

Provider Enrollment and Contracting for Pharmacy

**IOWA MEDICAID, IOWA TOTAL CARE,
MOLINA, AND WELLPOINT**

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Medicaid Pharmacy Webpage**

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General Overview

1. Enroll with Iowa Medicaid FFS

Provider:	Service:
Pharmacy	Point-of-Sale (POS) – Provider Type 08
	Durable Medical Equipment (DME) – Provider Type 12
Pharmacist	Medical – Provider Type 82 <ul style="list-style-type: none"> Immunizations & Point-of-Care Testing (POCT)

2. Contract and Credential with each MCO

Provider:	Service:	Notes:
Pharmacy	POS – Contract with each pharmacy network	ITC – Express Scripts
		Molina – CVS Caremark
		Wellpoint – CVS Caremark
	DME and Medical – Contract and credential with each MCO	ITC, Molina, Wellpoint
Pharmacist	Medical – Credential with each MCO	ITC, Molina, Wellpoint

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Iowa Medicaid Fee-for-Service

Providers must first enroll with Iowa Medicaid FFS prior to completing the contracting and credentialing process with each MCO.

Iowa Medicaid FFS

1. Visit the [IA Medicaid Provider Forms HHS](#) webpage.
2. Click on the 'Iowa Medicaid Universal Provider Enrollment Application' link (Form Number 470-0254).
3. Complete Sections A and B if you are enrolling in the Iowa Medicaid program as a new **Pharmacy** provider or if you are already enrolled but have a new Tax ID.
 - a. To enroll for more than one provider type, you must complete a separate Section B for each provider type.
 - b. Identify your provider type in Box 16 - Type Code:
 - i. 08 – Pharmacy (POS)
 - ii. 12 – Medical Supplies (DME)
3. To enroll with Iowa Medicaid as a **Pharmacist**, complete Section B:
 - a. Identify your provider type in Box 16 - Type Code:
 - i. 82 – Pharmacist
 - b. Note – You will enter the pharmacy NPI, taxonomy and zip code in which you will be associated as a provider in boxes 31a – c.
4. Send the completed application to Iowa Medicaid via one of the options below:
 - Email: IMEProviderEnrollment@hhs.iowa.gov
 - Fax: Iowa Medicaid, Attn: Provider Enrollment at 515-725-1155
 - Mail: Iowa Medicaid, Attn: Provider Enrollment, PO Box 36450, Des Moines, Iowa 50315
5. The pharmacy and pharmacist will receive confirmation of enrollment via traditional mail.

Managed Care Organizations

After enrolling with Iowa Medicaid FFS, providers can begin the process to contract and credential with each MCO.



Health and
Human Services

Iowa Total Care - Pharmacy

1. Complete steps on Slide 4 to enroll with Iowa Medicaid FFS.
2. To contract and credential as a **Pharmacy** with ITC, follow the steps below:
 - a. For POS Billing, join the Pharmacy Network with Express Scripts:
 - I. Visit the www.esiprovider.com webpage.
 - II. On the right side of the webpage, click the orange button titled 'New Account.'
 - III. Follow the prompts to create an account.
 - IV. After successfully logging in, select 'Apply to Become a Network Provider.'
 - V. Complete the application in its entirety and submit.
 - b. For DME and Medical Billing:
 - I. Visit the '[Become a Provider | Iowa Total Care](#)' webpage.
 - II. Click on the 'Contract Request Form' link.
 - III. Contract Request Form
 - i. Under, 'Type of Contract Request,' select 'New Contract.'
 - ii. In the 'Entity NPI' field, enter the Pharmacy NPI.
 - iii. In the 'Provider Type' section, select 'Ancillary or Hospital Based Practitioners'
 - iv. Complete the form in its entirety and click 'Submit.'
 - IV. Iowa Total Care will reach out for additional information if needed.
 - V. The pharmacy will receive final confirmation of enrollment via email.

Iowa Total Care - Pharmacist

1. Complete steps on Slide 4 to enroll with Iowa Medicaid FFS.
2. To credential as a **Pharmacist** with Iowa Total Care, follow the steps below for **Medical Billing**:
 - a. A pharmacy must be contracted with ITC before the individual pharmacist can be credentialed.
 - b. Visit the [Iowa Total Care Contracting & Credentialing Forms](#) webpage.
 - c. Select the form titled, 'Iowa Statewide Universal Practitioner Credentialing Application.'
 - d. Complete the form in its entirety.
 - e. Send the completed form to NetworkManagement@IowaTotalCare.com.
 - f. Iowa Total Care will reach out for additional information if needed.
 - g. The pharmacist will receive final confirmation of enrollment via email.

Molina - Pharmacy

1. Complete steps on Slide 4 to enroll with Iowa Medicaid FFS.
2. To contract and credential as a **Pharmacy** with Molina Healthcare of Iowa, follow the steps below:
 - a. For POS Billing, join the Pharmacy Network with CVS Caremark:
 - I. Visit the [‘Molina | Join our Network’](#) webpage.
 - II. Click on ‘Step One – Connect’ to expand this section.
 - III. Under ‘Pharmacy Providers,’ click on the ‘Join CVS Caremark Network’ link.
 - IV. Click on the ‘Pharmacy Pre-Enrollment Questionnaire’ link.
 - V. Complete the questionnaire in its entirety and submit.
 - b. For DME & Medical Billing:
 - I. Visit the [‘Molina | Join our Network’](#) webpage.
 - II. Click on ‘Step One – Connect’ to expand this section.
 - III. Under ‘Medical/Behavioral Health/Ancillary Providers,’ click on the ‘Contract Request Form’ link.
 - IV. Provider Contract Request Form
 - i. In the first section titled ‘Please Select Provider Type,’ select the ‘DME’ checkbox.
 - ii. In the same section as above, select the ‘Other’ checkbox and write in ‘Pharmacist – POCT/Immunizations.’
 - iii. In the ‘Provider Identification’ section, write in the Pharmacy NPI.
 - iv. Complete the form in its entirety.
 - V. Send the completed form to IAProviderContracts@MolinaHealthcare.com OR fax to (833) 671-3988.
 - VI. Molina will reach out for additional information if needed.
 - VII. The pharmacy will receive final confirmation of enrollment via email.

Molina - Pharmacist

1. Complete steps on Slide 4 to enroll with Iowa Medicaid FFS.
2. To credential as a **Pharmacist** with Molina Healthcare of Iowa, follow the steps below for **Medical Billing**:
 - a. Visit the '[Molina | Join our Network](#)' webpage.
 - b. Click on 'Step One – Connect' to expand this section.
 - I. Under 'Medical/Behavioral Health/Ancillary Providers,' click on the 'Contract Request Form' link.
 - II. Provider Contract Request Form
 - i. In the first section titled 'Please Select Provider Type,' select the 'Other' checkbox and write in 'Pharmacist – POCT/Immunizations.'
 - ii. In the 'Provider Identification' section, write in 'Pharmacist NPI, Pharmacy NPI,' and provide both numbers.
 - iii. Complete the form in its entirety.
 - c. Send the completed form to IAProviderContracts@MolinaHealthcare.com OR fax to (833) 671-3988.
 - d. Molina will reach out for additional information if needed.
 - e. The pharmacist will receive final confirmation of enrollment via email.

Wellpoint - Pharmacy

1. Complete steps on Slide 4 to enroll with Iowa Medicaid FFS.
2. To contract and credential as a **Pharmacy** with Wellpoint Iowa, Inc., follow the steps below:
 - a. For POS Billing, join the Pharmacy Network with CVS Caremark:
 - I. Visit the www.caremark.com webpage.
 - II. At the bottom of the page, click on the 'Pharmacists & Medical Professionals' link.
 - III. Under 'Additional Resources for Medical Professionals', select the 'Forms and Guides' link.
 - IV. Scroll down and click on the 'Pharmacy Pre-Enrollment Questionnaire' dropdown to expand this section.
 - V. Click on the 'Complete Pre-Enrollment Questionnaire' link.
 - VI. Complete the questionnaire in its entirety and submit.
 - b. For DME & Medical Billing:
 - I. Send an email to providernetworkIA@wellpoint.com and include the following information:
 - i. Request to credential and contract for provider type 08 (Medical) and provider type 12 (DME).
 - ii. Name of Pharmacy
 - iii. Address of Pharmacy
 - iv. Pharmacy NPI
 - v. Name of primary contact, phone number, and email address.
 - II. Wellpoint will reach out to discuss the contract and collect additional information (including W-9).
 - III. The pharmacy will receive final confirmation of enrollment via traditional mail.

Wellpoint - Pharmacist

1. Complete steps on Slide 4 to enroll with Iowa Medicaid FFS.
2. To credential as a **Pharmacist** with Wellpoint Iowa, Inc., follow the steps below for **Medical Billing**:
 - a. Send an email to providernetnetworkIA@wellpoint.com and include the following information:
 - I. Request to be credentialed for provider type 82 (Pharmacist).
 - II. Name of pharmacist
 - III. Phone number of pharmacist
 - IV. Email address of pharmacist
 - V. Individual pharmacist's NPI
 - VI. Name and address of **pharmacy** location(s)
 - b. Complete the Wellpoint Provider Roster:
 - I. Visit the [Forms | Wellpoint Iowa, Inc.](#) webpage.
 - II. Scroll down and click on the 'Provider Demographics/Credentialing' section to expand.
 - III. Select the 'Roster Automation Standard Template' link. An Excel spreadsheet will download.
 - IV. Open the Excel spreadsheet and complete the roster in its entirety using the instructions on the first tab titled 'User Reference Guide.'
 - V. Upload the completed roster to Wellpoint's provider portal by visiting the [Availity Login](#) webpage.
 - i. New Availity Users: Click on 'Create a Free Account' on the right-hand side of the webpage.
 - ii. Existing Availity Users: Login with existing username and password.
 - iii. After successfully logging in, click on 'Help & Training' from the main page.
 - iv. Type 'Submit a Provider Roster' in the search bar to locate instructions for uploading a completed roster.
 - v. For additional assistance, please contact your Wellpoint Provider Relations contact.
 - c. Wellpoint will reach out to collect further information (including W-9).
 - d. The pharmacist will receive final confirmation of enrollment via traditional mail.

Frequently Asked Questions

- ▶ **Once a pharmacist completes the Provider Enrollment process for Iowa Medicaid, can they begin submitting claims to the MCOs?**
 - No. While the Iowa Medicaid provider enrollment process is a necessary step to contract with the MCOs, the pharmacy/pharmacist must also complete a separate process to contract and credential with each MCO and their pharmacy networks.

- ▶ **A pharmacy is contracted with each MCO's Pharmacy Network. Can the pharmacy begin submitting medical claims to the MCOs?**
 - No. Contracting solely with an MCO pharmacy network will not allow the pharmacy/pharmacist to bill medically with the MCOs. The pharmacy/pharmacist must become contracted and credentialed for medical billing with each MCO.

- ▶ **Should IA Medicaid & the MCOs be notified when a pharmacist is no longer employed by a pharmacy?**
 - Yes. To unlink a pharmacist NPI from a pharmacy NPI, please notify IA Medicaid and each MCO via email using the contact information on the following slides.

Iowa Medicaid FFS Resources

For any questions on the enrollment process, please contact Iowa Medicaid Provider Services:

- Phone: (800) 338-7909 or (515) 256-4609
- Email: IMEProviderEnrollment@hhs.iowa.gov
- Webpage: [Medicaid Provider Services | Health & Human Services](#)

Additional Resource:

- [Iowa Medicaid Pharmacy Provider Webpage](#)

MCO Resources

For any questions on the MCO contracting and credentialing process, please contact the MCO directly:

Iowa Total Care

- Phone: 1-833-404-1061
- Email: NetworkManagement@IowaTotalCare.com
- Webpage for Providers: [Providers | Iowa Total Care](#)

Molina

- Phone: 1-844-236-1464
- Email: IAProviderContracts@MolinaHealthcare.com
- Webpage for Providers: [Providers | Molina Healthcare](#)

WellPoint

- Phone: 1-833-731-2143
- Email: ProviderNetworkIA@wellpoint.com
- Webpage for Providers: [Providers | Wellpoint Iowa, Inc.](#)

MCO Resources

Please include the applicable Provider Relations contact on all email communications to any MCO Provider Services email group.

- **To identify your counties Provider Relations contact, refer to the maps below:**

Iowa Total Care

- Visit the [Iowa Total Care Territory Maps](#) webpage.
- Under 'Provider Relations,' click on the 'Access PR Map (PDF)' link.

Molina

- Visit the [Molina Provider Resources Contact](#) webpage.
- Scroll down to the middle of the page.

Wellpoint

- Visit the [Wellpoint Provider Resources Overview](#) webpage.
- Scroll down to the 'Related Information' section and click on 'Provider Account Management – State Representative Map.'