

Iowa Department of Human Services
IMPORTANT NOTICE

Name (Date)
Address
City, State Zip code

RE: Provider Agreement

In accordance with 441-79.6(249A) of the Iowa Administrative Code (IAC), providers of medical and health care wishing to participate in the Iowa Medicaid program shall execute an agreement with the Department on form 470-2965. The agreement shall remain in full force and effect for a term of five (5) years.

Our records indicate that your provider agreement will expire in 60 days.

In order to continue participation in the Iowa Medicaid program, you must complete enrollment renewal. Enrollment renewal is completed electronically on the Iowa Medicaid Portal Access (IMPA) system. The provider will:

- Legally accept the new agreement
- Verify a listing of National Provider Identifiers (NPIs) that identify each professional and institutional component of the provider organization and structure
- Complete Ownership and Control Disclosure

To start the enrollment renewal process, simply print and complete the Designated Contact Person (DCP), form 470-5112, found on the DHS webpage, <http://dhs.iowa.gov/ime/providers/forms>, and return to:

Iowa Medicaid Enterprise
Attn: Provider Enrollment
PO Box 36450

Des Moines, Iowa 50315 or scan and email to: IMEProviderEnrollment@dhs.state.ia.us

Upon receipt of the DCP form, the Iowa Medicaid Enterprise (IME) will assign a unique Personal Identification Number (PIN) associated with the organization's Tax Identification (ID). The designated contact person will receive an email containing the PIN number(s). The PIN, Tax ID and NPI are used as the combination key to open the online application for enrollment renewal via IMAP at <https://secureapp.dhs.state.ia.us/imp/>.

If you have any questions regarding enrollment renewal, please contact the IME Provider Services Unit at 1-800-338-7909, (Option 2) or by email at imeproviderservices@dhs.state.ia.us. The IME appreciates your partnership as we work together to serve the needs of Iowa Medicaid members.

Sincerely,

IME Provider Enrollment Unit

470-5357 (9/15)