

### **INFORMATIONAL LETTER NO. 2594-MC-FFS-D**

**DATE:** June 14, 2024

**TO:** All Iowa Medicaid Providers (Excluding ICDAC)

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

FROM: Iowa Department of Health and Human Services (HHS), Iowa Medicaid

**RE:** Clarification to Medicaid Enrollment Options for Individual Practitioners

**EFFECTIVE:** Immediately

lowa Medicaid is required to comply with federal provider enrollment regulations as outlined in the <u>21st Century Cures Act (Cures)</u>, <u>specifically 42CFR 455.410(b) Subpart E</u><sup>1</sup>, requiring any provider furnishing/rendering Medicaid covered benefits must be enrolled as an Iowa Medicaid participating provider, including those providers who order services for members, prescribe medications to members and who make referrals for medically necessary services.

These requirements are designed to ensure all orders, prescriptions or referrals for items or services for Medicaid members originate from appropriately licensed and screened providers who have not been excluded from Medicare or Medicaid. These requirements apply to all provider types who order, prescribe and refer members for services.

For providers individually enrolling you should select one of the following lowa Medicaid enrollment options which best describes your Medicaid participation:

	Option #1 Furnishing/Rendering	Option #2 Ordering/Referring or Prescribing (ORP) ONLY
Definition	Providers who furnish/render items and services to, or ordering, prescribing, referring or certifying eligibility for, eligible Medicaid members.	Providers who are enrolling for the sole purpose of ordering/referring or prescribing items or services for eligible Medicaid members and will not submit claims to lowa Medicaid.
Allows	<ul><li>May submit claims for reimbursement of</li></ul>	<ul> <li>May order/refer or prescribe items and services for lowa</li> </ul>

<sup>&</sup>lt;sup>1</sup> https://www.govinfo.gov/content/pkg/PLAW-114publ255/pdf/PLAW-114publ255.pdf



services provided.

 May receive direct reimbursement for services provided.

 May provide services on behalf of Medicaid enrolled facility or group receiving reimbursement.

 May credential with Iowa Medicaid Managed Care entity(s). Medicaid Fee-For-Service (FFS) and Managed Care programs.

# Requirement

470-0254<sup>2</sup> Iowa Medicaid Universal Provider Enrollment Application. This form can be found on the <u>Provider Forms</u> webpage<sup>3</sup> on the HHS website<sup>4</sup>. 470-5111<sup>5</sup> Ordering/Referring Provider Enrollment Application. This form can be found on the Provider Forms webpage<sup>6</sup> on the HHS website<sup>7</sup>.

If you have questions, please contact Iowa Medicaid Provider Services, the appropriate MCO or PAHP:

#### **Iowa Medicaid Provider Services:**

Phone: 1-800-338-7909

Email: <u>imeproviderservices@dhs.state.ia.us</u>

## **Managed Care Organizations (MCOs):**

#### **Iowa Total Care:**

Phone: 1-833-404-1061

Email: <u>providerrelations@iowatotalcare.com</u>Website: <u>https://www.iowatotalcare.com</u>

#### **Molina Healthcare of Iowa:**

Phone: 1-844-236-1464

Email: iaproviderrelations@molinahealthcare.com

Website: https://www.molinahealthcare.com/providers/ia/medicaid/home.aspx

Provider Portal: https://www.availity.com/molinahealthcare

<sup>&</sup>lt;sup>2</sup> https://hhs.iowa.gov/media/4467/download?inline=

<sup>&</sup>lt;sup>3</sup> https://hhs.iowa.gov/programs/welcome-iowa-medicaid/provider-services/provider-forms

<sup>4</sup> https://hhs.iowa.gov/

<sup>&</sup>lt;sup>5</sup> https://hhs.iowa.gov/media/12376/download?inline=

<sup>6</sup> https://hhs.iowa.gov/programs/welcome-iowa-medicaid/provider-services/provider-forms

<sup>&</sup>lt;sup>7</sup> https://hhs.iowa.gov/



# Wellpoint Iowa, Inc. (formerly Amerigroup Iowa, Inc.):

Phone: 1-833-731-2143

■ Email: <u>ProviderSolutionsIA@wellpoint.com</u>

Website: <a href="https://www.provider.wellpoint.com/iowa-provider/home">https://www.provider.wellpoint.com/iowa-provider/home</a>

# **Prepaid Ambulatory Health Plans (PAHPs):**

### **Delta Dental:**

■ Phone: 1-888-472-1205

• Email: provrelations@deltadentalia.com

Website: <a href="https://www.deltadentalia.com/dentists/">https://www.deltadentalia.com/dentists/</a>

### **MCNA Dental:**

Phone: 1-855-856-6262

■ Email: <u>IA PR Dept@mcna.net</u>

• Website: <a href="https://www.mcnaia.net/dentists">https://www.mcnaia.net/dentists</a>