use PAs. This flexibility refers to FFS PAs only.

What flexibility was granted during the PHE?

During the PHE, FFS providers could extend PAs that existed before the pandemic started, through to the end of the pandemic, without requiring follow-up visits.

What will be allowed as of May 11, 2023?

This flexibility will no longer be available.

Provider Enrollment Revalidation

Nebraska Medicaid requires currently enrolled providers to revalidate every five years to be able to continue to be reimbursed for services provided to members.

What flexibility was granted during the PHE?

During the PHE, revalidation deadlines were postponed indefinitely.

What will be allowed as of May 11, 2023?

Providers will need to revalidate their agreement with Nebraska Medicaid prior to the end date of their enrollment. It will be closed if their enrollment is not revalidated before the end date. If the end date is missed, providers that are licensed professionals or facilities will have a 180-day grace period to complete revalidation. After 180 days, a new enrollment request would need to be submitted.

For waiver and personal assistance service (PAS) providers, a new enrollment request will need to be submitted if the end date is missed because a closed enrollment cannot be reopened or revalidated.

Provider Enrollment Site Visits

Nebraska Medicaid completes pre- and post-enrollment site visits of certain providers who are enrolled with Nebraska Medicaid.

What flexibility was granted during the PHE?

During the PHE, Nebraska Medicaid waived the in-person site visit requirement.

What will be allowed as of May 11, 2023?

Beginning July 1, 2023, pre-enrollment site visits will be completed in person. Post-enrollment site visits after this date will also be completed in person. All site visits will be unannounced.