



MassHealth
All Provider Bulletin 305
December 2020

TO: All Providers Participating in MassHealth

FROM: Daniel Tsai, Assistant Secretary for MassHealth

RE: Policies and Procedure for Newborn Members: Eligibility, Enrollment and Payment

Summary

This bulletin explains changes to MassHealth eligibility and managed care plan enrollment processes for newborn children of all MassHealth enrollees, including those in the MassHealth fee-for-service (FFS) program, Accountable Care Partnership Plans (ACPPs), Primary Care Accountable Care Organizations (PCACOs), Managed Care Organizations (MCOs), One Care Plans and the MassHealth Primary Care Clinician (PCC) Plan. Such changes, which become effective January 1, 2021, are designed to improve the member and provider experience related to the enrollment of newborns in MassHealth. These changes include:

1. Updates to the Notification of Birth (NOB) form.

Two new fields in the paper and electronic NOB forms will allow the newborn's parent/guardian to voluntarily enter selections for managed care plan and primary care provider (PCP) enrollment for the newborn. A field has been added to indicate whether the mother is eligible for or enrolled in ConnectorCare. Additionally, forms with "BABY BOY" or "BABY GIRL" in the place of the child's name will not be processed by MassHealth effective January 1, 2021.

2. Changes to MassHealth managed care plan enrollment processes for newborns.

There will be a default time-limited fee-for-service period retroactive to birth until a newborn's parent/guardian selects a managed care plan or MassHealth assigns the newborn to a plan, as discussed below.

Establishing Eligibility

The Notification of Birth (NOB) form is the primary method MassHealth uses to establish newborn eligibility. The hospital where the newborn was delivered must submit a NOB form to MassHealth.

Starting January 1, 2021, MassHealth will require acute inpatient hospitals to use an updated paper or electronic Notification of Birth (referred to as the "NOB-1" form and "eNOB" respectively, but as "NOB" collectively in this bulletin).

Hospitals must submit the NOB forms to MassHealth as soon as possible after birth and no later than 10 days after birth whenever possible.

If a hospital NOB form is incomplete, completed in error, delayed, or in the case of non-hospital births, the parent/guardian can establish newborn eligibility by notifying MassHealth of the child's birth through:

MassHealth
All Provider Bulletin 305
December 2020
Page 2

- a. calling the MassHealth Customer Service Center; or
- b. speaking with a Certified Application Counselor.

Upon notification of a birth, MassHealth evaluates the newborn information to determine if the baby was born to a mother enrolled in or eligible for any MassHealth coverage type on the child's date of birth. If so, the child will be approved for MassHealth Standard coverage until the child's first birthday. The eligibility will be applied retroactively to the newborn's date of birth, allowing for coverage of services rendered by the MassHealth FFS network before eligibility was established.

Overview of Changes to the NOB Form and Electronic Notification of Birth

Starting January 1, 2021, MassHealth will require acute inpatient hospitals to use an updated Notification of Birth paper form, referred to as the "NOB-1." This form, available January 1, 2021 at www.mass.gov/lists/masshealth-provider-forms-by-provider-type-h-m includes additional fields for information that will help ensure proper payment for services. These changes are also reflected in the electronic Notification of Birth, referred to as the "eNOB," which is described below. Hospitals are encouraged to use the eNOB in place of the paper NOB-1 form.

Revised NOB Form

While all new fields are explained on the reverse of the new form, some key portions of the new form include the following:

1. The revised form asks providers to indicate whether the mother has been determined ConnectorCare eligible or is enrolled in ConnectorCare. Hospital staff filling out NOB forms are encouraged to follow the guidance in the Health Connector's "[Provider Guide to Identifying ConnectorCare Coverage](#)," available at www.mass.gov/lists/masshealth-provider-forms-by-provider-type-h-m in the "Hospitals" section. The guide provides ways to identify whether a mother participates in or is eligible for ConnectorCare. Provider identification of ConnectorCare-eligible or enrolled mothers on the NOB will help MassHealth and the Health Connector enroll newborns appropriately as of their date of birth and avoid gaps in coverage.
2. The newborn's parent/guardian can *voluntarily* enter selections for a managed care plan and primary care provider (PCP) enrollment for the newborn using new fields added to the form. The NOB form will have two new fields for the parent/guardian to voluntarily select a managed care plan and PCP for their child. Completion of those fields will allow the family to convey their selection of a managed care plan or PCP to MassHealth as soon as possible after birth of the child. Under existing policy, families are required to report the birth of their child to MassHealth within 10 days after it occurs. The inclusion of these new fields will allow families to communicate their voluntary managed care plan and primary care provider selection to MassHealth in one communication. The managed care plan and PCP fields are not required if the parent/guardian declines to select one or both at the time the NOB is completed.

Hospital staff should provide support to parents/guardians who need help choosing a managed care plan and PCP for their newborns by referring them to consult MassHealthchoices.com, the MassHealth Enrollment Guide, or by calling MassHealth Customer Service at (800) 841-2900.

MassHealth
All Provider Bulletin 305
December 2020
Page 3

3. NOB forms should be submitted to MassHealth as soon as possible after birth, no later than 10 days after birth whenever possible. Providers should note that NOB forms with “Baby Boy” or “Baby Girl” in place of the child’s name will not be processed after January 1, 2021. If a newborn’s medical condition is such that the parent/guardian has not been able to name the baby within the 10-day NOB submission timeframe, hospitals should email NewbornAdd@mass.gov for instructions on how to establish eligibility for the newborn, or contact a MassHealth Enrollment Center.
4. Please note that the form includes space for two newborns as it did previously.

Electronic Notification of Birth Application

Hospitals may submit the eNOB information electronically using the MassHealth Electronic Notification of Birth (MeNoB) application, available via the MassHealth Virtual Gateway. The MeNoB offers mothers’ eligibility information via EVS, an easy way to search previously submitted NOBs, and other features. Those interested in MeNoB should contact Sam Evans at samuel.evans@mass.gov for more information.

Notification of Birth and Managed Care Enrollment Processing

Once a completed NOB form is received, either by fax or electronically, the eligibility information is typically loaded into the MassHealth eligibility system in one business day. Managed care enrollment information is typically loaded into the MassHealth system within two to three business days once eligibility is established.

Newborn Managed Care Enrollment

When MassHealth eligibility is established for a newborn, the baby is enrolled in MassHealth’s fee-for-service program, retroactive to the newborn’s date of birth. Starting January 1, 2021, parents/guardians will have an opportunity to voluntarily select a managed care plan for their child at the time eligibility is established, using the new managed care plan and PCP selection fields in the NOB form. If the parent/guardian does not select a plan on the form, the baby will remain in MassHealth’s fee-for-service program for up to 14 days after the NOB is processed. At any time during this period, the parent/guardian may select a managed care plan for the child voluntarily. While in MassHealth’s fee-for-service program, the newborn will have access to the entire MassHealth FFS network.

Managed care plan enrollment for newborns will not take effect until after the plan enrollment has been processed. MassHealth will no longer retroactively date a newborn’s managed care enrollment to the date of birth. This change in policy is intended to reduce complications related to payment of provider claims as families select their pediatric provider of choice and establish relationships with other key providers, as needed.

Parents/guardians may make a voluntary managed care plan or PCP selection by:

- a. completing the NOB form sent in to MassHealth by the hospital at which the child was delivered;
- b. using the online Enrollment Form at www.MassHealthchoices.com;
- c. calling MassHealth Customer Service; or

MassHealth
All Provider Bulletin 305
December 2020
Page 4

- d. submitting a MassHealth Health Plan Enrollment Form by mail or fax. MassHealth will mail a Health Plan Enrollment Form to all parents/guardians who do not make a plan selection on the NOB.

If the parent/guardian does not make a voluntary managed care plan choice for the child within 14 days after eligibility was established, MassHealth will assign the child to a managed care plan. In assigning the newborn to a managed care plan, MassHealth will take the following into account:

- a. If the child has older siblings currently enrolled in a managed care plan, the child will be assigned to the same managed care plan as their next oldest sibling.
- b. If there are no older siblings currently enrolled in a managed care plan, the child will be enrolled in the same managed care plan as their parent/guardian who is listed as head of household for the family with MassHealth.
- c. If assignment based on the next oldest sibling or the head of household does not result in a managed care plan enrollment for the newborn, MassHealth will use the existing member auto-assignment process to assign the newborn to a managed care plan in their geographic area.

If MassHealth assigns the newborn to a managed care plan, the parent/guardian may request to change the newborn's enrollment for any reason up to one year after the date of birth by contacting MassHealth. The MassHealth policy of Fixed Enrollment does not apply to newborns within the first year of life.

Provider Requirements to Ensure Payment by the Proper Party

When seeing a newborn child, MassHealth providers should check the child's eligibility using the MassHealth Eligibility Verification System (EVS), available through the Provider Online Service Center (POSC). The provider should check EVS before the appointment and on the date of the appointment. EVS will guide the provider in how to submit claims for the visit. In general:

1. If the newborn is not visible in EVS, the child may not yet have established MassHealth eligibility or plan enrollment. There may have been a delay in the birth being reported to MassHealth.
 - In such cases, if the child is not found in EVS, verifying the eligibility of the mother on both the newborn's date of birth and the present date of service are enough to confirm the newborn's MassHealth eligibility. The provider should use EVS to verify the child's mother is enrolled in MassHealth on the child's date of birth and on the date of the service.
 - Providers should encourage the newborn's parent/guardian to contact MassHealth Customer Service or a Certified Application Counselor, if they have not already, to alert MassHealth to the birth and establish eligibility for the child.
 - Providers should hold claims for newborns not found in EVS on the date of service and check EVS again within the next several days to find the enrollment information for the newborn, including the newborn's MassHealth ID number, at which time they should submit held claims to MassHealth. Pursuant to 130 CMR 450.309(A), providers have 90 days from the date of service to submit their claim.

MassHealth
All Provider Bulletin 305
December 2020
Page 5

2. If EVS indicates the newborn has MassHealth eligibility but does not yet have a plan enrollment (i.e., “MassHealth Standard” appears in EVS without a managed care plan name);
 - Providers should submit claims for the newborn to MassHealth in accordance with MassHealth billing guidance for the MassHealth FFS network.
www.mass.gov/lists/physician-manual-for-masshealth-providers#-subchapter-5:-administrative-and-billing-instructions-for-all-masshealth-providers.
 - Providers who do not participate in the MassHealth FFS network should contact providersupport@mahealth.net to discuss joining the MassHealth FFS network in advance of serving the newborn.
 - Referrals are not required for newborns in MassHealth’s FFS program.
3. If EVS indicates the newborn has MassHealth eligibility and a Primary Care ACO (PCACO) or Primary Care Clinician (PCC) Plan enrollment;
 - Providers should submit claims for the newborn to MassHealth in accordance with MassHealth billing guidance for the MassHealth FFS network.
www.mass.gov/lists/physician-manual-for-masshealth-providers#-subchapter-5:-administrative-and-billing-instructions-for-all-masshealth-providers.
 - Providers who do not participate in the MassHealth FFS network should contact providersupport@mahealth.net to discuss joining the MassHealth FFS network in advance of serving the newborn.
 - Notwithstanding the requirements set forth in 130 CMR 450.118 and 450.119, referrals are not required for newborns during the first 30 days of the newborn’s enrollment in the PCC Plan or a Primary Care ACO.
4. If EVS indicates the newborn has MassHealth eligibility and an Accountable Care Partnership Plan (ACPP) or Managed Care Organization (MCO) enrollment;
 - In-network providers of the indicated plan should submit claims for the newborn based upon the plan’s billing guidelines. These rules can be found on each of the plan’s websites or in provider manuals (please see the last page of this bulletin for managed care plan website and contact information).
 - Providers not in network for the indicated plan should contact the plan to ensure a payment arrangement is in place and that the provider obtains the proper billing policies for that plan to ensure timely payment. All ACPPs and MCOs are obligated to provide and cover primary care services when provided by out-of-network providers during the first 30 days of the newborn’s enrollment in the plan. Furthermore, ACPPs and MCOs are required to provide continuity of care for any non-primary care providers with whom the newborn has a clinical relationship for the first 30 days of the newborn’s enrollment with the plan.

**MassHealth
All Provider Bulletin 305
December 2020
Page 6**

Additionally, it is important to note:

- While MassHealth is taking steps to promote prompt care for newborns in the time immediately following birth, parents/guardians should be encouraged to make an enrollment selection to enroll the newborn in a managed care plan in which the newborn's provider participates as soon as feasible. Each outpatient provider treating a newborn should inform that newborn's parent/guardian of the MassHealth managed care plan(s) for which that provider is in-network, and refer the family to [MassHealthChoices.com](https://www.masshealthchoices.com) or MassHealth Customer Service to review options and make a voluntary managed care enrollment selection.
- Inpatient hospital providers should use EVS to determine newborn enrollment and split any claims for which the newborn member changed from one enrollment to another during the inpatient stay, if applicable.
- This bulletin does not change existing guidance around the billing of newborn hospital deliveries. Such delivery services should continue to be billed to the mother's plan.

How to Escalate a Question or Concern

Providers with remaining questions should use the contact providersupport@mahealth.net to escalate any challenges that could not otherwise be resolved by the guidance in this bulletin or (if applicable) the newborn's managed care plan.

MassHealth Website

This bulletin is available on the [MassHealth Provider Bulletins](#) web page.

To sign up to receive email alerts when MassHealth issues new bulletins and transmittal letters, send a blank email to join-masshealth-provider-pubs@listserv.state.ma.us. No text in the body or subject line is needed.

Questions

If you have any questions about the information in this bulletin, please contact the MassHealth Customer Service Center at (800) 841-2900, email your inquiry to providersupport@mahealth.net, or fax your inquiry to (617) 988-8974.

PCACO, ACPP, and MCO Websites:

C3 Community Care Cooperative
<https://www.communitycarecooperative.org/providers>

Partners HealthCare Choice
<https://www.partners.org/for-patients/ACO/Partners-HealthCare-Choice-Medicaid.aspx>

Steward Health Choice
<https://www.stewardhealthchoice.org/massachusetts>

AllWays Health Partners / My Care Family:
<https://allwayshealthpartners.org/providers>

BMCHP Community Alliance, Mercy, Signature, Southcoast, MCO
<https://www.bmchp.org/I-Am-A/Provider>

Fallon Berkshire, Fallon 365, and Wellforce
<https://www.fchp.org/en/providers.aspx>

HNE / Be Healthy Alliance
<https://healthnewengland.org/provider>

Tufts Health Together with Atrius Health, BIDCO, CHA, Children's, MCO
<https://tuftshealthplan.com/provider/home>

Updated NOB-1 form, effective January 1, 2021

MassHealth

Commonwealth of Massachusetts
EOHHS • www.mass.gov/masshealth



EDM COVER SHEET



NOTIFICATION OF BIRTH



- Instructions:
- Complete form and print it out.
 - **Sign form and fax it to (617) 887-8777.**
 - Fields explained on back of form.

Purpose of Notification of Birth (NOB-1) Form

- Process MassHealth eligibility for newborns
- Enroll a newborn into a health plan
- Provide hospitals with a way to receive a newborn member ID to submit claims

Hospital Name
Hospital Address
Contact Name
Phone

Section I: Mother's Information			
Last Name		First Name	
Address			
Date of Birth	Phone	MassHealth Member ID	
Primary Commercial Insurance (if applicable)			ConnectorCare <input type="checkbox"/> Yes <input type="checkbox"/> No
Policy Holder or Guardian			Relationship to Newborn

Section II: Child's Information – Please Note: You must include the child's name (Last, First, and Middle), Date of Birth, and Gender. Please list additional children on a separate sheet.			
Last Name		First Name	Middle Name
Date of Birth	Gender <input type="checkbox"/> M <input type="checkbox"/> F	PCP (eg: Jane F. Doe)	
Health Plan		Street	City
		State	Zip
		Phone	
Last Name		First Name	Middle Name
Date of Birth	Gender <input type="checkbox"/> M <input type="checkbox"/> F	PCP (eg: Jane F. Doe)	
Health Plan		Street	City
		State	Zip
		Phone	

Please do not use "BABY BOY" or "BABY GIRL" as a substitute for the newborn's name. If you enter "BABY BOY" or "BABY GIRL," the form will not be processed.

Has an application for the child's social security number been made through the hospital? <input type="checkbox"/> Yes <input type="checkbox"/> No	
I certify that the above-named child was born to the mother listed above.	Title
Signature	Date

NOB forms should be submitted to MassHealth as soon as possible after birth and no later than 10 days after birth whenever possible.

The NOB-1 form is used by hospitals to facilitate eligibility determination and health-plan enrollment of newborns born to MassHealth or ConnectorCare eligible individuals. Any child born to an individual who is eligible for MassHealth is automatically eligible for MassHealth Standard for one year from the date of birth.

Once MassHealth eligibility has been established, all newborns are required to be enrolled in a health plan within 14 days. Parents/guardians should be encouraged to voluntarily choose a primary care provider and health plan for their baby. The parent/guardian's selection of a plan and provider for their baby can be added to the NOB using the appropriate fields. Please note that the managed care enrollment will be prospective. If the parent/guardian does not yet know which plan or provider to select, hospital staff should encourage the parent/guardian and their family to visit www.masshealthchoices.com or call MassHealth Customer Service at (800) 841-2900; TTY: (800) 497-4648. If the parent/guardian does not choose a health plan for their baby, the baby will be in Fee-for-service (FFS) status for up to 14 days until MassHealth **automatically assigns** the baby to a health plan in the following ways:

- If the child has older siblings currently enrolled in a managed care plan, the child will be assigned to the same managed care plan as their next oldest sibling.
- If there are no older siblings currently enrolled in a managed care plan, the child will be enrolled in the same managed care plan as their parent/guardian who is listed as head of household for the family with MassHealth.
- If assignment based on the next oldest sibling or the head of household does not result in a managed care plan enrollment for the newborn, MassHealth will use the existing member auto-assignment process to assign the newborn to a health plan in their geographic area.

Health plans can provide helpful resources at the beginning of a newborn's life. Each plan has a specific network of primary care providers/pediatricians/practices and supportive services. Parents/guardians may change a newborn's plan or PCP for any reason within the child's first year of life.

Instructions for Completing the NOB-1 Form

Section I: Mother's Information

- **Member ID:** Enter the 12-digit MassHealth member ID of the mother.
- **Name, Address, Date of Birth, and Phone:** Enter the name, address, date of birth, and phone number of the child's mother.
- **Primary Commercial Insurance:** If MassHealth is secondary coverage, enter the name of the primary commercial insurance plan (eg: BC/BS). If ConnectorCare is primary coverage, enter the name of the ConnectorCare plan.
- **Policy Holder or Guardian:** When other insurance is present, list the name of the person who holds the insurance and their relationship to the newborn.
- **ConnectorCare:** When the mother has been determined ConnectorCare eligible or enrolled in ConnectorCare, please check Yes or No as appropriate. For information on determining ConnectorCare status, please see the "Guide to Identifying ConnectorCare Coverage" at <https://www.mass.gov/lists/masshealth-provider-forms-by-provider-type-h-m#hospitals-Section>

Section II: Child's Information

- **Name:** Enter the child's last name, first name, and middle name. Please do not use "BABY BOY" or "BABY GIRL" as a substitute for the newborn's name. If you enter "BABY BOY" or "BABY GIRL," the form will not be processed.
- **PCP and Health Plan:** Please encourage parents/guardians to select a primary care provider/pediatrician/practice and health plan for the newborn; if the family does not voluntarily select a plan within 14 days after eligibility is established, MassHealth will automatically assign the newborn to a plan as described above. More information on which health plans and primary care provider/pediatrician/practice are available for the newborn can be found at www.masshealthchoices.com or by calling MassHealth Customer Service at (800) 841-2900; TTY: (800) 497-4648. Please note that not all health plans or PCPs/pediatricians/practices may be available. MassHealth will notify the parent/guardian if the health plan or PCP/pediatrician/practice selection is not available.
 - Providers must check EVS to see the effective date of a newborn's health plan enrollment. Submitting this NOB form does not mean a provider may now submit claims to the newborn's selected plan.
- **Date of Birth:** Enter the child's date of birth, using MM/DD/YYYY format.
- **Gender:** Enter "F" for female or "M" for male.
- **Social Security Application:** Indicate if an application for the child's Social Security number has been made through the hospital.
- **Certification:** Sign and date the form. Please include your title. The director of medical records or patient accounts manager of the hospital must sign the NOB-1.

Faxing the Completed NOB-1 Form

- Fax the signed original to (617) 887-8777.

Check member eligibility using the Eligibility Verification System in the [Provider Online Service Center](#).