

Support SB 1669 and HB 4253 by Sen. LaMantia and Rep. Campos

Ensure Newborns are Connected to Health Coverage During Early Development

Many Newborn Babies are Falling Through the Cracks and Not Getting

Health Coverage

- If a mother is enrolled in Medicaid insurance when she delivers her baby, under federal law her newborn is eligible and must be automatically enrolled in Medicaid at birth and through the first full year of life.
- However, state data reported to CMS show that during 2018, 63,775 Texas children had some type of coverage interruption during the first year of their life, indicating that the automatic process is not working¹.



 Many pediatric clinics are unaware that a mother's Medicaid ID can be used if a newborn has not been assigned one. These clinics then inform patients they will be responsible for their medical bills, dissuading low-income families from taking babies to check ups or getting other medical care.

This Means Newborns are Missing Out on Health Care

- During those first weeks and months, it is critical that newborns have multiple well-baby check-ups, screenings, and other medical care they need for a healthy start.
- Any delays in medical care can cause significant health issues for children.

Senate Bill 1669 and House Bill 4253 will:

• Require HHSC to conduct a study to assess the commission's compliance with federal requirements for enrolling newborns into Medicaid coverage if their mother is enrolled in Medicaid including ways to improve this process and recommendations on how to improve coverage rates.

¹ "Early Periodic Screening Diagnostic and Treatment." Centers for Medicare and Medicaid Services (CMS) <u>https://www.medicaid.gov/medicaid/benefits/early-and-periodic-screening-diagnostic-and-treatment/index.html</u>