



# Heritage Health Adult Expansion Frequently Asked Questions



On November 6, 2018, Initiative 427 was passed by a vote of Nebraska's residents. The ballot initiative expands the Medicaid population to Nebraskans under the age of 65 whose income is at or below 138 percent of the federal poverty level (FPL).

## General FAQs

### **Who is newly eligible for Medicaid Expansion in Nebraska (the Heritage Health Adult Program)?**

Nebraska residents, age 19 through 64, whose income is at or below 138 percent of the federal poverty level (FPL). For 2021, this is an annual income of \$17,774 for a single person and \$36,570 for a household of four.

### **What is the difference between Heritage Health and Heritage Health Adult?**

Heritage Health is the managed care program that manages Medicaid services in Nebraska. Heritage Health Adult (HHA) is part of the overall Heritage Health program. HHA covers those eligible for Nebraska's Medicaid expansion. Those eligible for Medicaid in the Heritage Health Adult category will be enrolled into a Heritage Health plan to manage their benefits.

## Eligibility FAQs

### **How can people apply for coverage?**

Applications can be submitted in the following ways year-round:

- Online at [www.ACCESSNebraska.ne.gov](http://www.ACCESSNebraska.ne.gov),
- Over the phone by calling ACCESS Nebraska at:
  - Omaha: (402) 595-1178
  - Lincoln: (402) 473-7000
  - Toll Free: (855) 632-7633
  - TDD: (402) 471-7256,
- Submitting a paper application (paper applications may be downloaded from [AccessNebraska.gov](http://AccessNebraska.gov)):

- o By fax at (402) 742-2351,
- o By email at [DHHS.ANDICenter@nebraska.gov](mailto:DHHS.ANDICenter@nebraska.gov),
- o By mail at P.O. Box 2992, Omaha, NE 68103-2992,  
or
- In person at a DHHS local office.
  - o Find a local office at <https://dhhs.ne.gov/Pages/Public-Assistance-Offices.aspx>

### **Will Medicaid now cover undocumented immigrants?**

No. Undocumented immigrants remain ineligible, except for some limited, emergency services.

### **Do I need to submit documents with my application?**

This depends on the information you provide on your application. DHHS will send you a notice asking for any needed documents after your application is received.

### **Are college students eligible if they are self- supporting?**

College students may be eligible if they meet all of the eligibility criteria for the expansion group.

### **Where can I find help applying?**

You can call or visit the ACCESSNebraska website, or visit a DHHS local office. Find a local office at <https://dhhs.ne.gov/Pages/Public-Assistance-Offices.aspx>.

### **I have sent my application. How will I know if I am eligible?**

If eligible for Medicaid, you will receive a notice explaining your eligibility category and benefit information. You can also create an online account with ACCESSNebraska to check your application status.

### **What do I do if I am determined ineligible for Nebraska Medicaid?**

If you are determined ineligible for Medicaid, your application is sent to the Federal Marketplace ([healthcare.gov](http://healthcare.gov)). The Marketplace can assist you with private insurance coverage. If you believe you were denied in error, you may request a fair hearing (appeal).

## **How do I appeal an eligibility determination?**

You may request an appeal by phone or in writing.

You may call our agency to request an appeal or to request an appeal form be mailed to you.

- Omaha: (402) 595-1178
- Lincoln: (402) 473-7000
- Toll Free: (855) 632-7633
- TDD: (402) 471-7256

You may send written appeal requests to:

Legal Services – Hearing Section

PO Box 98914

Lincoln, NE 68509-8914

## **What if my income changes?**

As with all Medicaid programs, changes which impact eligibility must be reported to DHHS within ten days of the change. Once DHHS verifies this information, we will assess your Medicaid eligibility based on the new information.



## **How often do I need to reapply for Medicaid?**

Medicaid eligibility renewals are completed annually and there is no need to file a new application. If DHHS is not able to complete the renewal automatically, we will send you a paper application to complete.

If you become ineligible, a new application is needed after 90 days of ineligibility.

## **Benefits and Services**

### **What benefits are available through Medicaid expansion?**

All people eligible under Medicaid expansion receive full state plan services, which includes medical, behavioral health, pharmacy, dental, and vision.

### **How do I use my Medicaid benefits?**

Medicaid benefits and services are managed through managed care organizations also known as Heritage Health plans.

If you are eligible, you will be enrolled in a Heritage Health plan. Heritage Health plans assist with things like reminding you of your doctor's appointment and paying the doctor for their services.

Medical, behavioral health, and pharmacy benefits are provided through the [Heritage Health program](#). Dental benefits are provided through [MCNA](#).

### **How will I know which Heritage Health plan I am enrolled in?**

You will be automatically enrolled in one of the Heritage Health plans after you are determined eligible for Medicaid. You will receive a notification of your Heritage Health plan assignment from DHHS's enrollment broker, Automated Health Systems (AHS). This will be followed by a welcome packet from the Heritage Health plan.

## Can I change my Heritage Health plan?

Yes. You can change your Heritage Health plan in the first 90 days. You can change your Heritage Health plan through the enrollment broker at <https://www.neheritagehealth.com>. Assistance is available should you have questions about the different Heritage Health plans.

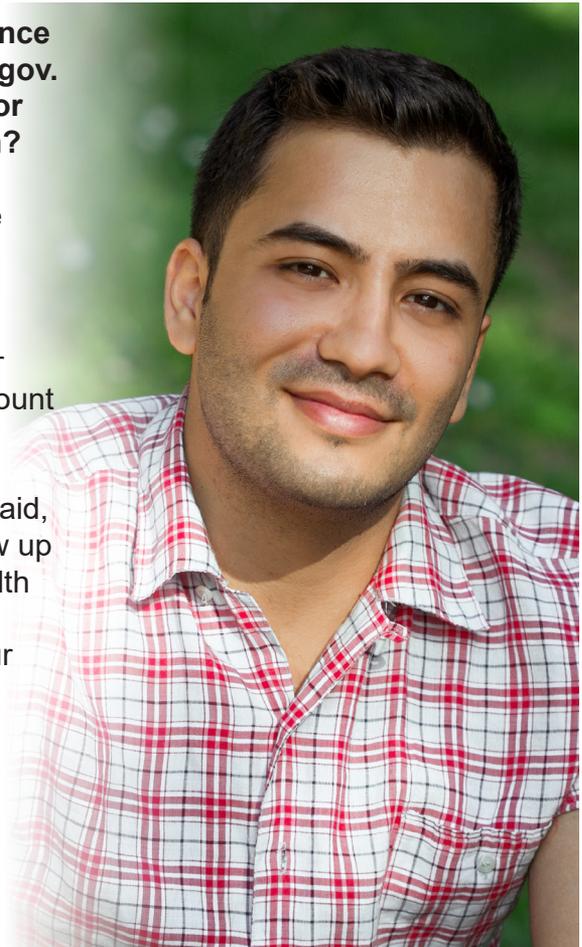
## Other Topics

### Individuals Who Already Have Coverage/Insurance

#### **I have health insurance through healthcare.gov. Could I be eligible for Medicaid expansion?**

You may be eligible. If you believe you are eligible, complete a Medicaid application. This can be done via ACCESSNebraska or by updating your account at healthcare.gov.

If approved for Medicaid, you will need to follow up with your current health insurance to make a change or cancel your coverage.



**I receive benefits or services through another DHHS program (such as EWM, Ryan White, Refugee, Disability, etc.). Could I be eligible for Medicaid expansion?**

You may be eligible. If you believe you are might be eligible, please complete a Medicaid application.

**I receive health benefits through my employer. Could I be eligible for Medicaid expansion?**

You may be eligible. If you believe you are might be eligible, please complete a Medicaid application.

