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07/29/2020

NEBRASKA DEPARTMENT OF  
HEALTH AND HUMAN SERVICES

477 NAC 9

TITLE 477 MEDICAID ELIGIBILITY

CHAPTER 9 NOTIFICATION

001. SCOPE AND AUTHORITY. These regulations govern the services provided under Nebraska's Medicaid program as defined by the Medical Assistance Act, Nebraska Revised Statute § 68-901 et seq.

002. TYPES OF NOTICES.

002.01 ADEQUATE NOTICE. An adequate notice must include a statement of what action is intended, the reason for the intended action, and the specific supporting manual reference or the change in federal or state law that requires the action. An adequate notice must be sent no later than the effective date of the action.

002.02 TIMELY NOTICE. A timely notice must be sent by the Department to the applicant, client, or his or her authorized representative at least ten calendar days before the date the action becomes effective, which is always the first day of the month.

002.03 ADEQUATE AND TIMELY NOTICE. In cases of intended adverse action the client must be given both adequate and timely notice. Adverse action includes action to discontinue, terminate, suspend, or reduce assistance; to change the manner or form of assistance; or to change service provision to a more restrictive method.

003. SITUATIONS REQUIRING ADEQUATE NOTICE ONLY. In the following situations, timely notice does not apply, however, adequate notice must be sent no later than the effective date of action:

- (A) The Department has factual information confirming the death of the client;
- (B) The Department receives a written and signed statement from the client:
  - (i) Stating that assistance is no longer required; or
  - (ii) Giving information that requires termination or reduction of assistance, and indicating, in writing, that the client understands the consequence of supplying the information;
- (C) The client has been admitted or committed to an institution and no longer qualifies for Medicaid. This does not apply to individuals who remain eligible in suspended status;
- (D) The client has been placed in skilled nursing care, intermediate care, long-term hospitalization, or Assisted Living Waiver;
- (E) The client's whereabouts are unknown, and mail directed to the client has been returned by the post office indicating no known forwarding address;
- (F) It has been established the client has been accepted for assistance in another state; or
- (G) A change in the level of medical care.

004. WAIVER OF NOTICE. If a client agrees to waive his or her right to a timely notice in situations requiring timely notice, a statement signed by the client must be obtained and filed in the case record.

005. FRAUD CASES. At least five days' advance written notice must be given if:

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- (A) The Department has facts indicating that action should be taken to discontinue, terminate, or reduce assistance because of probable fraud by the client; and
- (B) The facts have been verified when possible through collateral sources.