



# Iowa Department of Human Services

Terry E. Branstad  
Governor

Kim Reynolds  
Lt. Governor

Charles M. Palmer  
Director

Current\_Date

Contact\_Name  
Address  
City, State Zip

RE: Member\_Name State\_ID

This is in response to your call about a bill from Provider\_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. Ambulance services must be medically necessary to be considered for payment. We contacted the provider's billing office who informed us the ambulance service did not meet the criteria for medical necessity.

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 #032B  
Log ID # Contact\_Log

470-5329 (04/15)

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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