

Medically Needy Expense Deletion Request

Complete this form for those Medically Needy prescriptions that were billed through POS, but were not picked up by the member. This needs to be done as soon as possible to prevent claims from being used to meet spenddown.

Fax immediately to IME Claims Unit at (515) 725-1155, so the expense can be deleted.

Member Name
Member Medicaid Number
Provider Name
Provider Medicaid Number
Date of Service
Rx Number
NDC
Total Charge
Provider Signature
Date