



CHIP Eligibility

OMB Control Number 0938-1188
OMB Expiration date: 03/31/2016

Separate Child Health Insurance Program Eligibility - Deemed Newborns	CS13
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Section 2112(e) of the SSA and 42 CFR 457.360

<p><input checked="" type="checkbox"/> Deemed Newborns - Children born to targeted low-income pregnant women are deemed to have applied for and be eligible for CHIP or Medicaid until the child turns one.</p> <p><input type="checkbox"/> The state operates this covered group in accordance with the following provisions:</p> <ul style="list-style-type: none"><input checked="" type="checkbox"/> The child was born to an eligible targeted low-income pregnant woman under section 2112 of the SSA.<input checked="" type="checkbox"/> The child is deemed to have applied for and been found eligible for CHIP or Medicaid, as appropriate, as of the date of the child's birth, and remains eligible without regard to changes in circumstances until the child's first birthday. <p>The state elects the following option(s):</p> <ul style="list-style-type: none"><input type="checkbox"/> The state elects to cover as a deemed newborn a child born to a mother who is covered as a targeted low-income child under the state's separate CHIP on the date of the newborn's birth.<input type="checkbox"/> The state elects to recognize a child's deemed newborn status from another state and provides benefits in accordance with the requirements of section 2112(e) of the SSA.<input type="checkbox"/> The state elects to cover as a deemed newborn a child born to a mother who is covered under Medicaid or CHIP through the authority of the state's section 1115 demonstration on the date of the newborn's birth.
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PRA Disclosure Statement

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1188. The time required to complete this information collection is estimated to average 40 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.