



Medicaid e-News

Transition:



Members: Please watch your mail!

Member ID cards will be arriving soon from the new health plans.

Members were asked to make a selection in health plan by February 17, 2016. Since that time, members have been sent a Confirmation of Coverage letter, and soon will receive their Amerigroup Iowa Inc., AmeriHealth Caritas Iowa Inc. or United Healthcare Plan of the River Valley Inc. member ID cards.

Please note : If a member's eligibility has changed since the selection date, or if they have made a different choice in health plan, they may not immediately receive a card, could receive a card in error, or receive duplicate cards.

Members should call Iowa Medicaid Member Services, or their selected health plan, with any questions about changes in eligibility and choice in plan that may impact their receipt of member ID cards.

Contracting Continues

Providers are encouraged to continue working with the three managed care organizations (MCOs) to complete contracts and credentialing requirements in time for the anticipated April 1, 2016, launch date. Find the [MCO contacts here](#).



IA Health Link coverage begins April 1, 2016.

[Iowa Medicaid Member Services](#)
1-800-338-8366

Updated Communications Toolkit

The IA Health Link Communications Toolkit has been updated with the April 1, 2016, launch date and is full of resources including FAQs, social media posts, images, links and more. Download it below:

Communications Toolkit

Follow Us!



Of currently active in-state Fee-for-Services providers :

- 96 percent have signed with at least one MCO
- 75 percent have signed with at least two MCOs
- 68 percent have signed with all three MCOs

Resources and Tools:

Provider Search Portals

[Amerigroup Provider Search Portal](#)

[AmeriHealth Caritas Provider Search Portal](#)

[UnitedHealthcare Provider Search Portal](#)

Managed Care Organization Provider Resource Pages Available

Comprehensive resource pages are available for each Managed Care Organization (MCO), featuring provider training manuals, webinars and important updates. You may view them below:

Amerigroup.com/IAProvider

AmeriHealthCaritasIA.com/IAProvider

UHCommunityPlan.com/IAProvider

Looking for an Old Issue of the Medicaid e-News?

Each edition features useful tools and important updates. Now you can quickly access old issues to find what your looking for. Visit the [Iowa Medicaid newsletter page](#) where you'll find links to each issue.

Informational Letters:

Non-emergency Medical Transportation IA Health Link Transition Update

An Informational Letter has been issued to address the transition of the non-emergency medical transportation (NEMT) services from the current broker to the Managed Care Organizations (MCOs).

Each of the MCOs has selected a transportation vendor. Providers will contract with each broker to provide NEMT. TMS/A2C will continue to schedule NEMT trips for March 2016. Below are the steps that members, providers, MCOs, brokers and their sub-contractors need to know as the IME transitions from a single NEMT broker to an MCO system.

To learn more see [Informational Letter 1631-MC](#).

Managed Care

Organizations:

[Amerigroup Iowa, Inc.](#)

1-800-600-4441

[AmeriHealth Caritas](#)

1-855-332-2440

[United Healthcare](#)

[Plan of the River](#)

[Valley, Inc.](#)

1-800-464-9484

IMPORTANT DATES FOR MEMBERS

Coverage Begins:

Coverage will begin for members transitioning to the IA Health Link on **April 1, 2016**.

Member Choice Continues:

Members can continue to make changes in MCO selection for any reason until **June 16, 2016**, and after for 'Good Cause.'

Clarification of Attending Physician Requirement on Claims

Informational Letter 1529 has been updated. This letter informed facility providers that beginning October 1, 2015, the IME would no longer accept long term care claims submitted with an inappropriate attending provider appended. This change was subsequently delayed, but will now be implemented effective for dates of service April 1, 2016, and after.

To learn more see [Informational Letter 1625](#).

Managed Care Organization Pharmacy Billing Reference

Effective April 1, 2016, pharmacy claims for Iowa Medicaid members enrolled in a Managed Care Organization (MCO) should be billed to the appropriate MCO or their corresponding Pharmacy Benefit Manager (PBM) to which a member is assigned.

To learn more see [Informational Letter 1626-MC](#).

Reminder: Provider Informational Letters

Informational letters are posted through the Iowa Medicaid Portal Application (IMPA) system and are available on the DHS website [here](#). These letters communicate important policies and procedures for providers and their administrative staff. Providers should watch closely for updates during the transition period.

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