



Iowa Department of Human Services

Medicaid e-News

Reminder:

Cost Reporting Requirements Continue

Iowa Medicaid providers that were required to submit cost reports prior to and after the IA Health Link managed care program transition are required to continue to submit reports in accordance with applicable rules under 441 Iowa Administrative Code. The cost report submission requirements will not change, until a change is directed by the legislature and/or changes are made to 441 Iowa Administrative Code.

More information and details on submission and reporting can be found in [Informational Letter 1820-MC-FFS](#).

Register Now for Annual Provider Training

Training sessions will be facilitated by the Iowa Medicaid Enterprise (IME) and will have representatives from the three Managed Care Organizations (MCOs) present to provide updates. Sessions will be offered in nine different communities throughout the state. In each location we will offer two provider sessions. These sessions will contain the same content so please attend the session that best works for your schedule.

More information, including dates and locations can be found in [Informational Letter 1817-MC-FFS-D](#).

You can register for Annual Provider Training [here](#).

Urgent Reminder: Provider Re-enrollment

The deadline for provider re-enrollment was June 30, 2017. There are a number of providers who have failed to complete the re-enrollment process.

Iowa Medicaid
Contacts

[Iowa Medicaid
Member Services](#)

1-800-338-8366

[Iowa Medicaid
Provider Services](#)

1-800-338-7909



IA Health Link
Member Services

[Amerigroup Iowa](#)

1-800-600-4441

[AmeriHealth Caritas](#)

1-855-332-2440

[UnitedHealthcare](#)

1-800-464-9484

IA Health Link
Provider Services

[Amerigroup Iowa](#)

1-800-454-3730

[AmeriHealth Caritas](#)

1-844-411-0579

[UnitedHealthcare](#)

1-888-650-3462

The Iowa Medicaid Enterprise (IME) is actively working to ensure providers complete re-enrollment in compliance with federal regulations, while also minimizing any disruptions to the payment or delivery of services.

Final notices have been sent to two groups of providers based on claims history:

- Providers who have not submitted claims in calendar year 2017: These providers must complete re-enrollment by September 29, 2017, to avoid termination.
- Providers who have submitted claims in calendar year 2017: These providers must complete re-enrollment by October 31, 2017, to avoid termination.

Providers with questions regarding re-enrollment should call IME Provider Services at 1-800-338-7909.

Success Story:



IA Health Link Member Gains Independence, Culinary Career

Amerigroup has been closely working with a 33-year-old Des Moines area member who qualifies for Medicaid Long Term Services and Supports through Iowa's Brain Injury waiver. This member suffered a brain injury during an accident and was living in an out-of-state facility when he became an Amerigroup member. He was receiving assistance for anxiety disorder and other health issues.

After he joined Amerigroup, their care management team began talking to him and assessing his situation. He shared his desire to move back home to Iowa, live independently and pursue a career in culinary arts. The Amerigroup care management



Dental Wellness Plan
Member Services

[Delta Dental](#)

1-888-472-2793

[MCNA Dental](#)

1-855-247-6262

Dental Wellness Plan
Provider Services

[Delta Dental](#)

1-888-472-1205

[MCNA Dental](#)

1-855-856-6262

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.

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team was able to identify supports that would enable him to achieve his goals.

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Through a program called Money Follows the Person (MFP), the Amerigroup care management team was able to transition him from the out-of-state facility to a group home in Pleasant Hill, IA. The care management team then helped him secure in-home supports that enabled him to move out of the group home and into his own independent living space in Des Moines, IA.

Amerigroup's employment support team also got involved to help him pursue a career in culinary arts by helping him secure a work skills certificate from Iowa Workforce Development. This member has overcome tremendous hurdles and achieved amazing successes. He has transitioned out of hospital-style living to independent living. He is on his way to achieving his goal of becoming a productive member of society through a new culinary career.

Announcement:

Out-of-Network Reimbursement

All claims for services provided to Managed Care Organization (MCO)-enrolled members must be submitted directly to the appropriate MCO, adhering to the MCO's claims submission and timeliness guidelines. If a provider sees an MCO-enrolled member which the provider is not enrolled with, the out-of-network provider will be reimbursed at 80 percent for all services. Reimbursement for covered services is additionally dependent on requirements of the member's MCO, such as prior authorization.

The provider may accept the 80 percent out-of-network rate from the member's MCO or the provider may choose to contract with the member's MCO.

More information can be found in [Informational Letter 1823-MC](#).

Provider Tools and Resources:

Provider Resource Pages

Comprehensive provider resource pages are available for each Managed Care Organization (MCO), featuring

provider training manuals, webinars and important updates. View them below:

Amerigroup.com/IAPProvider

AmeriHealthCaritasIA.com/IAPProvider

UHCommunityPlan.com/IAPProvider

Verify Eligibility

The Eligibility and Verification Information System (ELVS) line is very busy during the first of the month. The [ELVS web portal](#) is another option for providers in lieu of calling the ELVS line but each provider must enroll through the Electronic Data Interchange Support Services (EDISS). The ELVS web portal allows for multiple eligibility checks and batch submission, where as the ELVS phone system only allows for one at a time.

Login ID and password may be obtained through EDISS by submitting the following [Access Request Form](#) to EDISS or calling EDISS at 1-800-967-7902.

For more information, please see Informational Letter 1650-MC available [here](#).

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 you're looking for. Visit the [Iowa Medicaid newsletter page](#) where you'll find links to each issue.

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