Eligibility Assistance for Pregnant Women and Newborns: A Step-by-Step Guide for Hospitals and Birthing Centers

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Overview

The issue: The federally-facilitated marketplace (the "FFM," or <u>healthcare.gov</u>) continues to experience challenges in processing certain applications. The affected cases disproportionately involve applications from certain pregnant women and their newborn infants.

What we're doing: Tennessee is making efforts to minimize such problems for pregnant women, their newborns, and their health care providers. This Guide explains what these efforts are and places them in the context of existing business processes that remain unchanged. The Guide also lays out a step-by-step decision guide to help providers determine the right course of action for each patient.

What you can do: If you are an employee of a qualified entity (i.e., a participating hospital or birthing center), you can help babies get enrolled in TennCare or CoverKids. By doing this, you are assisting families in getting health care for their infants at the earliest possible time. In the process, you can help pregnant women get coverage for their delivery and post-partum care.

What's in this Guide? The following sections will help you help mothers and babies:

- Section A: Steps to Follow in Providing Eligibility Assistance
- Section B: New Option for Reimbursement for Emergency Medical Services
- Section C: Submitting Information on the NPE Form
- Section D: Supporting Materials
 - Income Tables (Tables A and B)
 - Immigration Table
 - Program Definitions
 - > Overview: Eligibility Assistance for Pregnant Women and Newborns
 - Process Diagram

You can also find answers to frequently asked questions (FAQs) and download copies of the forms and the "Daily Newborn Spreadsheet" (with instructions) at <u>www.tenncaretopics.com</u>.

SECTION A: Steps to Follow in Providing Eligibility Assistance

Step 1: Is pregnant woman already covered by TennCare?

Verify whether the pregnant woman has TennCare coverage by checking TN Anytime (now known as TennCare Online Services). More information about TennCare Online Services is available at <u>http://www.tn.gov/customerservice/tncr/</u>. If the pregnant woman already has TennCare, then TennCare will cover both her prenatal services and her delivery.

For pregnant women already in TennCare:

If the mother is enrolled in TennCare at the time the baby is born, the baby will be "deemed" eligible for TennCare when the birth is reported to TennCare. There is no need to determine if the family income is within TennCare guidelines. The hospital can report the birth of the newborn to be "deemed" using the Daily Newborn Spreadsheet.

If a pregnant woman is <u>not</u> enrolled in TennCare, <u>skip ahead</u> to Step #2.

Step 2: Is pregnant woman already enrolled in CoverKids?

If the pregnant woman is not in TennCare, please verify whether she has coverage through CoverKids by checking BlueAccess. More information about BlueAccess is available at http://www.bcbst.com/blueAccess. More information about BlueAccess is available at http://www.bcbst.com/blueAccess. If the pregnant woman already has CoverKids, then CoverKids will cover both her prenatal services and her delivery.

For pregnant women already in CoverKids:

If a pregnant woman is already enrolled in CoverKids when she gives birth, simply call CoverKids at **1-866-620-8864** (toll-free) to report the birth. CoverKids will determine whether the baby is eligible for TennCare or CoverKids and will take the appropriate action to facilitate coverage for the newborn.

If a pregnant patient is **<u>not</u>** enrolled in CoverKids, proceed to Step #3.

Step 3: Is pregnant woman at or below TennCare's income limit?

Assess whether the household income for the pregnant woman is at or below the income limit for TennCare. Just compare her household income with the TennCare limit in Table A (in the "Income Reference Tables" below) for her household size.

If a pregnant woman's household income is <u>**at or below**</u> the income limit for TennCare in Table <u>**A**</u>, proceed to Step 4.

If a pregnant woman's household income is <u>above</u> the income limit for TennCare in Table <u>A</u>, <u>skip ahead</u> to Step 5.

Step 4: Does pregnant woman meet other requirements for TennCare?

If a pregnant woman is at or below the income limit in Table A, you need to evaluate her citizenship status.¹ Here is the specific citizenship/immigration question that we ask:

¹ Generally speaking, a pregnant woman must be a U.S. citizen or eligible immigrant to qualify for TennCare (see box below for more details). However, the unborn children of noncitizens at or below 250% FPL are eligible for CoverKids. This means that pregnant noncitizens at or below 250% FPL can receive both prenatal care and delivery services through CoverKids if they are ineligible for Medicaid because of their immigration status.

"Are you a U.S. citizen, a U. S. national, or a qualified non-citizen who has been in the U.S. for at least 5 years (or who is otherwise exempt from the five-year bar and related prohibitions)?"

We understand that the federal rules are complicated. Immigrants may need help figuring out how they should answer. For this reason, we provide the "Immigration Reference Table" below.

If a pregnant woman² answers "<u>Yes</u>" to the citizenship/immigration question, then she is likely eligible for TennCare.

For pregnant women eligible for but not enrolled in TennCare:				
If a pregnant woman is at or below the income limit in Table A and answers "Yes" to citizenship/immigration question, then she is likely eligible for TennCare.				
If the pregnant woman presents for childbirth (and does not need prenatal services), then the hospitals should:				
(1) Help the woman fill out Newborn Presumptive Eligibility Form and complete the NPE process. Make a determination and provide the approval/denial notice, which is available at <u>www.tenncaretopics.com</u> . Then, transmit approval information to TennCare using the instructions in the "Submitting Information on the NPE Form" section below. This will enroll her newborn in TennCare.				
(2) Help the woman immediately apply for TennCare in order to cover her delivery at <u>www.healthcare.gov</u> or by calling 1-800-318-2596.				
Note: The woman must apply on or before her date of delivery in order to TennCare to cover her labor and delivery.				
After completing (1) and (2), the hospital does not need to take any additional action. The baby's health plan (or "MCO") will mail the family a new insurance card for the newborn.				
If a pregnant woman is instead discharged prior to giving birth (e.g., she presented with false labor), she should immediately go to a local health department to enroll in TennCare (in the presumptive eligibility for pregnant women category). ³ The hospital should begin the process from Step #1 again when the pregnant woman does present for delivery.				

If a pregnant woman answers "<u>No</u>" to the citizenship/immigration question, proceed to Step #5.

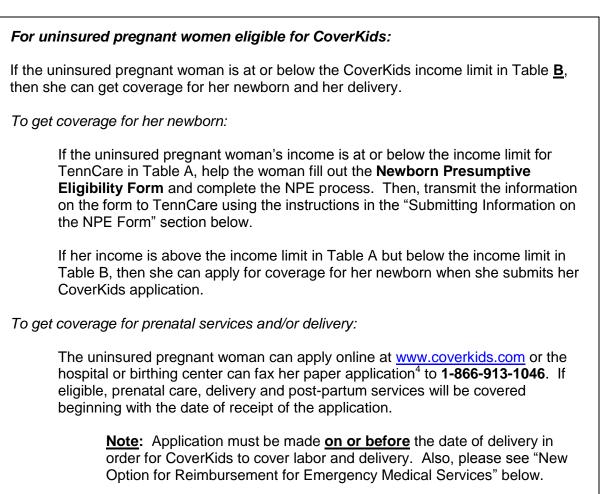
 $[\]frac{2}{3}$ These pregnant women are, by virtue of the process above, at or below the TennCare income limit in Table A.

³ A list of local health departments by county is available at <u>http://health.state.tn.us/localdepartments.htm</u>.

Step 5: Is pregnant woman eligible for CoverKids?

Assess whether the household income for the uninsured pregnant woman is at or below the income limit for CoverKids. Just compare her household income with the CoverKids limit in Table B for her household size.

Uninsured pregnant women <u>at or below</u> the 250% FPL income limit in Table <u>B</u> are likely eligible for CoverKids.



All other pregnant women (those over 250% FPL) may have options available through the FFM.

For pregnant women above 250% FPL:

Pregnant individuals above the 250% FPL income limit in Table <u>B</u> should contact the federally-facilitated marketplace to explore their options. They can visit <u>www.healthcare.gov</u> or call 1-800-318-2596 to learn more.

⁴ A specially-marked paper application for hospitals and birthing centers is available under the "Hospitals" section at <u>www.coverkids.com</u>. CoverKids will expedited processing of these specially-marked applications. See note 9.

SECTION B: New Option for Reimbursement for Emergency Medical Services

Previously, hospitals and birthing centers received reimbursement from Medicaid to cover labor and delivery and other emergency services for certain noncitizens, which is required by federal law. However, the FFM is having particular difficulties in handling these cases. The State is, therefore, making available a new process to facilitate covering these deliveries in CoverKids (rather than relying upon application through the FFM for reimbursement for emergency medical services).

Here's how this new process works: Hospitals and birthing centers should use the step-by-step decision guide above to assess eligibility. For deliveries eligible for coverage under CoverKids,⁵ the employees⁶ of the hospital or birthing center should help applicants complete (and sign and date) the specially-marked CoverKids application.⁷ Employees of the hospital or birthing center should then immediately fax all such applications to **1-866-913-1046**. The State will process eligibility for these applicants quickly, and the effective date will be the date that the State receives the application. For reference, electronic versions of the specially-marked hospital form are available at www.coverkids.com under the "Hospitals" section.

The State's new process helps to ensure that the pregnant woman will have coverage for her labor and delivery. Further, this approach allows the State to simply enroll the child in coverage when the mother reports the birth. However, it is critically important that hospitals and birthing centers work with the applicant to apply <u>on or before</u> the pregnant applicant's date of delivery. Also, please note that the applicant or her authorized representative must sign and date the CoverKids application.

For emergency services other than labor and delivery, please use the existing process through the FFM.

SECTION C: Submitting Information on the NPE Form

Employees of hospitals and birthing centers shall promptly transmit the information on the Newborn Presumptive Eligibility Forms as follows:

(a) If your hospital or birthing center has <u>not</u> yet established and tested the electronic transmission process, then your staff may fax the Newborn Presumptive Eligibility Form to 615-734-5388 on an interim basis. However, hospitals may fax this information instead of using the electronic submission process only until September 1, 2014 (Labor Day). After this date, hospitals <u>must</u> use the electronic transmission process. Please contact Don Oaks at (615) 507-6334 or <u>don.oaks@tn.gov</u> to register for the electronic process.

⁵ This population includes those pregnant applicants for whom reimbursement for emergency medical services would have covered their labor and delivery costs in the past.

⁶ Note that employees (not contractors) of the hospitals or birthing centers must provide this assistance and fax the application to CoverKids.

⁷ For reference, the specially-marked CoverKids form is distinguishable from the new, generally-available CoverKids application in two ways. First, it has a "HOSPITAL" label on the top of the first page and at the bottom of the last page, which helps us to flag such applications for immediate review. Second, it contains the contact information for the appropriately-authorized liaison at the hospital or birthing center whom we should contact if we need clarifications or additional information.

(b) If your hospital or birthing center has established and tested the electronic process to transmit presumptive eligibility information for newborns, follow the directions on the "Instructions" tab of the "Daily Newborn Spreadsheet" available at <u>www.tenncaretopics.com</u>. Populate one row of information on the "Daily Newborn Spreadsheet" for each newborn you report. If a woman were to have multiple births, please report each of the births in a separate row. Hospitals and birthing centers will submit new spreadsheets for any day on which they need to report information for a newborn; the Daily Newborn Spreadsheet will contain records only for that day (i.e., the spreadsheet is not a cumulative record).

In all cases, the hospital or birthing center shall retain the signed, dated Newborn Presumptive Eligibility Form on file (along with the fax confirmation, if applicable) for no less than seven (7) years and shall forward these forms to the State within two (2) business days of the State's request.

SECTION D: Supporting Materials

Income Tables

Table A:

TennCare Income Limit – Pregnant Women and Newborns: 195% FPL* (2015)**

Household Size***	Annual Income		Monthly Income
2	\$	31,860	\$ 2,655
3	\$	40,180	\$ 3,349
4	\$	48,500	\$ 4,042
5	\$	56,820	\$ 4,735
6	\$	65,140	\$ 5,429
7	\$	73,460	\$ 6,122
8	\$	81,780	\$ 6,815

Table B: CoverKids Income Limit – Pregnant Women and Unborn Children: 250% FPL* (2015)**

Household Size***	Annual Income		Monthly Income	
2	\$	40,622	\$	3,386
3	\$	51,230	\$	4,270
4	\$	61,838		5,154
5	\$	72,446	\$	6,038
6	\$	83,054	\$	6,922
7	\$	93,662	\$	7,806
8	\$	104,270	\$	8,690

* TennCare also adds the standard 5% income disregard so that the actual income limits displayed are 200% FPL for pregnant women and newborns and 255% of FPL for CoverKids pregnant women and unborn children.

** The State updates these income limits each year after HHS releases the new federal poverty levels (usually in February).

*** When determining household size for a pregnant woman, she is counted as herself plus the number of children she is expected to deliver.



Immigration Reference Table

We understand that the federal rules around immigrant eligibility are complicated. The following table may help applicants understand the question and how they should answer:

Α	nswer "YES" to citizenship/immigration question in Step 3 if you are a:	Answer "No" if you are a:
•	U. S. Citizen; U. S. national (i.e., person born in American Samoa or Swain's Island, or born abroad to a U. S. national parent who has met U.S. residency requirements);	 Undocumented immigrant; Lawful permanent resident who has been in the U.S. for <u>less than</u> 5 years and who is neither a veteran nor a humanitarian immigrant; Non-immigrant or non-resident alien
•	Lawful permanent resident or "LPR" (i.e., person with a green card) who has been in the U.S. for <u>5 years or more</u> ;	 (temporary residents); or Other type of immigrant not listed in the column to the left.
•	 Immigrant who is a veteran or active duty military (or spouse, un-remarried surviving spouse, or child of such an immigrant); or Humanitarian immigrant, which includes: Refugees and asylees; Vietnamese Amerasian immigrants; Cuban or Haitian entrants; Iraqi or Afghan special status immigrants; Victims of a severe form of trafficking (with a "T" visa); Abused immigrants with a VAWA petition; and Immigrants whose deportation is being withheld. 	Note: Your unborn child may still be eligible for CoverKids if you answer "No".

Program Definitions

CoverKids: Tennessee's Children's Health Insurance Program (CHIP) program for uninsured children who do not qualify for TennCare. More information is available at <u>www.coverkids.com</u>.

Emergency Medical Services: Services (including labor and delivery) for which TennCare must (under federal law) reimburse health care providers for providing to persons who would be eligible for TennCare but for their citizenship status. *See* 42 CFR §§ 435.139, 406(b).

FFM: The federally-facilitated marketplace, which is also known as "the exchange" or <u>healthcare.gov</u>.

FPL: Federal Poverty Level, which the federal government updates annually. More information is available at <u>http://aspe.hhs.gov/poverty/index.cfm</u>.

Newborn Presumptive Eligibility: A process by which a newborn is "presumed" to be eligible for TennCare and enrolls in that category pending a final eligibility determination.

TennCare: Tennessee's Medicaid program. More information is available at http://www.tn.gov/tenncare/.

Overview: Eligibility Assistance for Pregnant Women and Newborns

Pregnant Wor	nan Presents* with:	What Should Mom Do to Get Baby Covered?	What Should Mom Do to Get Her Delivery Covered?	What Should Hospital Do?	
TennCare (through AmeriGroup, BlueCare, or United)		Report birth to TennCare (or work with hospital to do so using electronic process).	(Mom already has coverage.)	Submit newborn information to TennCare using electronic process.	
CoverKids (through BlueCross)		Call 866-620-8864 to report birth(s) to CoverKids to add newborn(s) the case.	(Mom already has coverage.)	Remind enrollee to report birth to CoverKids.	
No insurance*	and household income <u>at or below</u> 195% FPL	Complete Newborn Presumptive Eligibility Form for newborn(s).		Determine NPE and give notice to applicant. Submit approvals to TennCare using electronic process.	
			For U.S. citizens and TennCare-eligible immigrants: Apply for TennCare by calling 800- 318-2596 or applying at healthcare.gov.	Help TennCare-eligible pregnant woman apply <u>by</u> <u>date of delivery</u> in order to cover delivery.	
			For other noncitizens: Complete specially-marked CoverKids application.	Fax specially-marked CoverKids application to 866-913-1046 by date of delivery in order to cover delivery.	
	and household income is above 195% FPL but at or below 250% FPL:	Complete specially-marked Co will be added to the case.	Fax specially-marked CoverKids application to 866-913-1046 <u>by date of</u> <u>delivery</u> in order to cover delivery.		
	and household income above 250% FPL:	Call 800-318-2596 or visit <u>heal</u>	Help pregnant woman navigate options.		

* Pregnant women who need prenatal care can go to their local health department to enroll in TennCare through presumptive eligibility for pregnant women if they (i) are U.S. citizens or eligible immigrants and (ii) have household incomes at or below195% FPL.

Process Diagram

