

Support SB 1458 / HB 4476 by Sen. Miles & Rep. Campos

Provide Information to Parents and Medical Providers to Improve Health Coverage for Newborns

Many Newborn Babies are Falling Through the Cracks and Not Getting Timely Health Coverage

- If a mother is enrolled in Medicaid insurance when she delivers her baby, under federal law her newborn is eligible and must be automatically enrolled in Medicaid at birth and through the first full year of life.
- However, state data reported to CMS show that **during 2018, 63,775 Texas babies had some type of coverage interruption during the first year of their life, indicating that the automatic process is not working.**¹
- Many pediatric clinics have reported they are unaware that a mother's Medicaid ID can be used if a newborn has not been assigned one yet. These clinics then inform patients they will be responsible for their medical bills, most likely dissuading low-income families from taking babies to check ups or getting other medical care.



This Means Newborns are Missing Out on Health Care

- During those first weeks and months, it is critical that newborns have multiple well-baby check-ups, screenings, and other medical care they need for a healthy start.
- Any delays in medical care can cause significant health issues for children.

Senate Bill 1458 and House Bill 4476 will:

- Direct HHSC to provide an annual notice to medical providers stating that if a Medicaid ID number for a child has not been assigned yet, they may use the mother's Medicaid number for reimbursement.
- Include in the resource pamphlet given to parents of newborns when discharged from the hospital information about eligibility and the process for applying for Medicaid for their child.

¹“Early Periodic Screening Diagnostic and Treatment.” Centers for Medicare and Medicaid Services (CMS). CMS Form 416. More recent state reports to CMS have incomplete data. <https://www.medicaid.gov/medicaid/benefits/early-and-periodic-screening-diagnostic-and-treatment/index.html>