

To: All Providers Participating in the Nebraska Medicaid Program
From: Drew Gonshorowski, Director *DG*
Date: July 31, 2026
Re: Medically Frail and Substance Use Disorder (SUD) Treatment Program Exemptions for Medicaid Work Requirements

This provider bulletin is being issued to notify Nebraska Medicaid providers of the Nebraska Department of Health and Human Services (DHHS) process for determining whether individuals qualify for an exemption from Medicaid [work requirements](#) due to being medically frail or participating in a substance use disorder (SUD) treatment program.

Background Information

As of May 1, 2026, members and applicants eligible under Medicaid expansion must complete work requirements to keep or get Medicaid coverage unless they meet an exemption.

Two of the possible exemptions include **medical frailty** and **participation in an SUD treatment program**.

To meet the medical frailty work requirements exemption, the individual must have a medical condition that prevents them from working. This can mean that the individual:

- Is blind or has a disability,
- Has a substance use disorder,
- Has a disabling mental health condition,
- Has a serious or complex medical condition, or
- Has a serious physical, intellectual, or developmental disability that significantly impairs the ability to perform one or more activities of daily living (ADLs)

Medical Frailty and SUD Treatment Program Exemption Process

DHHS has published a detailed explanation of our framework for the medically frail exemption determinations, including the [Medically Frail and SUD Treatment Program Exemptions Process](#) and the accompanying [Medically Frail and SUD Exemptions Conditions Index](#), both available on our [Work Requirements](#) webpage. As described in the process document, DHHS uses available claims data when possible and allows individuals to self-declare their condition when needed. This approach minimizes administrative burden while ensuring consistent application of medical frailty requirements.

For **existing Medicaid beneficiaries** applying or eligible under Medicaid expansion, DHHS first tries to use any available claims data to see if the individual has a qualifying condition. In many cases, DHHS may be able to complete reviews without reaching out to the beneficiary. If DHHS does not have enough

information, we will send the individual a [Verification of Compliance Notice](#), along with an [Individual Declaration Form \(IDF\)](#) where they can self-declare their condition or treatment program information.

DHHS may not have existing data for **new applicants** applying under Medicaid expansion or for existing Medicaid beneficiaries who were recently treated for, or diagnosed with, a medically frail condition. New applicants or existing Medicaid beneficiaries who believe they fit the criteria for medical frailty or an SUD treatment program should fill out and submit an IDF to inform DHHS of their condition or program information.

The IDF is intended to be used by applicants or beneficiaries eligible under Medicaid expansion to provide information which demonstrates their compliance with Medicaid work requirements. The signature on the IDF must belong to the Medicaid applicant or beneficiary (or their authorized representative). A provider signature is **not** required and providers cannot sign on behalf of their patients.

Information for Providers Assisting Applicants and Beneficiaries

Under the recent Interim Final Rule from CMS, individuals are not required to provide further documentation demonstrating their current medical frailty status until January 1, 2028. More information on the processes and requirements that will be required beginning in 2028 are forthcoming.

Providers may assist applicants and beneficiaries with identifying what information should be included in the IDF to accurately describe their medical condition or treatment program. Medical records or a statement from treating provider are not needed at this time. If providers choose to provide medical documentation, DHHS asks that an IDF signed by the applicant or beneficiary (or their authorized representative) is also completed to accompany the submission.

Provider Resources

If you have questions regarding this bulletin, please contact DHHS.MLTCEXperience@nebraska.gov. Health plans should also copy their contract manager.

For more information, visit:

- Medicaid work requirements webpage: <https://dhhs.ne.gov/Pages/WorkRequirements.aspx>.
- Medically Frail and SUD Treatment Program Exemptions Process: <https://dhhs.ne.gov/Pages/WorkRequirements.aspx#docaccess-c945e2feaa61bc4d6fcf6eac76e7af52>
- Medically Frail and SUD Exemptions Conditions Index: <https://dhhs.ne.gov/Pages/WorkRequirements.aspx#docaccess-7262cc8a3ef87cd98baec1d5c32458ca>
- Verification of Compliance Notice: <https://dhhs.ne.gov/Pages/WorkRequirements.aspx#SectionLink6>
- Individual Declaration Form: <https://dhhs.ne.gov/Pages/WorkRequirements.aspx#SectionLink6>



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.