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State/Territory Name: Nebraska

State Plan Amendment (SPA) #: 25-0023

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) Form CMS 179
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
601 E. 12th St., Room 355
Kansas City, Missouri 64106



Medicaid and CHIP Operations Group

February 27, 2026

Drew Gonshorowski
Director
Division of Medicaid and Long-Term Care
Nebraska Department of Health and Human Services
301 Centennial Mall South
Lincoln, NE 68509

Re: Nebraska State Plan Amendment (SPA) – 25-0023

Dear Mr. Gonshorowski:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) NE-25-0023. This amendment proposes coverage for dental screenings provided by public health dental hygienists as Early and Periodic Screening and Diagnosis and Treatment (EPSDT) services.

We conducted our review of your submittal according to statutory requirements in Title XIX of the Social Security Act and implementing regulations 42 CFR §440.60. This letter informs you that Nebraska Medicaid SPA TN 25-0023 was approved on February 26, 2026, with an effective date of November 1, 2025.

Enclosed are copies of Form CMS-179 and approved SPA pages to be incorporated into the Nebraska State Plan.

If you have any questions, please contact Tyson Christensen at (816) 426-6440 or via email at Tyson.Christensen@cms.hhs.gov.

Sincerely,

Wendy E. Hill Petras
Acting Director, Division of Program Operations

Enclosures

cc: Dawn Kastens

<p>TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES</p>	<p>1. TRANSMITTAL NUMBER <div style="display: flex; justify-content: space-around; border: 1px solid black; padding: 2px;"> 2 5 — 0 0 2 3 </div> </p> <p>2. STATE <div style="display: flex; justify-content: space-around; border: 1px solid black; padding: 2px;"> N E </div> </p> <p>3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL SECURITY ACT <input checked="" type="checkbox"/> XIX <input type="checkbox"/> XXI </p>
<p>TO: CENTER DIRECTOR CENTERS FOR MEDICAID & CHIP SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES</p>	<p>4. PROPOSED EFFECTIVE DATE November 1, 2025</p>
<p>5. FEDERAL STATUTE/REGULATION CITATION SSA 1905(a)</p>	<p>6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)</p> <p>a. FFY <u>2026</u> \$ <u>0</u> b. FFY <u>2027</u> \$ <u>0</u></p>
<p>7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT Att. 3.1-A Item 4b, Pgs 2-3</p>	<p>8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable) Att. 3.1-A Item 4b, Pgs 2-3</p>
<p>9. SUBJECT OF AMENDMENT Early Periodic Screening, Diagnosis and Treatment (EPSDT) Dental Screenings</p>	

10. GOVERNOR'S REVIEW (Check One)

<p><input type="radio"/> GOVERNOR'S OFFICE REPORTED NO COMMENT</p> <p><input type="radio"/> COMMENTS OF GOVERNOR'S OFFICE ENCLOSED</p> <p><input type="radio"/> NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL</p>	<p><input checked="" type="radio"/> OTHER, AS SPECIFIED: Governor has waived review</p>
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<p>STATE AGENCY OFFICIAL</p> <hr/> <p>12. TYPED NAME Drew Gonshorowski</p> <p>13. TITLE Director, Division of Medicaid & Long-Term Care</p> <p>14. DATE SUBMITTED December 23, 2025</p>	<p>15. RETURN TO Dawn Kastens Division of Medicaid & Long-Term Care Nebraska Department of Health and Human Services 301 Centennial Mall South Lincoln, NE 68509</p>
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FOR CMS USE ONLY	
<p>16. DATE RECEIVED December 23, 2025</p>	<p>17. DATE APPROVED February 26, 2026</p>

PLAN APPROVED - ONE COPY ATTACHED	
<p>18. EFFECTIVE DATE OF APPROVED MATERIAL November 1, 2025</p>	<p>19. SIGNATURE OF APPROVING OFFICIAL</p>
<p>20. TYPED NAME OF APPROVING OFFICIAL Wendy E. Hill Petras</p>	<p>21. TITLE OF APPROVING OFFICIAL Acting Director, Division of Program Operations</p>

22. REMARKS

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Nebraska

LIMITATIONS - EARLY AND PERIODIC SCREENING AND DIAGNOSIS AND TREATMENT
OF CONDITIONS FOUND

VISION SERVICES are provided at the following intervals, and at other intervals, indicated as medically necessary, to determine the existence of a suspected illness or condition:

Birth to 3 years Screening through history taking and observation at intervals that follow the Health Screening periodicity schedule

Age 3 to 21 years Screening by standard testing method yearly through age six and thereafter to follow the Health Screening periodicity schedule

This periodicity schedule was selected based on input from meetings and/or written correspondence with the Nebraska Chapter of the American Academy of Pediatrics, the Nebraska Chapter of the American Academy of Family Physicians, the American Optometrist Association (AOA), and the HHS visual care consultant.

Vision services include, at a minimum, diagnosis and treatment for defects in vision, including eyeglasses.

DENTAL SERVICES are provided at the following intervals, and at other intervals, indicated as medically necessary to determine the existence of a suspected illness or condition:

Birth to 21 years Two times every 365 days, dental screening is to be performed by a licensed provider practicing within their scope of practice as recommended by AAP's "Recommendations for Preventive Pediatric Health Care." Dental screenings may be provided by public health dental hygienists as authorized under Sec. 1905(a)(6) of the Act and specified in the State Plan.

TN No. NE 25-0023
Supersedes
TN No. MS-00-06

Approval Date: 2/26/2026

Effective Date: 11/1/2025

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Nebraska

LIMITATIONS - EARLY AND PERIODIC SCREENING AND DIAGNOSIS AND TREATMENT
OF CONDITIONS FOUND

This periodicity schedule was established based on input from written correspondence with the Nebraska Dental Association. The schedule for EPSDT dental exams is based on the NDA's recommendations.

Dental services include, at a minimum, relief of pain and infections, restoration of teeth, and maintenance of dental health.

HEARING SERVICES are provided at the following intervals, and at other intervals indicated as medically necessary, to determine the existence of a suspected illness or condition:

Birth to 3 years Screening through history taking and observation at intervals that follow Health Screening periodicity schedule

Age 3 to 21 years Screening by standard testing method yearly through age six and thereafter to follow the Health Screening periodicity schedule

This periodicity schedule was established based on input from meetings and written correspondence with the Nebraska Chapter of the American Academy of Pediatrics, the Nebraska Chapter of the Academy of Family Physicians, the DSS audiological consultant as well as a position paper by the American Speech and Hearing Association.

Hearing services include, at a minimum, diagnosis and treatment for defects in hearing, including hearing aids.