

{Current Date}

{Member Name} {Address Line 1}{Address Line 2} {City}, {State} {Zip}

RE: History Request

Thank you for your interest in a claims history provided by Iowa Medicaid Member Services. Enclosed you will find a claims history for the following member:

Medicaid ID	Name	Dates History Covers
{State ID}	{Member Name}	{History From Date}-
		{History To Date}

If you have any questions, you may call Iowa Medicaid Member Services at 1-800-338-8366 or locally in the Des Moines area at 515-256-4606. Hours of operation are Monday through Friday from 8:00 a.m. to 5:00 p.m. You may also send written correspondence to:

Iowa Medicaid Member Services PO Box 36510 Des Moines, IA 50315

E-mail: IMEMemberServices@dhs.state.ia.us

Sincerely,

Iowa Medicaid Member Services

470-4722 (Rev. 01/19)