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SHOW-ME HEALTHY BABIES

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SHOW-ME HEALTHY BABIES

For dates of service on or after January 1, 2016, Section 208.662 of the Revised Statutes of Missouri (RSMo) establishes a new program entitled Show-Me Healthy Babies (SMHB) under the authority of the Federal Children's Health Insurance Program (CHIP) and the State Children's Health Insurance Program (SCHIP). SMHB is established as a separate CHIP for any low-income pregnant woman and unborn child with household income up to 300% of the federal poverty level (FPL). The purpose is to provide pregnant women with access to ambulatory prenatal care and an opportunity to connect individuals to longer-term coverage options. Targeted low-income pregnant women and unborn children will receive a benefit package of essential, medically necessary health services identical to the MO HealthNet for Pregnant Women benefit package.

SMHB participants will be identified by the following Medicaid Eligibility (ME) Codes:

| ME CODE | DESCRIPTION |
|---------|--|
| 94 | SMHB Presumptive Eligibility |
| 95 | SMHB Pregnant Women income above 196% and up to 300% |
| 96 | SMHB Unborn Children income 0% to 300% |
| 97 | SMHB Newborns |
| 98 | SMHB Post-Partum |

The SMHB ME codes will not be active until the MO HealthNet Division (MHD) is able to implement future system changes anticipated in February 2016. In the interim, claims will be special-handled using existing ME codes.

PRESUMPTIVE ELIGIBILITY

Presumptive eligibility is provided to targeted low-income pregnant women with a household income of up to 300% of the FPL who do not otherwise qualify for another MO HealthNet program, except for Uninsured Women's Health Services (UWHS), Extended Women's Health Services (EWHS) and Gateway to Better Health. Self-attestation of pregnancy will be accepted when making determinations and there will be no waiting period for benefits to begin. The purpose is to provide pregnant women with access to ambulatory prenatal care and an opportunity to connect individuals to longer-term coverage options.

Targeted low-income pregnant women are limited to one presumptive eligibility coverage period per pregnancy. Presumptive eligibility coverage is provided through the fee-for-service program only.

A listing of MO HealthNet providers who are qualified to determine eligibility for participation in the Presumptive Eligibility program may be obtained by contacting the local Family Support Division Call Center at (855) 373-4636. Providers may call Provider Relations at (573) 751-2896 and participants may call Participant Services at (800) 392-2161 for questions regarding presumptive eligibility.

ELIGIBILITY GUIDELINES

To be eligible for SMHB, pregnant women must meet the following guidelines:

1. Pregnancy;
2. Household income must be at or below 300% of FPL;
3. No access to employer insurance or affordable private insurance which includes maternity benefits; and
4. Pregnant woman cannot be eligible for any other MO HealthNet programs (with the exception of Uninsured Women's Health services, Extended Women's Health Services, or Gateway to better Health).

The unborn child's coverage period will be from date of application to birth. For targeted low-income pregnant women, postpartum coverage will begin on the day the pregnancy ends and extend through the last day of the month that includes the sixtieth (60th) day after pregnancy ends.

For targeted low-income pregnant women for whom citizenship cannot be verified, SMHB benefits will end the day after discharge from hospital after the birth of the child. In order to receive post-partum services, global prenatal/delivery/postpartum care must be billed. For information on billing global prenatal/delivery/postpartum care, see Section 13.57.H of the Physician's manual located on the MO HealthNet website at: http://manuals.momed.com/collections/collection_phy/print.pdf.

NEWBORN ELIGIBILITY REDETERMINATION

Unborn children receive SMHB coverage until birth and will receive a redetermination after their birth. If found eligible, the newborn will be transitioned to a new MO HealthNet category of assistance for a new eligibility period. Please note that this is different than Emergency Medical Care for Ineligible Aliens coverage in which labor and delivery is paid for by MO HealthNet, and the newborn is deemed eligible for MO HealthNet upon birth.

DEEMED NEWBORN

After birth, newborns of the targeted low-income pregnant women will be automatically enrolled into CHIP for the first year of life. Newborns will receive a benefit package identical to CHIP Premium level coverage but participants will not pay a premium for this eligibility period.

MANAGED CARE

Targeted low-income pregnant women and unborn children living in areas of the State served by a MO HealthNet Managed Care Program will receive SMHB benefits through a health plan. Presumptive eligibility coverage is provided through the fee-for-service program only and reimbursed outside of the MO HealthNet Managed Care Program. After the presumptive eligibility period ends, pregnant women and unborn children who become eligible and who reside in a managed care area of the state will be enrolled in a health plan.

Provider Bulletins are available on the MO HealthNet Division (MHD) (Formerly the Division of Medical Services) Web site at <http://dss.mo.gov/mhd/providers/pages/bulletins.htm>. Bulletins will remain on the Provider Bulletins page only until incorporated into the [provider manuals](#) as appropriate, then moved to the Archived Bulletin page.

MO HealthNet News: Providers and other interested parties are urged to go to the MHD Web site at <http://dss.mo.gov/mhd/global/pages/mednewssubscribe.htm> to subscribe to the electronic mailing list to receive automatic notifications of provider bulletins, provider manual updates, and other official MO HealthNet communications via E-mail.

MO HealthNet Managed Care: The information contained in this bulletin applies to coverage for:

- MO HealthNet Fee-for-Service
- Services not included in MO HealthNet Managed Care

Questions regarding MO HealthNet Managed Care benefits should be directed to the patient's MO HealthNet Managed Care health plan. Before delivering a service, please check the patient's eligibility status by swiping the MO HealthNet card or by calling the Provider Communications Interactive Voice Response (IVR) System at 573-751-2896 and using Option One for the red or white card.

Provider Communications Hotline
573-751-2896