Training: IAMSS Conference   April 11, 2025

Frequently Asked Questions and Answers (FAQ)

Iowa Medicaid

1. **Question**: Can the welcome letters be emailed instead of being sent by US mail.

   Answer: At present, these letters are only sent via U.S. mail. The Provider Enrollment team is actively developing an email format to enable electronic delivery in the future.

2. **Question**: The Approval letters are being sent to the provider, instead of the credentialing office, is there any way this can be sent to the credentialing office, or can we be cc in on the letter?

   Answer: Once the email format is implemented, letters will be sent to the contact listed on the application rather than directly to the provider.

3. Question: How do we find out who is processing our application?

   Answer: Multiple individuals may be involved in processing the application. If additional information is required, a team member will contact you directly and provide their email and phone number for further assistance.

4. **Question**: Why do we have new and changing on the application? We do not understand the changing, can CHANGING be changed to ADDING?

   Answer: Section B of the Iowa Medicaid Universal Application requires applicants to specify the reason for their application. The available options are **New** and **Adding New Location**.

5. **Question**: When we email the provider application, we are told by the reps that all attachments haven't been received but we are sending in all the attachments but are unable to put all attachments in 1 PDF. Can provider enrollment accept zipped files?

   Answer: Submitting applications via email is a time-intensive process, as it requires managing incoming emails in addition to processing applications. In contrast, faxed applications go directly into the processing system, allowing staff to focus on reviewing and completing applications without the added step of reading emails. Additionally, some emailed documents arrive in formats that cannot be opened,

requiring follow-up communication to request access or provide instructions for resubmission.

6. **Question**: Does the provider sign the application or can it be signed by someone in the office.

   Answer: It can be signed by anyone in the office, the provider does not have to be the one to sign it.

7. **Question**: Providers would prefer to email applications instead of faxing or using the postal service, is this still an approved way of sending in applications? **Comment**: An enrollment representative's email signature is telling providers to Fax.

   Answer: Submitting applications via email is a time-intensive process, as it requires managing incoming emails in addition to processing applications. In contrast, faxed applications go directly into the processing system, allowing staff to focus on reviewing applications rather than spending time handling emails.

8. **Comment**: DentaQuest needs to be removed from the application as they are not a dental provider with Medicaid anymore.

   HHS Response: We have requested that information to be updated on the application.

9. **Comment**: PE Reps are denying applications as dups when its different group linkage. They are not slowing down when reviewing the applications. This is slowing down the enrollment process with IME and MCOs.

   HHS Response: We are continuously training representatives to efficiently screen and verify applications with accuracy and consistency.

Iowa Total Care

1. **Question**: Is there a reason it is taking our applications 60-120 days to be processed, when you say 98% of applications are credentialed within 30 days?

   Answer: Iowa Total Care would need specific provider information to research this issue and properly respond to this question. Specific questions or concerns can be directed to Kelly Roberts, Director, Provider Network Operations at Kelly.j.roberts@IowaTotalCare.com.

2. **Question**: If Iowa Medicaid is still processing our application, can we be credential with ITC before Medicaid approval?

Answer: The credentialing process can begin prior to Iowa Medicaid approval; however, the credentialing and enrollment cannot be completed, and payment cannot proceed until Iowa Medicaid approval is complete.

3. **Question**: Is there any difference for Alleviations or we must wait till Medicaid is done?

   Answer: There is a special process where credentialing can be completed prior to Medicaid approval related to a change of ownership and these can be addressed on an individual basis.

Molina

1. **Question**: Can Molina match Iowa Medicaid's effective date?

   Answer: Provider's credential with all three MCOs _after_ enrolling with HHS, therefore, the effective dates are not the same.

2. **Question**: Why are we not getting approval letters from Molina?

   Answer:

   - There are several reasons a provider may not receive a credentialing approval letter:
   - Delegated groups do not receive approval letters as Molina does not credential them
   - If a provider is new to a group but has been credentialed previously with another group, there is no need to recredential so no approval letter will be sent
   - If the provider group contact does not list an email address, the approval letter will be sent to the individual provider email address on file in CAQH.
   - Some specialties do not require credentialing (i.e. Hospitalists, Radiologists, Anesthesiologists)

Iowa Medicaid
Iowa HHS

3. **Question**: Availity problems - is there a solution to the following issues we have been experiencing with

- **Issue**: It is difficult to work with because of the spinning.
  Answer: Any technical difficulties can be reported to Availity Client Services (800) 282-4548, where providers can screen share to troubleshoot any issues. Providers can also take a screenshot of what they are experiencing and email it to their provider's services representative. Contact information for provider relations representatives can be found here PSR Map
  - **Issue**: The roster does not always go through.

    Answer: Provider Rosters are not available on Molina Availity.

  - **Issue**: The error reports are not always coming through either.

    Answer: Provider Rosters are not available on Molina Availity.

  - **Issue**: Incorrect Specialty codes.

    Answer: Provider Rosters are not available on Molina Availity.

  - **Issue**: 1 location could be listed 8 times.

    Answer: Provider Rosters are not available on Molina Availity.

  - **Issue**: Availity is trying to put terminated providers back into the system.

    Answer: Provider Rosters are not available on Molina Availity.

  - **Issue**: Roster on Availity is not correct and it is hard to take that information as true.

    Answer: Information regarding providers found on Molina Availity is not a roster; please go to our provider online directory or contact your provider relations representative with any questions or concerns. The Provider Online Directory can be found here Molina Provider Online Directory .

![Iowa Medicaid logo - Iowa HHS]

Wellpoint

 Answer: To accurately respond to the questions from providers, it would be best to have the provider reach out directly to their provider account manager. Specific issues regarding roster loads and errors can be pulled by the account manager and addressed with the provider. Training and education can be conducted by the account manager on accurately completing the roster, which can include addressing specialty codes. Please have the provider reach out and Wellpoint account manager(s) will assist with addressing their questions and concerns.