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## NEWBORN ENROLLMENT INTO MEDI-CAL

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A Medi-Cal application usually requires completing an application form and providing verification such as proof of income. But for babies whose mothers had Medi-Cal at the time of delivery, there's a "shortcut" for enrollment for the first year of life *without* any of the usual paperwork.

### Who is eligible?

- Infants born to teens or women who were receiving Medi-Cal at the time of the birth. These infants are "deemed eligible" for "full-scope" Medi-Cal for the first year of life.
- Reminder: Newborns are automatically covered for full-scope Medi-Cal under the mother's Medi-Cal card and number during the birth month and the month after. This gives families a little breathing room to inform the County that the baby has been born so that the County can issue a separate Medi-Cal card and number for the newborn.

### What is "deemed eligibility"?

- It means that the infant must be treated as if he or she has already gone through the application process and been determined eligible.
- Eligibility starts in the birth month and lasts at least until the infant's first birthday, regardless of any increases in the family's income.
- "Deemed eligible" infants have a legal right to be enrolled in Medi-Cal *without* an application, Social Security number, or any other documentation. As soon as the County is informed of the baby's birth, a Medi-Cal card and number must be issued right away.

### What if the mother's Medi-Cal covered only pregnancy-related and emergency care?

- It doesn't matter; the infant is still "deemed eligible" for full scope Medi-Cal for the year.

### What if the mother is under age 21 and had "Minor Consent" Medi-Cal?

- It doesn't matter, the infants of Minor Consent Medi-Cal moms are treated just like infants of moms with other kinds of Medi-Cal: they are "deemed eligible" for full-scope Medi-Cal until the first birthday.

### What if the mother has applied for Medi-Cal but there is no decision before the baby is born?

- The baby's separate Medi-Cal won't be approved until after the mother's Medi-Cal is granted, but eligibility for the infant must go back to the month of birth.

### What if the family has, or is applying for, CalWORKs?

- The special rules on "deemed eligibility" for the infant still apply if the mother had Medi-Cal for the delivery. The baby's Medi-Cal should not be delayed while the requirements for CalWORKs are met.

### **What is the process for enrolling a “deemed eligible” infant into Medi-Cal using the shortcut?**

- The most direct way is to contact the mother’s Eligibility Worker, by phone. See the section, “**What if there is a delay?**”, below, if the baby’s card is not received within 10 days.
- Some counties, such as Los Angeles, send expectant mothers a form, asking them to fill it out and return it after the baby is born; keep a copy of the form that is returned to the County.
- You also have the option of faxing or mailing a Newborn Referral Form (attached in Spanish and English) to the County. **Please note:** The fax number for Los Angeles County is (213) 763-8666.
  - Using this simple, one-page form is optional, but it is good idea, because it asks for all the information the county needs to issue a Medi-Cal number and card for the newborn. You will also have a record showing the form was received at the County if you keep the fax confirmation printout.
  - How can I get Newborn Referral Forms? You can photocopy the attached form. To get bulk orders of the form in triplicate, call the State Department of Health Services (DHS) at (916) 654-9162.

### **What information is needed to enroll the newborn with the shortcut?**

- Only the mom’s Medi-Cal number and basic identifying information about the mother and infant, such as name, address, and date of birth. This is so, whether you call the County or use the Newborn Referral Form.
- To speed things up, the County might also ask for the mother’s Client Identification Number (CIN) or the infant’s CHDP Gateway Beneficiary Identification Card (BIC) number, if the infant has one.

### **How long will it take to enroll the newborn with the shortcut?**

- If the mother’s Medi-Cal or CalWORKs is approved by the time of the infant’s birth, the infant should be enrolled right away (within 10 days).
- If the mother’s application is still pending at the time of the birth, the infant’s Medi-Cal should be approved at the same time that the mother’s application is approved. The infant’s coverage must go back to the birth month.

### **What if there is a delay?**

- Try to contact the mother’s Eligibility Worker or the newborn enrollment coordinator for your County, if there is one. If the delay persists, consider asking for a “fair hearing;” to get a hearing, call 1-800-952-5253.
- *You can also call Maternal and Child Health Access at 1-213-749-4261 or call the Health Consumer Center of Los Angeles at 1-800-896-3202.*
- If the County says there is a delay because of Cal WORKS, refer to All County Welfare Directors Letter No. 03-46, which instructs counties to immediately issue a Medi-Cal card and number for “deemed eligible” infants when the family has or is applying for Cal WORKS.
- Remember, the family can use the mother’s Medi-Cal number and card to pay for care for the newborn during the month of birth and the month after while trying to get the newborn a Medi-Cal number and card of his or her own.

### **How long can the shortcut be used for enrolling an infant into Medi-Cal?**

- Until the first birthday. When the infant is enrolled, the benefits must go back to the month of birth, even if the child is 11 months old.
- It's important, however, to let the County know about the birth as soon as possible, because the baby needs his or her own card! Coverage for a newborn under the mother's number lasts only until the end of the month after the birth month.

**What if the infant received his/her Medi-Cal at a CHDP Gateway visit?**

- For children over one year old, Medi-Cal under the CHDP Gateway automatically cut off at the end of the month after the CHDP visit if a family does not submit a regular application during that time.
- As of June 1, 2004, the Gateway application form asks for the mother's date of birth and her Medi-Cal BIC number or her Social Security Number if the child applying is an infant under age one year. The Gateway computer then "looks for" the mother in the state's Medi-Cal database, even if her Medi-Cal case has already been closed; if an open *or* closed case for the mother is found, the Gateway computer issues her deemed eligible infant a Medi-Cal card that last at least until the first birthday. These infants will not have to complete or submit the follow up application to keep their Medi-Cal until age one year. Their Medi-Cal will be retroactive to the birth month.
- New messages from the Gateway computer will tell the families of infants who are deemed eligible that the infant has Medi-Cal starting right away and that a BIC card will be sent. If the infant already has a BIC, the family will instead be told to keep using it. For most of these deemed eligible infants, the Medi-Cal "aid code" will be 8U; a small number of infants will be in aid code 8V whose mothers had "share of cost" and reported meeting their "share of cost" for pregnancy-related care in the birth month.

**Enrolling the infant in a Medi-Cal Managed care plan.**

- In many counties, after the infant is enrolled in Medi-Cal, the family will be sent information about signing him or her up for a Medi-Cal Managed Care plan. It is important to complete these managed care selection forms and return them on time; otherwise, Medi-Cal will pick a plan and doctors for the infant, which may not be the doctor or plan you want and which may not be convenient.

**What can be done if an infant has problems getting his or her Medi-Cal through "deemed eligibility"?**

- You can call Maternal and Child Health Access at 1-213-749-4261 or call the Health Consumer Center of Los Angeles at 1-800-896-3202.