

Medicaid Renewal Notice Language

The language written below can be used when a renewal notice isn't generated by NFOCUS. Edit the form to include the name of all approved Medicaid participants and add comments if applicable.

Please make sure your notice is a Notice Template or Generic Notice as a Speednote doesn't include the client's rights and responsibilities.

Medicaid

Renewal

A renewal of eligibility for Nebraska Medicaid Programs has been completed. The following individual(s) remain eligible.

Individual	Status
John Doe	Eligible

Renewals are completed using either electronic data sources, existing information in the case record or new information you provided during the renewal process. You are required to inform the Department if any of the information used to renew your eligibility is inaccurate. To do so, please sign and return this notice along with verification of any changes. If all information is current and accurate you are not required to sign and return this notice.

*Signature

Date

The manual references which support this action are- 477 NAC 3-007, which can be found online at: ACCESSNebraska.ne.gov

Comments

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Medicaid

Renovación

Se ha realizado una renovación de elegibilidad para los Programas de Medicaid de Nebraska. La siguiente persona(s) sigue siendo elegible.

Individuo	Estatus
John Doe	Elegible

Las renovaciones se llevan a cabo usando bases de datos electrónicas, información existente en el récord del caso, o la información nueva que usted proporcionó durante el proceso de renovación. Se requiere que usted le informe al Departamento si cualquier información utilizada para renovar su elegibilidad es incorrecta. Para hacerlo, por favor firme y envíe esta notificación junto con la verificación de cualquier cambio. Si toda la información está al día y es correcta, no se requiere que firme y retorne esta notificación.

*Firma

Fecha

Las referencias del manual que respaldan esta acción son- 477 NAC 3-007, las cuales se pueden hallar en línea en: ACCESSNebraska.ne.gov

Comentarios