



Maternal and Child Health Access

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TO: Advocates for Children and Families
FROM: Lynn Kersey, MA., MPH
Executive Director
RE: CHDP Gateway Issues for “Deemed Eligible” Infants
DATE: January 18, 2005

As part of MCHA’s *Newborn Enrollment Project*, we have been advocating for better ways to enroll infants into Medi-Cal for the first year of life, including through the CHDP Gateway.

We are happy to report that starting June 1, 2004, infants whose mothers had Medi-Cal for the delivery and who otherwise meet the criteria for being “deemed eligible” are no longer being automatically terminated from coverage by the Gateway after a maximum of two months for failure to submit a follow-up application.

MCHA is very excited about these developments: over 6,000 infants each month are now being enrolled into Medi-Cal for the first year of life without a follow-up application.

We know, however, that even more “deemed eligible” infants could be getting their Medi-Cal—and with it, better access to care and improved health outcomes—if just a few simple improvements were made to the new system, as outlined below.

For more information about how you can help to achieve these goals, please contact me at Lynnk@mchaccess.org or (213) 749-4261. We’d also like to hear from consumers as well as providers about their experiences with this new Gateway process and your suggestions for improvement.

Thank you.

CHDP Gateway Issues for “Deemed Eligible” Infants

1. **Provider training:** Providers haven’t been trained by the state yet on the new procedures for identifying “deemed eligible” (DE) infants through the CHDP Gateway (GW). Provider trainings are urgently needed.
2. **Provider prompts:** To help ensure that providers are filling out the section for infants under age one year that collects information about the mother’s Medi-Cal status in the birth month, the GW’s electronic application should:
 - a. Use a “yes/no” format for gathering the information, and prevent the screen from moving forward until there are answers about the mother’s Medi-Cal; or
 - b. Add a “pop-up” reminder question when the lines about the mother’s Medi-Cal are left blank and the child is under age one year, to make sure that the provider has asked the family for the missing information.
3. **Ensuring correct numbers are provided:** Similarly, to help ensure that the correct DOB and BIC/SSN are given for the mother, a “pop-up” should be added, asking the provider to double check these numbers before the screen moves on.
4. **Mother’s name:** To help ensure matches, the GW application asks for the mother’s date of birth, in addition to her Medi-Cal Beneficiary Identification (BIC) number or her Social Security Number. Our assumption, therefore, is that discrepancies between how the mother’s name appears on her Medi-Cal case versus how she lists her name on the child’s GW application will *not* interfere with making matches in the Medi-Cal Eligibility Data System (MEDS).
 - a. If that’s not correct, something should be done to minimize missed matches. E.g., add a question like: “Is your current name the same as your name on your Medi-Cal card?”
5. **“Pending” infant report notation in MEDS:** It’s our understanding that if a family has reported the infant’s birth to the county social services department, some counties may make a “pending” notation in MEDS before actually enrolling the infant into Medi-Cal and issuing the BIC—is this correct? We also understand that when this “pending” notation is in MEDS, the GW will not recognize the infant as DE but will instead grant temporary coverage only and instruct the family to submit a regular application. To address this barrier:
 - a. The GW should override the “pending” notation to enroll the infant directly into Medi-Cal.

- b. If that's not possible, the message from the GW given to the family at the time of the CHDP visit should confirm that there is a "pending" case for the infant and instruct the family to deliver a copy of this GW message to the county to speed up the infant's enrollment.
6. **Nested cases:** The state should clarify whether the GW has a mechanism for ensuring that, if a teen mom is part of her mother's Medi-Cal case, the teen's infant will be recognized as DE, and what that mechanism is.
7. **Mother's Aid Code:** The state should also clarify which, if any, Aid Codes for the mother are omitted when MEDS searches for a match for her in the infant's birth month.
8. **Data:** The state has distributed an 11-column report showing total numbers of: children pre-enrolling through the GW, requesting a joint application, not requesting a joint application, the percent of children receiving "extended eligibility," the number identified as DE (i.e., Aid Codes 8U and 8V), and other items. The following additional information should also be made available to the public on the CHDP program website and updated monthly:
 - a. Breakdowns of all data items for infants under age one year
 - b. County breakdowns
 - c. Reasons for the "Denied" column for infants under age one year
 - d. An explanation of the term "Other" for the column "Other Eligibility" for infants under age one year.
9. **Getting DE infants from the GW into the local county social services department database:** At present, there is no process in place for getting the DE cases from the GW/MEDS database into local county social services department databases. The infants are protected, because they continue to have their Medi-Cal coverage in fee-for-service, but some plans, providers and counties have expressed concern, and the absence of a process for the transition creates confusion. The state should clarify.