CHIP Perinate Provider FAQ: **Billing**

Claims for the mother

Facilities

- Facilities that need to bill TMHP (Medicaid) will find the billing information for TMHP on the back of the patient's Dell Children's Health Plan ID card.
- Facilities needing to bill Dell Children's Health Plan can also refer to the back of the card on how to bill the health plan.

Professional charges

For professional charges associated with the delivery, providers should bill Dell Children's Health Plan. For questions about billing or coverage you can call our **Provider Services number at 1-844-781-2343.**

Claims for the newborn

Newborns born to CHIP Perinatal mothers who are certified for Medicaid at birth, will be placed in FFS and managed care enrollment will occur prospectively. An enrollment packet will be mailed to the household, and they will be given the opportunity to select an MCO. If no selection is made, HHSC will assign an MCO using the current default plan assignment process.

It is the provider's responsibility to submit claims using the newborn's individual Medicaid ID number. This ensures that eligibility is verified and the claim is sent to the correct entity for processing. Claims billed under a temporary Medicaid ID or under the mother's CHIP Perinatal ID number will be denied. In those cases, the provider must refile the claim using the newborn's individual Medicaid ID number as a corrected claim, when it becomes available.

For newborns born to a mother covered with CHIP Perinate with a household income at or above 199% of the FPL the newborn will remain with the health plan the mother was on.

What if the newborn's ID is not available?

There may be a delay from the date of birth for a newborn to be assigned an individual Medicaid ID number.
If the newborn doesn't have a Medicaid ID, providers must verify eligibility and health plan enrollment by calling **1-800-925-9126** or going to TexMedConnect on the TMHP website at tmhp.com.

What are the claims processing timelines?

Providers that file claims for services provided to newborns are still responsible for meeting the Medicaid filing deadlines, which is within 95 calendar days from date of discharge. Providers can file an appeal after the provider has the newborn's Medicaid ID number.

Questions?

Contact your provider liaison, call the **Provider Relations team at 512-324-3125, option 4**
or email SHPProviderServices@seton.org.

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Health Plan