



# Provider Notice

February 14, 2024

## **Newborn Eligibility and Authorizations Update**

CountyCare Health Plan is committed to ensuring prompt claim payments for newborns that experience a long length of stay due to complex medical needs (usually admitted and managed in a Neonatal Intensive Care Unit (NICU)).

### **PRIOR AUTHORIZATION SUBMISSION**

As previously noticed, ProgenyHealth will be taking over the utilization management for NICU admissions effective December 13, 2023. See notice [here](#). With this change, the notification of the newborn eligibility will change as well. Hospitals should check the MEDI system frequently to confirm the newborn enrollment. If CountyCare enrollment is confirmed, please notify Progeny as soon as possible within forty-five (45) days and include a screen shot of the newborn enrollment to Progeny via their Sfax at (877) 868-9679 with the clinical documentation. Progeny will review the clinical documentation and enter an authorization under the newborn Medicaid ID.

If after the 45<sup>th</sup> day following birth, no Medicaid ID has been provided to Progeny, the NICU authorization case will be closed under the mother's ID. No additional days will be approved.

You will have an additional thirty (30) days to send information for a retrospective review, if you identify that the newborn has been enrolled in CountyCare. As noted above, please send a notification and screen shot of newborn enrollment from MEDI to Progeny via Sfax at (877) 868-9679 and the NICU case can be reopened under the newborn's Medicaid ID.

### **CLAIMS SUBMISSION**

A prior authorization is required prior to submitting claims for payment. If a facility or professional claim is received prior to the authorization being approved and transferred to the newborn's ID then the claim may deny. Newborn claims are also required to be billed with the newborn information including their RIN.

In the event the newborn is added after the 46<sup>th</sup> day you should check MEDI to verify where claim(s) should be directed (MCO vs. HFS). Claims for services provided from date of eligibility should be sent to CountyCare. An authorization with CountyCare under the newborn will still be required to pay for these services.

### **Contact us**

Please contact CountyCare Provider Services at **312-864-8200, Option 6**. You can also use our Interactive Voice Response (IVR) system to verify eligibility. The Provider Services Representatives can assist you with eligibility and claim status. They can also connect you with your assigned PR Representative.

Thank you for working with us to ensure that CountyCare members receive quality care at the right time and in the right setting. If you have any questions or would like additional information, please contact your assigned Provider Relations Representative or if you do not know your assigned Representative, please contact [CountyCareProviderServices@cookcountyhhs.org](mailto:CountyCareProviderServices@cookcountyhhs.org).