



Medicaid Information

Comm. 20, *Your Guide to Medicaid*, contains a complete list of services that are covered and not covered under Medicaid. Check this list before receiving medical care. If you receive services that are not covered, you can be billed by the provider and you will be responsible for paying the bill.

You may view the detailed list of covered and non-covered services on the internet at:
http://www.dhs.state.ia.us/policyanalysis/PolicyManualPages/Manual_Documents/Forms/Comm20.pdf

Your Medical Assistance Eligibility Card

All members receive a new *Medical Assistance Eligibility Card* (form 470-1911).

- ◆ Keep your card.
- ◆ Always carry your card with you and don't let anyone else use it.
- ◆ Show your card to the provider every time you get care.
- ◆ If you lose your card, call Member Services to ask for a new one.

Member Services: 1-800-338-8366

Member Services in the Des Moines area: 515-256-4606

Retroactive Medicaid Eligibility

You may qualify for Medicaid for up to three months before the month you applied. These months are called the "retroactive period."

You can qualify for retroactive benefits only if **all** of these statements are true:

- ◆ You have medical bills that you received during the retroactive period. (The bills can be paid or unpaid.)
- ◆ The bills are for services covered by Medicaid.
- ◆ You would have qualified for Medicaid in the months you got services, if you had applied.

There are exceptions:

- ◆ IowaCare only allows one retroactive month, the month before you apply.
- ◆ These groups do not allow retroactive benefits:
 - Iowa Family Planning Network (IFPN)
 - Home- and community-based services waiver.
 - Program for All-Inclusive Care for the Elderly (PACE), and
 - Qualified Medicare Beneficiary (QMB)

Call your local Department of Human Services (DHS) office if you think that you or a family member qualifies for retroactive Medicaid.

Who Can Provide Medical Services

Providers

With Medicaid, you will choose your own providers. Follow these steps:

1. Choose a doctor, dentist, pharmacy, and other providers that take Medicaid.
2. Ask the providers if they take Medicaid *before* you make an appointment. Some providers limit their number of Medicaid patients or don't take Medicaid.

Remember: Make sure the provider understands that you are in Iowa Medicaid. If you don't say you are an Iowa Medicaid member *before* you get services and the provider doesn't take Medicaid, you may be billed for the entire cost!

3. Show your *Medical Assistance Eligibility Card* when you get to the appointment.
4. Ask if Medicaid covers the service you need or if you will have to pay for it.
5. Keep all appointments you make with providers or call to cancel or reschedule.

Providers Away from Home

If you are out of Iowa and need medical care, check to see if the provider is enrolled with Iowa Medicaid.

If the provider is enrolled with Iowa Medicaid, the provider must accept what Medicaid pays. Providers are not allowed to charge you for services that Medicaid covers.

If the provider does not participate in Medicaid, you will have to pay for the services.

Managed Care

Some Medicaid members get health care through MediPASS or an HMO. Read more about them on page 3.

Mental Health and Substance Abuse (Behavioral Health)

Read about how to get these services through the Iowa Plan on page 3.

Co-Payment

Some medical services have a co-payment, which is your share of the cost. If there is a co-payment, you will pay it to the provider. The provider will tell you how much it is.

There is a co-payment:

- ◆ If federal rules require one, such as for family planning services.
- ◆ If the service is not a service Medicaid requires but the state chooses to cover it, such as dental services and prescription drugs.
- ◆ For emergency room service if the visit is not an emergency.

There is **no** co-payment:

- ◆ For care covered by Medicaid in a skilled nursing facility or nursing facility.
- ◆ If you are pregnant.
- ◆ If you are under age 21.
- ◆ For services provided by a health maintenance organization (HMO).

Member Responsibilities

As a Medicaid member, you must:

- ◆ Ask *only* for medical services that are medically necessary. DHS may limit your services if you use Medicaid for services that are not necessary.
- ◆ Tell Iowa Medicaid Member Services about any changes to other health insurance coverage. Tell them if coverage ends, if you lose or get new coverage, or if you change insurance companies.
- ◆ Tell your medical providers about anyone else who might be legally responsible to pay your medical bills.
- ◆ Report to Iowa Medicaid Member Services if you are injured in an accident or if you claim medical negligence for something that required medical treatment.
- ◆ Report any settlement you get from lawsuits, insurance claims, or worker's compensation claims. Medicaid can be denied or canceled if you don't tell DHS about these settlements.
- ◆ If you were in a trauma-related incident, you or your representative must contact the IME Revenue Collections/Lien Recovery Unit before any documents will be released. Call **1-888-543-6742** or call **515-256-4620** in the Des Moines area.

Managed Health Care (MHC)

If you are an Iowa Medicaid member and live in a county where there is Managed Health Care (MHC), you may be required to join a plan. This does not take away any Medicaid benefits. You may choose either an HMO or a MediPASS doctor. IME will assign a provider if you do not choose.

With managed health care:

- ◆ You have a primary care doctor.
- ◆ You build a doctor-patient relationship.
- ◆ You have a phone number to call, and a doctor and staff who know you, when you need medical services.
- ◆ You get the medical care you need from your own doctor instead of from an impersonal emergency room or a doctor you don't know.
- ◆ It's easier for you and your children to get preventive services to stay healthy -- things like shots for children and a yearly PAP and pelvic exam for women.

MHO changes the way you get some medical services, so be sure to read about your choices and how to get Medicaid services in MHC. You will get more written information once you choose (or are assigned if you don't choose).

Call Member Services workdays from 8:00 a.m. to 5:00 p.m. at 1-800-338-8366 or 515-256-4606 (Des Moines) to make a choice or ask questions.

You can also call if you have any problems after you are enrolled in MHC or if you want to change your enrollment. You may ask for a change if you're not happy with your choice or if your circumstances change (for example, if you move or your doctor retires).

Iowa Plan for Behavioral Health

Most Medicaid members under age 65 are enrolled in the Iowa Plan for Behavioral Health (Iowa Plan). The Iowa Plan is a statewide managed care program for mental health services and substance abuse treatment called the Iowa Plan for Behavioral Health (Iowa Plan). Ask about the Iowa Plan toll-free at **1-800-317-3738**.

If you are enrolled in the Iowa Plan:

- ◆ You have the right to know how to get these Medicaid benefits.
- ◆ You will receive an information packet soon after you qualify for Medicaid.
- ◆ You can call the toll free number if you have questions about mental health or substance abuse services.

To find a provider through the Iowa Plan, call the toll free number for a list of providers. Or you may go directly to a provider to get care. Show your Medicaid card to the provider so they can check to see if you are in the Iowa Plan.

If your provider is not part of the Iowa Plan, the provider may want to join, or refer you to another provider.

In a mental health or substance abuse emergency, go directly to a hospital emergency room to be evaluated for appropriate care and treatment.

Member Services Call Center

The Member Services Call Center toll-free telephone numbers are **1-800-338-8366** or **515-256-4606** in the Des Moines area.

Call your Members Services Call Center for questions about:

- ◆ Changing your address.
- ◆ Asking for a new card (except for IowaCare).
- ◆ General Medicaid information.
- ◆ Enrolling in Managed Health Care (MHC).
- ◆ Getting approvals (prior authorizations).
- ◆ Getting special approvals (special authorizations).
- ◆ Asking about third party liability (TPL). Medicaid is a "payer of last resort." This means that any other health insurance you have must be billed first.
- ◆ Billing.

If you are calling about unpaid bills you think Medicaid should have covered, have these things ready when you call:

- ◆ The medical bill.
- ◆ A brief description of what services were provided.
- ◆ The member ID number on the *Medical Assistance Eligibility Card* for the person who received the billed services.

You may also write or fax the Member Services Call Center at:

The Iowa Medicaid Enterprise
P.O. Box 36510
Des Moines, IA 50315
Fax Number: 515-725-1351 Attention: Billing

Or go to www.ime.state.ia.us or email us at imemberservices@dhs.ia.us

Call the DHS Call Center at **1-877-347-5678**:

- ◆ If you move
- ◆ If you have a change in income
- ◆ At the birth of a child
- ◆ At the death of a Medicaid member
- ◆ To correct the spelling of your name
- ◆ To change your name due to marriage or divorce
- ◆ To update the number of persons who live in your household
- ◆ To change a date of birth or social security number
- ◆ To report a gain or loss in financial resources
- ◆ If you need an IowaCare card

Contact your local DHS office:

- ◆ If you need to add an authorized caller.
- ◆ To ask about medical assistance, Food Assistance, Family Investment Program or child care assistance.

Appeals and Hearings

Talk to a worker if you disagree with a decision DHS makes.

- ◆ You have the right to file an appeal asking for a hearing.
- ◆ You must file the appeal within 30 days of the date on the notice.
- ◆ Talking with your worker or DHS staff does not extend this time limit.

The hearing will be a meeting with an administrative law judge from the Department of Inspections and Appeals. You will present your complaint at the meeting. The judge will review all the facts and find if the decision was correct or should be changed.

You must ask for the appeal in *writing* to your local DHS office. Or you may write to:

**Iowa Department of Human Services
Appeals Section 5th Fl
1305 E Walnut
Des Moines, Iowa 50319-0114**

You may also file an appeal at www.dhs.state.ia.us/forms/appealrequest.htm.