

## REPORTS

Districts will be informed about the addition to a case or opening of new MA-only cases for newborns via a new report. Some of the data will be primarily informational; for example, the district will be notified when an infant is added to an existing case or an MA-only case is created for the infant. This is not to suggest that follow-up is not appropriate if, for example, the mother is on cash assistance and the infant is added for MA-only. **However, some of the reports provided to districts by SDOH will require follow-up action(s) by the district.**

If a district, in investigating a report, determines that the appropriate case for the mother was closed within the last three (3) months, it should open a new, MA-only case for the infant immediately, if SDOH has not already done so. The district should then review the closing of the mother's case, since she was pregnant at the time of the closing, and take action to provide the mother with coverage as appropriate, including provision of client notice.

A description of the reports to be provided to districts and expected district action(s) is provided in the following.

Note: If we find that the newborn has already been added to WMS based on DOB and sex, SDOH will not update the case, but will report this finding for the district's information.

**A. Multiple Matches** - There will be instances in which multiple matches are identified for the mother, or multiple case involvement. SDOH will not add the newborn in these instances; a report will be sent to the district. Screen prints will also be sent so that the district can see the possible matches that were identified. The district must review the matches, determine the correct case, and manually add the infant or create a new MA-only case for the infant, as appropriate, and send proper client notice.

Multiple matches or cases may be identified with involvement of two or more districts. In such instances, the report will be sent to the district of the mother's residence as reported by the hospital. Districts also must review these cases to determine the appropriate district of fiscal responsibility, and resolve any discrepancy in accordance with existing district procedures for this type of situation.

### **B. Errored and Pended Cases**

- **Upstate** - If a match is found, but the case is in "errored" or "pended" status, the newborn will not be added to the case. (Please note, the term "errored" or "pended" status does not refer to cases in application status. We cannot identify these cases and will not match or update these cases.) Cases found in errored or pended status also will be reported to the district. The district will need to review the case, correct the error or the pend, and add the newborn or open a new MA-only case for the

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infant as appropriate, and send the appropriate client notice.

- New York City - In New York City, the newborn will be added to a case that is in “error” or “pend” status. No report will be generated.
- C. Match Found, Infant Deceased** – If a match was found on the mother, but the information from the hospital indicates that the infant is deceased, there will be an “alert” on the report notifying the LDSS of this circumstance. In this instance, we will be adding the infant as an “add/delete” so that the costs of delivery can be paid. The mother will receive a notice that this action has been taken. (The date of death will not be received by WMS, so the close date will be the date the record is submitted by the hospital.)
- D. Match Found, Infant Deceased, Mother Closed within Three Months** – In this instance, no action will be taken by SDOH. The LDSS should open an MA-only case for the newborn to cover the costs of the delivery, then close the case. The mother should receive a notice that this action has been taken. As noted above, the date the record was submitted by the hospital will be the date that should be used for closing the case.
- E. CIN Match, Sex not Female** - In instances in which there is a match made on CIN, but the gender of the person matched is “male” on WMS, the district will be notified. In these instances, the newborn will have been added to the case. The district should review the WMS record to determine the reason for the discrepancy and make corrections as necessary.
- F. Case Opened for Infant, Address in Another District** – In those instances in which a mother’s case was closed within three months and a case for the newborn is opened, the LDSS will be alerted if the address received from the hospital is out of the district. In these instances, the LDSS may need to work with the district in which the infant now resides to resolve the issue. However, the district may not close the case in this instance simply because the infant now resides in another district.
- G. Case Opened for Newborn, Mother on SSI** – When the mother is on SSI, a new case will be opened for the infant. The report to LDSS will contain information to identify the mother. The LDSS should take appropriate action if there is also a case for the unborn, or a separate case for the newborn’s siblings.
- H. Managed Care** - A paper copy of the WMS screen which indicates that a managed care enrollment for the newborn has been completed by the Interim Unit will be provided to the district. (Once the automated system is operational, the district will receive a daily managed care enrollment report via BICS.)
- I. Additional Reports** – Additional information that will be included in the newborn reports is listed below.

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- Match found, but newborn was previously added.
- Match found, newborn added to mother's case.
- Match found, case opened for newborn (MA-only) - case type 20.
- Match found: indicator from hospital that infant weighs less than 1200 grams (which means that, if mother is in managed care, infant was not enrolled in her plan. In this case, infant will be fee-for-service).