

Division of Medicaid & Long-Term Care

Eligibility and Benefits Appeals – State Fair Hearings

In response to the COVID-19 pandemic, Nebraska Medicaid is making temporary changes to the deadlines to request and hold state fair hearings. These changes will help applicants, beneficiaries, and providers use their appeal rights during this difficult time.

Changes to state fair hearings:

These changes are effective from March 1, 2020, until further notice:

- The timeframe to appeal an agency adverse action – for example, an eligibility determination – will be extended by an **additional** 120 days, to a total of 210 days from the date the action took place.
- The timeframe to appeal to Medicaid an adverse determination made by a managed care entity (MCE) will be extended by an **additional** 120 days, to a total of 240 days, from the date the MCE completes their appeal process.
 - MCE members must still go through their MCE's appeal process before appealing the decision to Medicaid.
- For all appeals, there will be no specific deadline by when the hearing will be held or the decision will be issued.

Contact Information:

With questions on your benefits, please contact your health plan:

Nebraska Total Care

- 1 (844) 385-2192

WellCare of Nebraska

- 1 (855) 599-3811

UnitedHealthcare Community Plan

- 1 (800) 641-1902

MCNA

- 1 (844) 351-6262

With questions on appeals, please contact:

DHHS Hearing Office:

- (402) 471-7237

With general questions, please contact:

DHHS.MLTCEXperience@Nebraska.gov