




## PROVIDER BULLETIN

No. 19-10

DATE: June 3, 2019

TO: All Providers Participating in Nebraska Medicaid Program

FROM: Matthew A. Van Patton, DHA, Director  
Division of Medicaid & Long-Term Care 

BY: Jennifer Irvine, Program Coordinator

RE: Changes to non-emergency medical transportation billing

This provider bulletin is being issued to notify Medicaid providers of upcoming changes to the non-emergency medical transportation (NEMT) billing process.

**Effective July 1, 2019**, NEMT recipients who receive their physical health, behavioral health, and pharmacy services through the Heritage Health plans will also receive their NEMT services through those plans. For billing purposes, this means that NEMT providers will bill the Heritage Health plans for services provided to Heritage Health members. Please see Provider Bulletin 19-07 for the contact information for each Heritage Health plan's NEMT vendor.

NEMT recipients who are not enrolled in the Heritage Health plans will continue to receive NEMT services in the same manner as they currently do. For billing purposes, this means that NEMT providers will submit fee-for-service claims to Medicaid for NEMT services provided to Medicaid members not enrolled in Heritage Health. These fee-for-service claims must be submitted on the CMS 1500 claim form. NEMT providers are responsible for mailing these claim forms to:

Department of Health and Human Services  
Medicaid and Long-Term Care Claims Department  
PO Box 95026  
Lincoln NE 68509-5026

Billing instructions are available online at <http://dhhs.ne.gov/Pages/Medicaid-Announcements.aspx>.

**Effective June 1, 2019**, new and existing NEMT provider applicants must complete their provider enrollment or screening activities through Maximus. Maximus can be reached by phone at 844-374-5022 or by email at [nebraskamedicaidpse@maximus.com](mailto:nebraskamedicaidpse@maximus.com).

If you have questions regarding this bulletin, please email [DHHS.MedicaidNEMT@nebraska.gov](mailto:DHHS.MedicaidNEMT@nebraska.gov).

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