TO: ALL COUNTY CALIFORNIA CHILDREN’S SERVICES (CCS) ADMINISTRATORS, MEDICAL CONSULTANTS, AND STATE CHILDREN’S MEDICAL SERVICES (CMS) BRANCH STAFF

Subject: NEWBORN REFERRAL TO THE MEDI-CAL PROGRAM

INTRODUCTION
The purpose of this Numbered Letter is to provide a method for the CCS program to improve communications with County Social Services Agencies (SSA) regarding the establishment of CCS eligibility for infants born to mothers who received Medi-Cal at the time of birth. This will ensure the linking of an infant’s Client Identification Numbers (CIN) to the mothers Medi-Cal case and the correct payment for services authorized by CCS.

BACKGROUND
CCS providers continue to report that claims for CCS authorized services provided to infants born to mothers who received Medi-Cal at the time of birth are being denied. These denials result when the CCS program assigns a CIN to the infant in the Medi-Cal Eligibility Data System (MEDS) which is unknown to the county SSA caseworker responsible for the mother’s Medi-Cal case. Later, when the birth is reported to the caseworker, the caseworker adds the infant to the mother’s case and assigns a second CIN to the infant linked to the mother’s Medi-Cal Identification Number. This duplicate CIN problem and its solution have been addressed in “This Computes” Information Bulletin # 84, “The Mother and Newborn Connection”. The Information Bulletin #84 indicates, the solution to this problem is for the county CCS program to contact the county SSA to advise the caseworker of the CIN established by CCS for the infant and request that the CIN be added to the mother’s Medi-Cal case, if appropriate. However, some CCS county programs have indicated that they have had difficulty in maintaining liaison with their county SSA staff and that for this and other reasons they are not routinely transmitting the CCS assigned CIN to their county SSA so that the infant can be correctly linked to the mother’s Medi-Cal case.
POLICY
Effective the date of this letter, when a county CCS program establishes eligibility for an infant born to a mother who received Medi-Cal at the time of the infant’s birth and assigns a CIN to the neonate, the county program shall contact the mother’s caseworker at the county SSA and advise the caseworker of the CIN that CCS has established for the neonate and request that the CIN be added to the mother’s Medi-Cal case, if appropriate.

IMPLEMENTATION
I. In counties in which the CCS program maintains functional liaison channels with the county SSA staff, the notification and request required by this numbered letter will be most efficiently and effectively relayed by telephone contact between the CCS program and the caseworker assigned to the mother’s Medi-Cal case.

II. In other counties, the notification and request required by this Numbered Letter shall be accomplished by completing the Newborn Referral form (MC 330) (attached) and faxing the completed, executed form to the county SSA at the FAX number listed on the Newborn Referral County Central Location Phone List attached to the MC 330 as follows:

   A. Complete all required data elements in Section A and Section B of the MC 330.
   B. Enter the CIN assigned to the infant by the CCS program in the box entitled “Optional – Gateway ID number,” to the right of the newborn’s name in Section B of the MC 330.
   C. Provide answers to the three questions at the bottom of Section B of the MC 330.
   D. Complete and sign Section C of the MC 330.

If you have any questions, please contact your CMS Regional Office Administrative Consultant.

Sincerely,

Original Signed by Marian Dalsey, M.D., M.P.H.

Marian Dalsey, M.D., M.P.H., Acting Chief
Children’s Medical Services Branch

Attachment