

{Current Date}

{MEM HIPAA Authorized Rep}
{Address Line 1}{Address Line 2}
{City}, {State} {Zip}

RE: {Member Name} {State ID}

This is in response to your call about a bill from {Prov Name} for services provided to you/member name on date of service (\$ amount).

Iowa Medicaid has received a claim for these services that has denied. IowaCare only pays for services provided by your Medical Home and assigned hospital if given a referral for specialty care. Enclosed you will find an ***IowaCare – Members Questions and Answers***. This gives you more information about your IowaCare coverage. Please keep it handy to answer future questions you may have.

You may continue to be billed and remain responsible for payment. Please contact the provider's billing office to make payment arrangements or to see if they offer financial assistance.

If you have any questions, please contact the Member Services Call Center again. If you disagree with this action, you may file an appeal as explained on the backside of this letter.

Iowa Medicaid Enterprise
Member Services Unit

Code #025B
Log ID # {Contact Log Number}

470-4780 (01/19)

Call or write the **Member Services Call Center** at:

PO Box 36510, Des Moines, Iowa 50315 – (800) 338-8366; (515) 256-4606 (local in the Des Moines area)
Please visit our website at www.dhs.iowa.gov/ime or e-mail us at IMEMemberServices@dhs.state.ia.us

Iowa Medicaid Enterprise – 100 Army Post Road - Des Moines, IA 50315