

NEBRASKA



Good Life. Great Mission.

DEPT. OF HEALTH AND HUMAN SERVICES

Division of Medicaid & Long-Term Care

Nebraska Medicaid Expansion Report
August 2021

September 30, 2021

Prepared in Accordance with LB 380 (2021)

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DEPT. OF HEALTH AND HUMAN SERVICES



Pete Ricketts, Governor

September 30, 2021

Clerk of the Legislature
Legislative Fiscal Office
P.O. Box 94604
Lincoln, NE 68509

Dear Clerk of the Legislature and Legislative Fiscal Office:

In accordance with LB 380 (2021) please find attached a report on Medicaid Expansion Administrative and Aid policy decisions for the calendar month of August 2021.

If you have any questions, please contact me at Kevin.Bagley@Nebraska.gov.

Sincerely,

A handwritten signature in black ink, appearing to read "Kevin Bagley".

Kevin Bagley, Director
Division of Medicaid and Long-Term Care
Department of Health and Human Services

Attachments: 1

Medicaid Expansion Programs 249 (Administration) & 349 (Aid)

The Department of Health and Human Services, Division of Medicaid and Long-Term Care (MLTC), provides the following update regarding Medicaid Expansion Administrative and Aid decisions for the calendar month of August 2021:

Expansion was launched successfully on October 1, 2020. Details on enrollment for the month of August 2021 are below:

Medicaid Expansion - Eligibility Determinations (as of 9/1/21)		
	August 2021	Cumulative
Basic¹	1,508	37,153
Prime²	631	14,073
Medically Frail	346	7,417
Pregnant Women	11	270
19-20 Year Olds	274	6,386
TOTAL:	2,139	51,226

As discussed in previous reports, effective October 1, 2021, DHHS will automatically provide full state plan benefits to all Medicaid expansion (also known as Heritage Health Adult or HHA) beneficiaries. To put this change into effect, the following activities occurred in August 2021:

On August 12, 2021, DHHS submitted a state plan amendment to the federal government to provide for a single, full set of benefits for everyone eligible for Medicaid through expansion. The federal government will have 90 days from this date to review the state's proposed state plan amendment.

On August 18, 2021, DHHS submitted its demonstration conclusion statement to the federal government in order to formally request the end of the state's section 1115 demonstration waiver. The section 1115 demonstration waiver would have allowed individuals enrolled in Heritage Health Adult who did not automatically qualify for full state plan benefits to qualify for them by participating in wellness, personal responsibility, and community-engagement activities.

¹ Basic benefits include physical health, behavioral health, and prescription drugs.

² Prime benefits include all Basic benefits, plus dental, vision, and over-the-counter medications. Prime benefits is synonymous with full state-plan benefits.

On August 6, 2021, DHHS receive questions from the federal government related to the state’s amendments to its 1915(b) managed care waiver. DHHS responded to these questions on August 15, 2021. Additionally, DHHS’s contract amendments for its contracted Medicaid managed care entities³ continue to be reviewed through the state’s procurement process. Medicaid’s operational readiness reviews with the managed care entities began on August 2, 2021

As indicated in the previous report, DHHS held a public hearing for necessary regulation changes on August 18, 2021 in regard to updates to 471 NAC 39, 477 NAC 29, and 482 NAC 2, 4-5.

DHHS eligibility staff continue to update documentation to reflect the change to the single benefit set for expansion beneficiaries. Program accuracy staff are reviewing cases to ensure noticing requirements are being met for affected beneficiaries.

For the latest program expenditures, please refer to the Expansion Aid table below.

Program 349 Expansion Aid SFY 21-22		
	Appropriations	Expenditures
General Funds	\$43,863,305	\$9,442,674
Federal Funds (estimated)	\$373,260,870	\$76,042,321
Total	\$417,124,175	\$85,484,996

For the latest project schedule, please refer to the attached timeline.

³ Managed care entities include Nebraska Medicaid’s three managed care health plans, as well as the dental benefits plan.

Heritage Health Adult Single Benefit Plan Implementation Plan Timeline
8/31/21

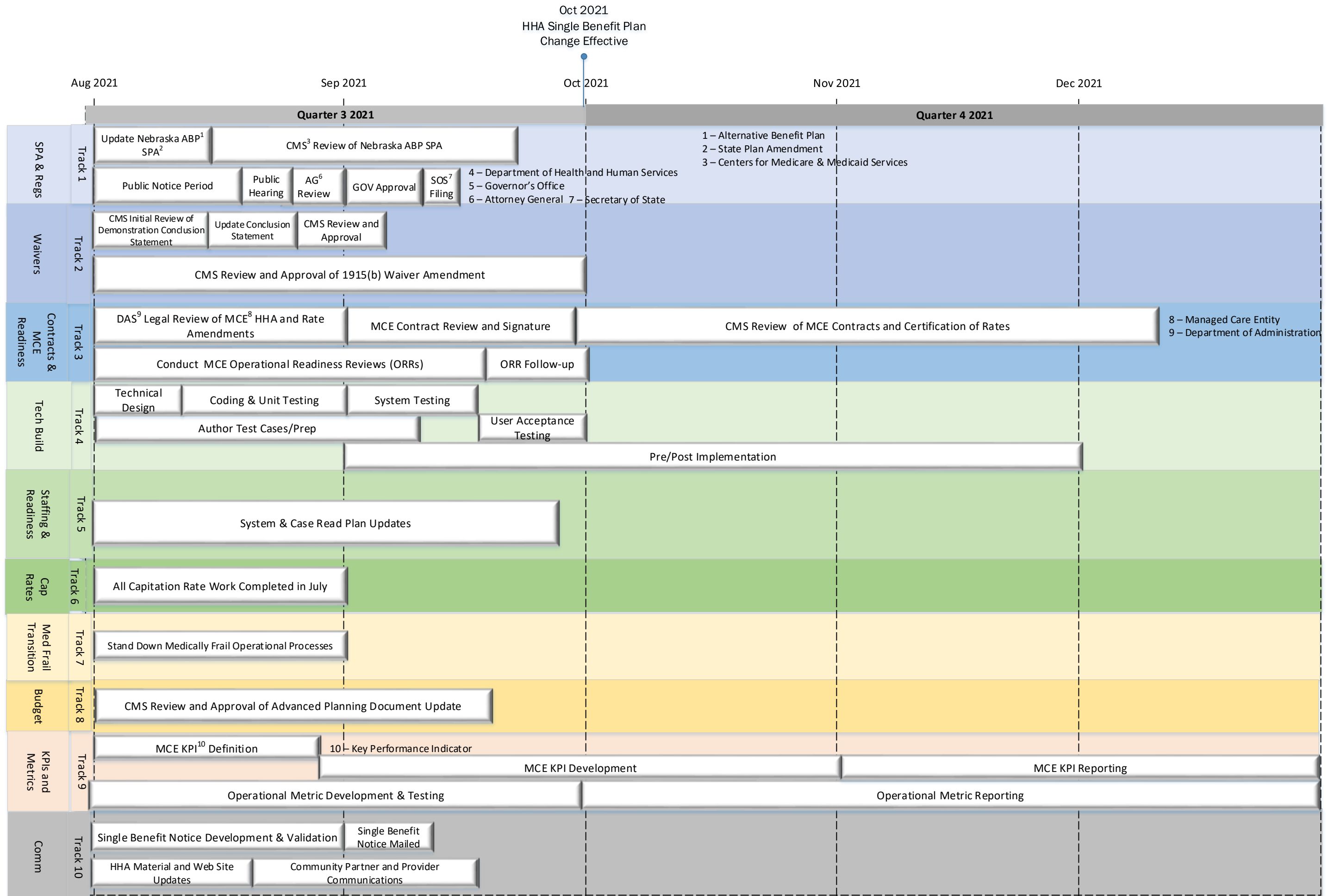


Figure 1: HHA Single Benefit Plan Implementation Timeline