

{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 received a claim that has denied 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 non-emergency services. You may continue to be billed and remain responsible for payment of this charge. If you disagree with this decision, you may file an appeal. Appeal rights are explained on the backside of this letter.

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 #025B
Log ID # {Contact Log Number}

470-5254

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