

**Date: September 16, 2024**

**Partnership HealthPlan of California Medi-Cal**

**Important Provider Notice: #489**

**Subject: Provider Billing for Newborn Gateway Changes – Effective for Service Dates On and After July 1, 2024**

This is to inform providers and their billing staff of the billing requirements for newborns based on the state's Newborn Gateway Program for member's assigned to Partnership HealthPlan of California.

From DHCS FAQ <https://mcweb.apps.prd.cammis.medi-cal.ca.gov/faq/newborn-gateway-faq>

**? How will Medi-Cal billing be affected by Newborn Gateway?**

When an infant is enrolled into eligibility through the Newborn Gateway, claims should be billed under the newborn's distinct Client Identification Number (CIN). However, the Newborn Gateway does not change existing Deemed Infant policy. Infants whose birth, eligibility and CIN were reported after a delay are flagged with a "B1" indicator. B1 is considered to be active and eligible for coverage, and claims should be submitted under the mother's CIN for any B1 months.

The Newborn Gateway Program does not change the existing Deemed Infant policy. If the newborn's mom is a Partnership member for the month of birth and/or following, the newborn is flagged with a "B1" indicator in the state's eligibility systems. B1 indicator is active and eligible for coverage for the month of birth and the following month and billed under mom's CIN#.

**Claims for services performed on the newborn for the month of birth and the following month:**

- Newborn is not enrolled in the Newborn Gateway Program, continue to bill under the mom's CIN#.
- Newborn is enrolled in the Newborn Gateway program and has a CIN#, bill under the mom's CIN# and include the newborn's CIN# information on the claim in the Remarks section.
- Effective on the third month, claims can be billed with the newborn's Gateway CIN#.

For further information regarding this, please contact the Partnership Claims Department at (707) 863-4130.