

May 17, 2007

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**BLASTFAX**

**Emergency Medical Assistance  
Newborn Retro-Eligibility**

As you know, many US citizen babies born in Georgia from July 2006 to present were denied Medicaid eligibility for part or all of 2006 and 2007 due to administrative barriers to enrollment that had their roots in the Georgia implementation of the final interim rule for Deficit Reduction Act 2005, published by CMS on 7-12-06. After persistent advocacy by the national AAP as well as other child advocates, the CMS reversed its stance in March 2007.

Subsequently, DCH has stated that it will go back and retroactive to July 1, 2006 make babies eligible who were born to mothers on Emergency Medicaid.

Please see the attached banner message from DCH, which was sent out last month, for details on how to help these families get retroactive coverage. Helping families to get retroactive coverage to which their baby was entitled will help families by relieving them of collection efforts from hospitals and offices, for balances that indeed should have been covered by Medicaid.

Pediatricians who continued to provide services to these babies even though they did not have active Medicaid coverage, can now receive payment from Medicaid for services rendered, by helping these families to enroll retroactive to 7-1-2006, and by resubmitting claims that were denied for covered services delivered during the time of retroactive eligibility.

The Chapter will continue to provide your practices with information and resources on our website [www.gaaap.org](http://www.gaaap.org). If you have any questions regarding this information, please contact Benita L. Bowers, Medicaid Liaison at (404) 881-5089 or via email at [bbowers@mag.org](mailto:bbowers@mag.org).

***Martin Michaels, MD, FAAP***  
***President***

## Georgia Department of Community Health & ACS

### Provider Communication

<b>Subject:</b> Emergency Medical Assistance / Newborn Medicaid	<b>Priority:</b> <b>High</b>
<b>Date:</b> April 6, 2007	<b>Message ID:</b> ACSBNR04062007_1

### Dear Medicaid and Hospital Providers,

Typically, newborn eligibility for Medicaid is “automatic” as long as the mother remains Medicaid eligible, and the child is a member of the mother’s household. In these cases, the Department of Family and Children Services does not make a new eligibility determination for the infant at the time of birth. Eligibility is continued for the first year of the child’s life as long as the child continues to live with the mother. After one year, the child’s own eligibility must be established.

Certain non-citizens, who ordinarily cannot be eligible for Medicaid, can be eligible for Emergency Medical Assistance (EMA), including the labor and delivery of a child. In a July 2006 interim final rule, the Centers for Medicare and Medicaid Services (CMS) stated that in these circumstances, this “automatic” eligibility would not extend to those infants born to mothers receiving EMA.

On Tuesday, March 20, 2007, the CMS reversed this policy. Now, all babies who are born in the United States whose deliveries are covered by Medicaid will be treated equally. Any newborn whose mother is eligible for EMA will be eligible for Medicaid during the baby's first year of life as long as the child continues to live with the mother. The change is effective back to July 1, 2006. This means that some infants who were previously denied may now be eligible for Medicaid in prior months and/or ongoing months.

In some circumstances, providers can enroll these infants into the program by completing the Newborn Certification Form, DMA-550, and contacting Affiliated Computer Services (ACS) at 404-298-1228 (metro Atlanta) or 800-766-4456 (toll free) to obtain an identification number, or they can execute the Newborn enrollment process through the GHP Web Portal, [www.ghp.georgia.gov](http://www.ghp.georgia.gov) (Procedures for enrolling the infant into Medicaid are contained in Appendix G, **Part II Policies and Procedures for Hospital Services** manual). Before either process is attempted, the provider first must verify, through the GHP Web Portal or by contacting the Georgia Health Partnership at 404-298-1228 or 800-766-4456, that the woman has been entered as eligible for Medicaid on the date that the child was born.

Please note that women approved for Emergency Medical Assistance are approved for Medicaid after the emergency (such as labor and delivery) has occurred if they meet all other eligibility criteria. Therefore, their eligibility will not appear on the GHP Web Portal until after the child’s date of birth. The eligibility will be added retroactively. Please see the **Part I Policies and Procedures / Billing Manual** for information about clients who receive Medicaid retroactively (pp. II-4 and II-5).

Since the mother will only be eligible for Emergency Medical Assistance, she would not be assigned to a Care Management Organization (CMO). The child will be treated as Fee-for-Service until undergoing the enrollment process. They will be enrolled in a CMO after choosing a plan or being auto-assigned.

If you have further questions, please contact Sheila Alexander by calling 404-463-0521. Thank for your continued participation in the Medicaid and PeachCare for Kids programs.

Sincerely,  
Department of Community Health