

Nebraska Provider Screening and Enrollment Provider Management Home for Home Care Based Services (HCBS) Providers

After Application is Submitted but Not Active: The provider may [View Provider File](#).

- To View Provider File:
 - The provider name must be highlighted by selecting the Provider's **NAME**.
 - No changes can be made after the application is submitted.
 - Click [View Provider File](#) to see the application in a READ ONLY format.

The screenshot displays the 'Provider Management Home' interface. At the top, there is a 'Provider Summary' section with a 'Tax ID' field. Below this is a 'My Providers' table with columns for Provider, Status, Provider Type, NPI, Specialty, Location, Effective Date, Submit Date, and Revalidation Due Date. A single provider is listed with a status of 'Submitted'. An orange arrow points to the provider's name in this table. Below the table are buttons for 'Add New Provider Location' and 'Add Group Member Profile'. The 'My Group Member Profiles' section shows 'No group member profiles found.' and a button for 'Add Group Member Profile'. The 'Provider Details' section is divided into 'Registration Information' and 'Manage Provider'. The 'Registration Information' includes fields for Effective Date (05/14/2010), Revalidation Due Date (05/31/2016), Term Date, Nebraska MLTC Status (Active), Application Status (Submitted), and Medicaid ID. The 'Manage Provider' section contains a link for 'View Provider File', which is highlighted by an orange arrow. At the bottom, there is a 'Communications' section with a table for Subject, NPI, and Date, showing a message 'Nebraska MLTC Provider Account Created' dated 04/15/2016.

When the application is in Provider Data Entry: The Provider may Continue Services, Cancel Services, or Edit Key Provider Identifiers.

- To **Continue Services**: (update information)
 - The provider name must be highlighted by selecting the Provider's **NAME**.
 - Click **Continue Services** to update enrollment information.
 - See the HCBS New Enrollment and Existing Revalidation Process education tools for further instruction.
 - The application must be submitted when all updated have been made.
- To **Cancel Services**: (cancel changes made to the application)
 - If the Provider has a Medicaid Provider ID:
 - The provider name must be highlighted by selecting the Provider's **NAME**.
 - Click **Cancel Services** to return the application to its last official status.
 - If the Provider in new and does not have a Medicaid Provider ID:
 - The provider name must be highlighted by selecting the Provider's **NAME**.
 - Click **Cancel Services** to delete this application and start over.
- To **Edit Key Provider Identifiers**:
 - If the Provider has a Medicaid Provider ID:
 - The provider name must be highlighted by selecting the Provider's **NAME**.
 - Click **Edit Key Provider Identifiers**.
 - Key Identifiers that may be changed for currently enrolled Medicaid providers are limited to NPI, Zip, and Zip Extension.
 - Tax ID, Provider Type, Specialty, and Taxonomy may not be changed.
 - If the Provider does not have a Medicaid Provider ID:
 - The provider name must be highlighted by selecting the Provider's **NAME**.
 - Click **Edit Key Provider Identifiers**.
 - Key Identifiers that may be changed for new Medicaid providers are Specialty, Taxonomy, NPI, Zip, and Zip Extension.
 - Tax ID, and Provider Type may not be changed. To change these you may **Cancel Services** and restart the enrollment process.

Provider Management Home

[Update My Profile](#)

Questions?

Contact MAXIMUS Provider Customer Service at 1-844-374-5022

Provider Summary

Tax ID: [REDACTED]

My Providers



Provider	Status	Provider Type	NPI	Medicaid ID	Specialty	Location	Effective Date	Submit Date	Revalidation Due Date
[REDACTED]	Not Submitted	HCBS			HCBS	68028 - 4693			

[Add New Provider Location](#)

My Group Member Profiles

Provider	Status	Provider Type	NPI	Specialty	Effective Date	Submit Date
<i>No group member profiles found.</i>						

Create a Group Member Profile if you are or will be part of a Group Practice.

[Add Group Member Profile](#)

Provider Details

[REDACTED]

Registration Information

Effective Date
Revalidation Due Date
Term Date
Nebraska MLTC Status **New**
Application Status **Not Submitted**
Medicaid ID

Manage Provider

[Continue Services](#)
[Cancel Services](#)
[Edit Key Provider Identifiers](#)



When the Provider is Approved and Active: The provider may Update Services Registration or View Provider File.

- To **Update Services Registration**: Only select this if you wish to make changes.
 - The provider name must be highlighted by selecting the Provider's **NAME**.
 - Click **Update Services Registration** to update enrollment information.
 - See the HCBS Updating Information or HCBS New Enrollment and Revalidations New to the Portal education tools for further instruction.
 - The application must be submitted when all updates have been made.
 - If you did not make changes or wish to cancel any changes instead of submitting, select **Cancel Registration** on the Provider Management Home Screen. This will return the profile to its previous status.
- To **View Provider File**:
 - The provider name must be highlighted by selecting the Provider's **NAME**.
 - Click **View Provider File** to see the application in a READ ONLY format.

Provider Management Home

[Update My Profile](#) Questions? Contact MAXIMUS Provider Customer Service at 1-844-374-5022

Provider Summary

Tax ID: [REDACTED]

My Providers

Provider	Status	Provider Type	NPI	Medicaid ID	Specialty	Location	Effective Date	Submit Date	Revalidation Due Date
[REDACTED]	Approved	MCBS	[REDACTED]	[REDACTED]	MCBS	88118 - 2224	12/16/15	12/16/15	12/16/20

[Add New Provider Location](#)

My Group Member Profiles

Provider	Status	Provider Type	NPI	Specialty	Effective Date	Submit Date
No group member profiles found.						

Create a Group Member Profile if you are or will be part of a Group Practice.

[Add Group Member Profile](#)

Provider Details

[REDACTED] 88118 - 2224

Registration Information

Effective Date 12/16/2015
Revalidation Due Date 12/16/2020
Term Date
Nebraska MLTC Status Active
Application Status Approved
Medicaid ID [REDACTED]

Manage Provider

[View Provider File](#)
[Update Services Registration](#)

Communications

Subject	NPI	Date
Nebraska MLTC Provider Account Created		12/14/2015
Welcome Nebraska Medicaid Provider		01/12/2016
Password Reset		04/15/2016

See the Enrollment and Updating Information Resources for assistance with the next steps.