

## **Template CS13 - Deemed Newborns**

**Statute:** Section 2112(e) of the SSA

**Regulation:**

**Additional References:** SHO # 09-009, dated August 31, 2009

### **INTRODUCTION**

To be completed by States with separate child health assistance programs.

This template describes the one-year coverage for infants born to targeted low-income pregnant women.

### **BACKGROUND**

This coverage is provided to newborns if their mother was covered as a targeted low-income pregnant woman under the CHIP state plan on the date of the child's birth. The newborn is deemed eligible for CHIP or Medicaid without an application or further determination of eligibility and the coverage lasts until the child turns one year of age.

Under the Children's Health Insurance Program Reauthorization Act of 2009 (CHIPRA), states were given the option to provide pregnant women coverage through an amendment to a state's CHIP plan (Section 2112 of the Social Security Act). CHIPRA also requires that children born to women receiving pregnancy-related assistance shall be deemed on the date of the child's birth to have applied for coverage under CHIP or Medicaid, and shall be found eligible for the appropriate program until the child reaches age one (Section 2112(e) of the Act).

Guidance provided in the SHO # 09-009, dated August 31, 2009 notes that states should use available information to first screen for Medicaid eligibility and then automatically enroll the newborn in either Medicaid or CHIP as appropriate. In addition, states that cover pregnant women through a CHIP 1115 demonstration may be required, depending on the terms of their demonstration, to also deem newborns as eligible for Medicaid or CHIP. Finally, a newborn born to a woman covered for labor and delivery through emergency Medicaid (as sometimes happens in the CHIP option of coverage from conception to birth) is deemed eligible for Medicaid.

### **TECHNICAL GUIDANCE**

This template is broken down into the following sections:

- Eligibility Assurance
- Mandatory Provision
- Optional Provisions

Eligibility Assurance

Template CS13 begins with the State assuring that it operates this eligibility group consistent with the criteria and provisions selected in the template. The State provides this affirmative assurance by checking the box immediately below the description of the group at the top of the template. If the State does not check this box, the system will not accept this template for review and approval.

#### Mandatory Provision

The first provision is pre-selected as it is required of all States.

#### Optional Provisions

There are three options from which the State may select either one or more:

- The child is deemed to have applied for and been found eligible for CHIP or Medicaid, as appropriate, under the State Plan as of the date of the child's birth, and remains eligible for CHIP without regard to changes in circumstances until the child's first birthday.
- The State elects to cover as a deemed newborn a child born to a mother who was covered as a child for the date of the newborn's birth under the State's separate CHIP.
- The State elects to recognize a child's deemed newborn status determined by another state, and provide benefits under this eligibility to that child until the child's first birthday.