

Newborn Coverage Tips

Guidelines regarding the Automated Newborn Enrollment Process

Policy: [Michigan Medicaid Provider Manual](#) Chapters Beneficiary Eligibility Section 7 and Billing & Reimbursement for Institutional Providers.

Generally, Medicaid automatically covers a child born to a woman eligible for and receiving Medicaid at the time of the birth. The mother is required to notify the local MDHHS office of the birth within ten days and if the mother is enrolled in a Medicaid Health Plan (MHP) at the time of delivery, the newborn's services will be the responsibility of the MHP unless the child is placed in foster care. If this automated process is delayed, the provider may notify the local MDHHS office via form [MSA-2565-C](#). Hospital providers must not bill until the eligibility response from CHAMPS shows the newborn's ID#, date of birth, and the sex.

1. What is the process that Michigan Medicaid uses to put a newborn (NB) into the Mother's Medicaid Health Plan (MHP)?

MDHHS has an automated system in place where once the NB information has been sent to Vital Records from the hospital and is in Vital Records (Michigan Birth Registry), the system will look for a match to the Mother on our enrollment files. Next, it will run a process to attempt to create the NB's Beneficiary ID #, add a Medicaid benefit plan, and add the baby to the Mother's Health plan.

2. What is the usual time frame for this to occur?

The automated process takes from 30-45 days. Any delay made by the hospitals in reporting their new births to Vital Records will delay the process.

3. What are the possible exceptions to this process that holds up the retroactive enrollments of the child?

The reason NBs fall out of the normal process could be due to several variables such as the Mother having SSI, the child is in Foster Care or the Mother's case is currently pending for updates. The system cannot automatically add NBs in these cases; therefore, they have to be put in manually. The department's Enrollment Services Section within the MSA receives reports of the NBs that "fall out" and they are tasked to add coverage time segments to Bridges eligibility system retroactively. If the Mother calls their caseworker once baby is born, the caseworker will add that NB to the Mother's case and establish the NB's beneficiary ID #. At that point, per the MHP contract with the State of Michigan (SOM), the MHP is responsible to add that baby to the Mother's MHP. The MHP should have a process in place to look for NBs that they are supposed to have on the enrollment files they receive from the SOM. If the NB is not on their enrollment files within two months from their date of birth, the MHP must send an electronic service request to the SOM within six months of the child's birth. If the MHP does not send the service request in a timely fashion, the request is denied. The NB will remain Fee for Service.

Providers may call the MSA Contract Management at 517-335-5500 to obtain additional support. Providers should keep track/record of any communication with the MHP so that they can show that they have attempted to resolve their issues prior to contacting the SOM contract services liaison.

4. May I see an example of the contract that is used between the SOM and the Contracted Medicaid Health Plans? Yes this information is on our web site at:
http://www.michigan.gov/documents/contract_7696_7.pdf

Please go to page 22 for the section regarding Newborn Enrollment.

5. Is there a special email box providers can write to if they are unable to find the NB in CHAMPS within 45 or more days after the birthdate? Yes emails can be directed to
MSA-ESS@michigan.gov

When submitting a request please include all of the following information:

- Newborn's name (last, first, middle initial)
- Newborn's gender
- Newborn's DOB
- Mother's name (last, first, middle initial)
- Mother's Medicaid ID number
- Requesting person's name and telephone number