Section: General Billing Information



1.11 Newborns/Infants with Medicaid

Medicaid Eligibility and ID Numbers

A newborn whose mother is a Medicaid beneficiary is eligible for Medicaid for the first year of life. This includes infants born to immigrant mothers who are eligible only for emergency labor and delivery services. A newborn released for adoption is not automatically entitled to the one-year period of eligibility. The adoptive parent(s) may apply for Medicaid for the newborn at the Medicaid Regional Office that serves the county of residence of the parent(s).

In order to get a Medicaid ID number assigned for the baby as quickly as possible, the birthing hospital must complete the Request for Newborn Health Information Form and fax it to the Medicaid Regional Office in the mother's county of residence. The form should be faxed as soon as possible, no later than the mother's discharge from the hospital. The policy and form regarding these procedures are found in the Medicaid Provider Policy Manual, Section 25.08. If you have questions about the process for getting a Medicaid ID for a newborn, contact the fiscal agent's Provider and Beneficiary Services Call Center at 1-800-884-3222.

It is important for the birthing hospital to complete the Request for Newborn Health Information Form as soon as possible in order to bill for the hospital's services. The birthing hospital billing staff must have the baby's own Medicaid ID number in order to bill claims, and the birthing hospital should provide the baby's Medicaid ID number to any hospital to which the baby may have been transferred. All provider claims should be billed with the baby's own Medicaid ID number in order to ensure efficient claims processing, including hospital, physician, pharmacy, and any other provider claims.

In situations when the infant is less than one (1) year of age, lives with the mother who was a Medicaid eligible at the time of his/ her birth, and does not have his/ her own Medicaid ID number, claims may be billed with the baby's name, birth date, sex and the mother's Medicaid ID number with the "K" suffix added. THIS OPTION SHOULD ONLY BE USED AS A LAST RESORT. It is important for claims to be billed with the baby's own Medicaid ID number in order to ensure accurate claims processing; delayed payment or possible denials may result when billing the mother's Medicaid ID number with a "K".

Billing for Newborn Hospital Stays and Inpatient Services

Normal well-baby services provided in the hospital should be included on the mother's hospital claim for labor, delivery, and immediate postpartum services. Normal well-baby services provided in the hospital will not be reimbursed separately from the mother's hospital claim. Physician services provided to the normal newborn should be billed with the baby's own Medicaid ID number with appropriate CPT codes and modifier TH on each procedure code billed.

If a newborn requires hospitalization beyond the mother's hospital stay, usually three (3) days for a vaginal delivery and five (5) days for a Cesarean delivery, the hospital must obtain a Treatment

Authorization Number (TAN) from the Utilization Management/ Quality Improvement Organization (UM/QIO) for the sick baby's hospital stay. The hospital must provide the baby's name and Medicaid ID number to the UM/QIO in order to obtain a TAN; "Baby Boy" or "Baby Girl" is not acceptable for the baby's name. The UM/QIO will not release the TAN to the hospital until the baby's own Medicaid ID number is provided; the TAN will not be issued with the mother's Medicaid ID number and the "K" suffix. Upon receipt of the newborn's own Medicaid ID number, it is the hospital's responsibility to provide that number to the UM/QIO. Once the UM/QIO receives the newborn's Medicaid ID number, the TAN will be released to the hospital and the fiscal agent, and the hospital can then submit their claim(s). On at least a bi-weekly basis, the UM/QIO will send a list to hospitals informing them that a review or certification has occurred and that the newborn's Medicaid ID number is needed so that TAN information can be transmitted to the fiscal agent.

Newborns and Medicare

Medicaid does not reimburse separate hospital claim(s) for normal well-baby hospital services if the mother has Medicare Part A. Claims for the delivery and care of the mother and for the newborn must be billed to Medicare on the mother's hospital claim. Medicaid will reimburse for any Medicare coinsurance and deductible on a crossover claim in accordance with Medicaid policy for crossover claims payment.