



Nebraska Medicaid: Coordination of care requirements for new contracts

The Nebraska Department of Health and Human Services (DHHS) selected [3 MCOs to provide services for enrollees of Heritage Health](#), effective Jan. 1, 2024. Health care professionals are required to participate in care coordination efforts with the previous and current health plans within the first 90 calendar days of the new contract (i.e., March 31, 2024).

What you need to do

Between now and March 31, 2024, you must collaborate with the MCOs that previously contracted with the state and provided care for patients who are now under your care.

UnitedHealthcare Community Plan of Nebraska will honor previous prior authorization determinations, regardless of your participation network status. Prior authorizations are valid for whichever of the following dates is the earliest:

- March 31, 2024, which is 90 calendar days from the MCO's contract start date of Jan. 1, 2024
- The end date shown on the prior authorization from the previous entity
- A new decision by the MCO, with consultation from the health care professional, based on the medical necessity of the service

We're here to help

Chat with a live advocate 7 a.m.–7 p.m. CT from the [UnitedHealthcare Provider Portal](#). You can also contact UnitedHealthcare Provider Services at **877-842-3210**, TTY/RTT **711**, 7 a.m.–5 p.m. CT, Monday–Friday.