

INFORMATIONAL LETTER NO. 2228-MC-FFS

DATE: April 19, 2021

TO: lowa Medicaid Pharmacies

APPLIES TO: Managed Care (MC), Fee-for-Service (FFS)

FROM: Iowa Department of Human Services (DHS), Iowa Medicaid Enterprise (IME)

RE: April 2021 Pharmacy Billing Reference FFS and MC

EFFECTIVE: July 1, 2021

****This Informational Letter (IL) replaces IL 2132-MC-FFS.****

Pharmacy claims for Iowa Medicaid members should be billed to the appropriate entity. Medicaid FFS member claims should be submitted to the IME. Claims for members enrolled in a MCO should be billed to the appropriate MCO or their corresponding Pharmacy Benefit Manager (PBM) to which a member is assigned.

An updated FFS and MCO pharmacy billing reference sheet follows, including current and historical billing information. Note the change for Iowa Total Care Benefit Identification Number (BIN), Processor Control Number (PCN) and RxGRP effective July 1, 2021. Please contact the appropriate entity with any questions.

FFS Pharmacy Billing Reference							
Plan/Group Name	Processor	BIN	PCN	Effective Date Range			
Iowa Medicaid	IME POS Unit (CHC)	011933	IAPOP	04/06/2020 - Current			
Iowa Medicaid	IME POS Unit (GHS)	011933	IAPOP	06/25/2005 — 04/05/2020			

MCO Pharmacy Billing Reference									
Current MCOs									
MCO Plan Name	PBM	BIN	PCN	RxGRP	Effective Date Range				
Amerigroup lowa, Inc.	IngenioRx	020107	FM	WKYA	10/01/2019 – Current				
Amerigroup lowa, Inc.	Express Scripts	003858	MA	WKYA	04/01/2016 – 09/30/2019				
Iowa Total Care	Envolve Pharmacy Solutions	004336	MCAIDADV	RX5477	07/01/2021 - Ongoing				
Iowa Total Care	Envolve Pharmacy Solutions	020545	RXA377	RXGMIA01	07/01/2019 – 06/30/2021				
MCO Pharmacy Billing Reference									
Historical MCOs									
MCO Plan Name	РВМ	BIN	PCN	RxGRP	Effective Date Range				
AmeriHealth Caritas Iowa, Inc.	Perform Rx	600428	07390000	N/A	04/01/2016 – 12/01/2017				
UnitedHealthcare Plan of the River Valley, Inc.	Optum Rx	610494	4401	ACUIA	12/01/2018 — 07/01/2019				
UnitedHealthcare Plan of the River Valley, Inc.	Optum Rx	610494	4444	ACUIA	04/01/2016 – 11/30/2018				