This Computes!

Department of Health Services
Children's Medical Services Network
(CMS Net) - Information Bulletin #162

The Mother and Newborn Connection **Revised**

Please note changes in last paragraph.

Infants born to mothers who are Medi-Cal beneficiaries (those who have full scope Medi-Cal as well as limited scope Medi-Cal) at the time of delivery have full scope Medi-Cal eligibility during the month of birth and the following month.
If at the time of referral to CCS the infant has not yet been added to the mother's Medi-Cal case by the county Social Services Agency, the infant's CMS Net record should be established as a CCS/Medi-Cal case. The infant should be assigned a 9N CCS aid code.

Once the infant is established in CMS Net with a 9N aid code, SAR's should be issued for any and all medically necessary services provided during the month of birth and the month following. It is important to insert the special instruction that cautions the provider that coverage is only available if Medi-Cal coverage is present, this is Special Instruction # 8 (infant covered under mother's Medi-Cal only).
The Medi-Cal Provider Manual provides instructions to providers on billing for these services using the mother's Client Index Number (CIN). Claims submitted by the provider with the mother's CIN and the SAR issued for the infant will process in the EDS system and pay as full scope Medi-Cal. If the family fails to follow up with the Social Services Agency, any claims submitted for the third and subsequent months will deny as the 9N aid code will only pay if there is ongoing Medi-Cal eligibility for the infant. Authorizations for newborns must not be issued in the legacy system simply because the infant does not have Medi-Cal in his/her own right.

Subsequent to establishing eligibility in CMS Net and at some point during the infant's first two months of life, the Social Services Agency should be adding the infant to the mother's case and assigning the infant his/her own unique Medi-Cal identification number. If the caseworker does not accurately conduct a Medi-Cal Eligibility Data System (MEDS) file clearance, the caseworker will be unaware that the infant already has a MEDS CIN that was assigned at the time the CCS case was opened and as a result will assign a second CIN. If you become aware

of this new CIN you must initiate an action in CMS Net by performing a Statewide Client Index (SCI) inquiry. This will generate a report in Sacramento which will allow the two CIN's in MEDS to be combined

It has come to our attention that when adding the infant to the Medi-Cal case, some county Social Service Offices may not add the infant back to the date of birth. If you complete CCS Program eligibility for the infant and change the aid code from the 9N to 9K you must leave the first two months that were covered under the mother's eligibility as a 9N if the Social Services Office has not established Medi-Cal back to the infants date of birth. Failure to do this will result in any claims billed with the infant's CIN paying as CCS only and your county will be responsible for 50% of the payments. Services provided to the infant during the time the infant is in 9N status must be billed with the mothers CIN and the infant's CCS SAR following the Medi-Cal billing instructions for newborns.