

{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 that has denied for the charges listed above. Our records show that you have Medicare as your primary insurance. All claims must be submitted first to Medicare and then to Medicaid. We spoke to the provider's billing office who has agreed to submit this claim to Medicare and then to Medicaid for payment consideration.

You should no longer be billed. However, please allow four to six weeks for processing. After that time, if you should receive another bill, please contact the Member Services Call Center again.

Iowa Medicaid Enterprise  
Member Services Unit

Code #015B  
Log ID # {Contact Log Number}

470-4790 (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](http://www.dhs.iowa.gov/ime) or e-mail us at [IMEMemberServices@dhs.state.ia.us](mailto:IMEMemberServices@dhs.state.ia.us)

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