

{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 in the amount of \$ amount.

We have not received a claim for the charges listed above. We spoke with the provider who sent the bill. The billing provider said the services received are not covered. The member who received services is enrolled in the Lock-In Program. Payment can only be made to the designated (lock-in) provider(s). Payment to other providers can be considered when there is a referral from the designated (lock-in) provider(s) or in an emergency.

Please remember to talk with your designated (lock-in) provider(s) before receiving nonemergency services. You may continue to be billed and remain responsible for payment of this charge.

If you have any questions, please call the Member Services Call Center at 1-800-338-8366 or locally in the Des Moines area at 515-256-4606 Monday through Friday between the hours of 8:00am - 5:00pm and ask to speak to a Lock-In representative.

Iowa Medicaid Enterprise Member Services Unit

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

470-5253