

1.12 CONTINUOUSLY ELIGIBLE NEWBORN (CEN) CHILDREN

A. APPLICATION FORM

No application is required for CEN Children who are born to Medicaid eligible women. See Chapter 16.

B. THE REDETERMINATION PROCESS

NOTE: The redetermination for the CEN child is scheduled in the month before the month the child becomes one year old to ensure that the child is evaluated for all coverage groups. Under no circumstances must the child who meets the definition of as a CEN be terminated before the end of the 12th month. See Chapter 16.

The redetermination process is initiated by eRAPIDS which generates the renewal form with a letter of explanation. The redetermination may be submitted by mail or online by use of inROADS.

The letter of explanation provides the following information:

- That the AG(s) for the individual(s) listed is due for redetermination
- The address to which the form is returned, if submitted by mail
- The date by which the redetermination must be submitted
- Any verification which must be submitted with the form
- That the AG(s) will be closed after proper notification, if the redetermination is not completed
- Instructions for submitting the redetermination online by using inROADS
- A phone number to call if the individual has questions about submitting the redetermination online

The redetermination may be submitted online by use of inROADS until the end of the month in which the redetermination is due. Redeterminations submitted online do not require a signed signature page and are considered electronically signed. This is because the client must enter specific identifying information outlined in the instruction letter. This identifying information includes the case number, redetermination due date and county which are included in the letter. The Social Security number of the person to whom the letter is addressed must be entered, but is not shown on the letter.

When the client is in the office to complete a redetermination for another program, the CEN child redetermination is completed at the same time. The redetermination is completed using the DFA-2, when required for the other Program.

When the redetermination is completed and the individual(s) remains eligible under another coverage group, the new eligibility period must begin the month immediately following the month of the redetermination.

C. THE BENEFIT

1. Ongoing Benefits

Effective April 2015 the Medicaid card issuance process will change from a monthly to a yearly issuance. The Medicaid card will not include any date parameters since eligibility may terminate.

Each January, beginning with the 2016 issuance, Medicaid recipients will receive one Medicaid card per case.

In situations where retroactive eligibility is established, the Medicaid card will be validated appropriately for each back-dated month.

2. Ending Date Of Eligibility

The ending date of eligibility is the last day of the month of the effective date of closure.