

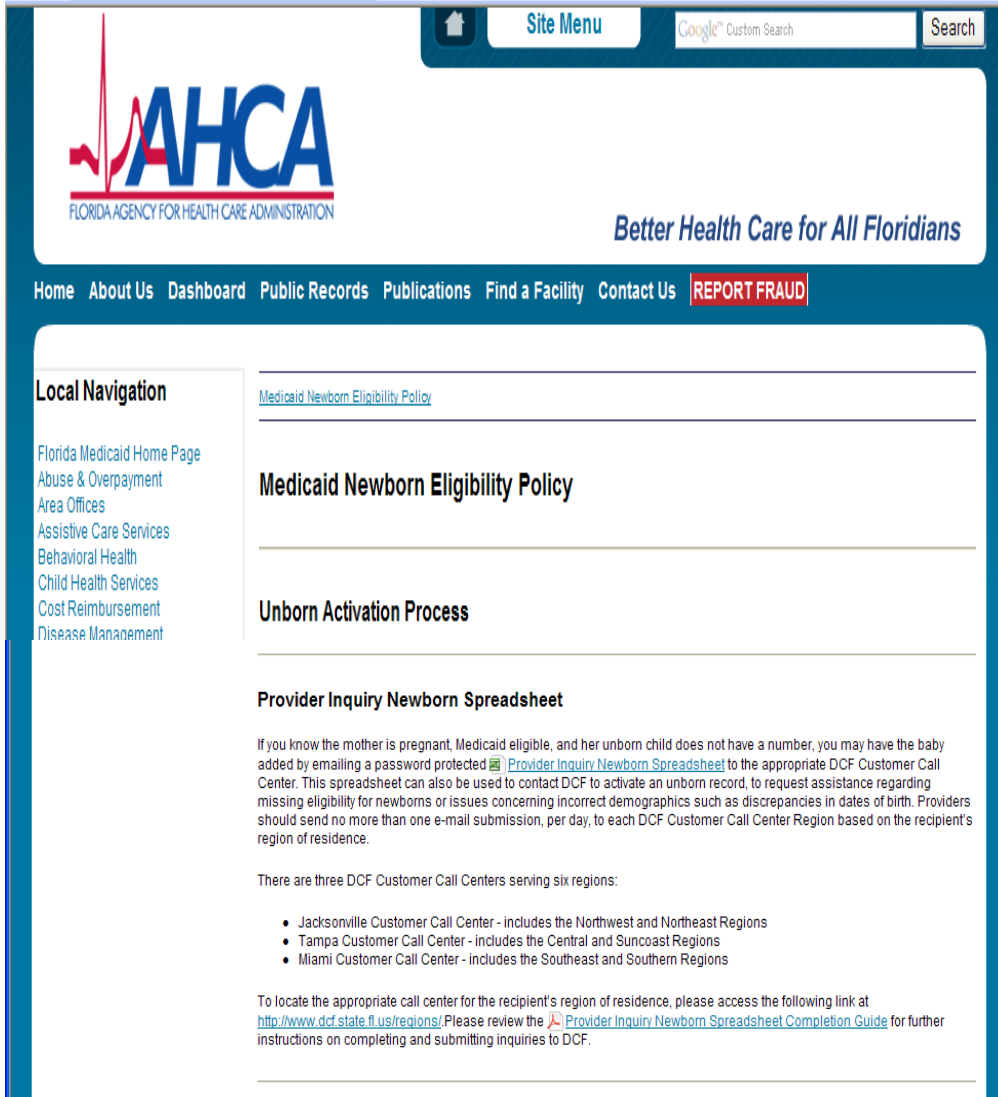
Newborn Activation Process

Newborn Activation Process: Overview

- ❖ **AHCA and DCF Coordination of Newborn Process**
- ❖ **DCF Customer Call Center Process**
 - Inquiry Newborn Spreadsheet**
 - FLORIDA System Updates**
- ❖ **Opportunities for Improvement on Provider Request**

AHCA and DCF Coordination of Newborn Process

<http://www.fdhc.state.fl.us/Medicaid/Newborn/index.shtml>



The screenshot shows the AHCA website interface. At the top left is the AHCA logo with the tagline "FLORIDA AGENCY FOR HEALTH CARE ADMINISTRATION" and "Better Health Care for All Floridians". A navigation bar includes "Home", "About Us", "Dashboard", "Public Records", "Publications", "Find a Facility", "Contact Us", and a red "REPORT FRAUD" button. A search bar is located at the top right. The main content area is titled "Local Navigation" and lists various services. The primary content is the "Medicaid Newborn Eligibility Policy" page, which includes a section for "Unborn Activation Process" and a "Provider Inquiry Newborn Spreadsheet" section. The spreadsheet section explains how to use the spreadsheet to contact DCF for newborn activation and lists three DCF Customer Call Centers serving six regions.

Local Navigation

- Florida Medicaid Home Page
- Abuse & Overpayment
- Area Offices
- Assistive Care Services
- Behavioral Health
- Child Health Services
- Cost Reimbursement
- Disease Management

[Medicaid Newborn Eligibility Policy](#)

Medicaid Newborn Eligibility Policy

Unborn Activation Process

Provider Inquiry Newborn Spreadsheet

If you know the mother is pregnant, Medicaid eligible, and her unborn child does not have a number, you may have the baby added by emailing a password protected [Provider Inquiry Newborn Spreadsheet](#) to the appropriate DCF Customer Call Center. This spreadsheet can also be used to contact DCF to activate an unborn record, to request assistance regarding missing eligibility for newborns or issues concerning incorrect demographics such as discrepancies in dates of birth. Providers should send no more than one e-mail submission, per day, to each DCF Customer Call Center Region based on the recipient's region of residence.

There are three DCF Customer Call Centers serving six regions:

- Jacksonville Customer Call Center - includes the Northwest and Northeast Regions
- Tampa Customer Call Center - includes the Central and Suncoast Regions
- Miami Customer Call Center - includes the Southeast and Southern Regions

To locate the appropriate call center for the recipient's region of residence, please access the following link at <http://www.dcf.state.fl.us/regions/>. Please review the [Provider Inquiry Newborn Spreadsheet Completion Guide](#) for further instructions on completing and submitting inquiries to DCF.

Three DCF Customer Call Centers serving six regions:

Jacksonville Customer Call Center

Tampa Customer Call Center

Miami Customer Call Center

Provider Inquiry Newborn Spreadsheet

	A	B	C	D	E	F
1	Provider Inquiry (Newborn) Sheet Miami		<Provider # Here>		<Enter Provider Name & Contact Info>	SN_Providers_SCFCC@dct.state.fl.us
10	Baby's Name	SSN / DOB	Application for SSN Submitted? (Y/N)	Mother's Name / SSN / DOB	Provider Comments	DCF Comments
11						
12						
13						
14						
15						
16						

If the mother is :

- Pregnant
- Medicaid eligible, and
- the unborn child does not have a number

Also used to:

- Activate newborn coverage
- Request missing information
- Resolve issues concerning incorrect demographic information

The Provider e-mails:

[Provider Inquiry Newborn Spreadsheet](#) (password protected)

To the appropriate DCF Customer Call Center

Provider Inquiry Newborn Spreadsheet: DCF Process

	A	B	C	D	E	F	G
1	Provider Inquiry (Newborn) Sheet Miami		<Provider # Here>	<Enter Provider Name & Contact Info>		SN_Providers_SCFCC@dcl.state.fl.us	
10	Baby's Name	SSN / DOB	Application for SSN Submitted? (Y/N)	Mother's Name / SSN / DOB	Provider Comments	DCF Comments	
11							
12							
13							
14							
15							
16							

DCF Staff:

- Establish a password to protect the Spreadsheet
 - Review and Complete Spreadsheet
 - Update FLORIDA system
 - Submit the Spreadsheet
Return via e-mail
Return within 5 work days
- * Note: DCF Job Aid provides detailed information on process

How to complete the Provider Inquiry Newborn Spreadsheet :

	A	B	C	D	E	F	G
1	Provider Inquiry (Newborn) Sheet Miami		<Provider # Here>	<Enter Provider Name & Contact Info>		SN_Providers_SCFCC@dcf.state.fl.us	
10	Baby's Name	SSN / DOB	Application for SSN Submitted? (Y/N)	Mother's Name / SSN / DOB	Provider Comments		DCF Comments
11							
12							
13							
14							
15							
16							

1. **Baby's Name:** Enter the Newborn's name
2. **SSN/DOB**
3. **Application for SSN Submitted (Y/N):** Enter Y or N if known
4. **Mother's Name/SSN/DOB:** Enter the mother's first and last name, SSN, DOB, and Medicaid ID number
5. **DCF Comments:** DCF Call Center staff enter information

Provider Inquiry Newborn Spreadsheet: DCF Process example

	A	B	C	D	E	F	G
1	<i>Provider Inquiry (Newborn) Sheet Tampa</i> →		<Provider # Here>		<Enter Provider Name & Contact Info>	<i>SR_CCC_BABIES@dcf.state.fl.us</i>	
10	Baby's Name	SSN / DOB	Application for SSN Submitted? (Y/N)	Mother's Name / SSN / DOB	Provider Comments	DCF Comments	
11	Justin Jones	02/12/11	y	Janet Jones	Activate Unborn		
12							



Mother's Name: Janet Jones
SSN missing
No DOB

DCF : Name look up in FLORIDA System

```

IQIS                                NAME MATCH                                02/22/2011 15:47
P07282 J GRIGNON

LAST NAME    FIRST      MI  DOB      SEX  RACE
JONES       JANET

  LAST NAME    FIRST      MI  SSN      DOB      S  R  AL  C  ST  RFA/CASE
1  JONES       JANET
2  JONES       JANET
3  JONES       JANET
4  JONES       JANET
5  JONES       JANET
6  JONES       JANET
7  JONES       JANET
8  JONES       JANET
9  JONES       JANET
10 JONES       JANET
11 JONES       JANET
12 JONES       JANET
13 JONES       JANET
14 JONES       JANET

                                ENTER SELECTION NUMBER: █
PFKEYS: 15=IQIG 16=IQEL 17=IQIM 18=CRPC
NEXT TRAN: _____ PARS: _____ MORE...

CLRC      PA Letters      QA Navigation      Data Exchange
WebApp    Intake Specialist  Caller ID          FS Denial Date
01 040
  
```

Multiple Janet Jones in the FLORIDA system make it hard to find the correct case to ensure the newborn is activated.

DCF: Add Newborn to FLORIDA System

```

IQIS                NAME MATCH                02/22/2011 15:56
                P07282 J GRIGNON

LAST NAME          FIRST          MI  DOB          SEX  RACE
GONZALEZ          MARIA

  LAST NAME        FIRST          MI  SSN          DOB          S  R  AL  C  ST  RFA/CASE
1  GONZALEZ        MARIA          10021928  F  W  N  13  PA  1002641543
2  GONZALEZ        MARIA          12201912  F  H  Y  13  PA  1003629971
3  GONZALEZ        MARIA          07021908  F  T  Y  13  PA  1001034481
4  GONZALEZ        MARIA          08301904  F  H  N  13  PA  1001845889
5  GONZALEZ        MARIA          10121911  F  H  Y  13  PA  1011488353
6  GONZALEZ        MARIA          09251923  F  H  Y  13  PA  1025695321
7  GONZALEZ        MARIA          10241973  F  H  Y  13  PA  1230779752
8  GONZALEZ        MARIA          10241973  F  H  Y  0
9  GONZALEZ        MARIA          06031911  F  H  Y  13  PA  1002708788
10 GONZALEZ        MARIA          09251894  F  W  Y  13  PA  1003555837
11 GONZALEZ        MARIA          06131945  F  W  N  13  PA  1012959872
12 GONZALEZ        MARIA          06131945  F  W  N  0
13 GONZALEZ        MARIA          07041973  F  H  Y  29  PA  1234135281
14 GONZALEZ        MARIA          10111958  F  H  Y  13  PA  1009943553

ENTER SELECTION NUMBER: █
PFKEYS: 15=IQIG 16=IQEL 17=IQIM 18=CRPC
NEXT TRAN: _____ PARMS: _____ MORE...
  
```

CLRC	PA Letters	QA Navigation	Data Exchange
WebApp	Intake Specialist	Caller ID	FS Denial Date

S1 | Ready (1) | 205.176.250.66 | TCPN8116 | 15:56:29 Tue Feb 22 | NUM | 00:09:33 | 21, 048

DCF staff must:

- Complete provider spreadsheet
- Activate newborn in FLORIDA System
- Check FMMIS

Opportunities for Improvement on Provider Request

❖ Information Required on Spreadsheet;

Complete information on the Mother

First and last name, DOB, SSN
(not just the name)

Multiple requests for the same child

Allow time for DCF response

❖ Births reported and mother not known to be pregnant



Questions?



Newborn Activation Process