



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 also automatically entitled to the one-year period of eligibility.

Well newborn services provided in the hospital must be billed separately from the mother's hospital claim. Hospitals must notify the Division of Medicaid within 5 calendar days of a newborn's birth using the Newborn Enrollment Form located on the Envision Web Portal. The Division of Medicaid, Office of Eligibility, will notify the provider within 5 business days of the newborn's permanent Medicaid Identification (ID) number.

Failure to notify DOM of the birth within 5 calendar days may result in delay in assignment of the infant's Medicaid ID number. By extension, a delay in the hospital receiving the newborn's Medicaid ID may result in Prior Authorization (PA) denials, claims denials (for claims billed without the infant's Medicaid ID number or with the mother's ID number), denials for claims that exceed timely filing requirements and other administrative challenges. The birthing hospital should also provide the baby's Medicaid ID number to any hospital to which the infant may have been transferred.

Questions about the newborn enrollment process should be directed to The Division of Medicaid, Office of Eligibility at 1-800-421-2408.

Billing for Newborn Hospital Stays and Inpatient Services

Normal well-baby and sick newborn services provided in the hospital should be billed separately from the mother's hospital claim for labor, delivery, and immediate postpartum services. 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 five (5) days, 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. 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.