



# Iowa Department of Human Services

Terry E. Branstad  
Governor

Kim Reynolds  
Lt. Governor

Charles M. Palmer  
Director

## INFORMATIONAL LETTER NO.1640-MC

**DATE:** April 1, 2016

**TO:** All Iowa Medicaid Individual Consumer Directed Attendant Care (CDAC) Providers and Managed Care Organizations (MCOs)

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

**RE:** CDAC Claim Forms and Submission Details for the MCOs

DHS has transitioned most Medicaid members to a new managed care program, officially named IA Health Link, on April 1, 2016.

### **MCO Claims Process:**

Beginning April 1, 2016, all claims for services provided on or after April 1, 2016, for MCO-enrolled members must be submitted directly to the member's MCO, adhering to the MCO's claims submission and timeliness guidelines. The IME has directed that the MCO provider agreements require that providers submit claims within 180 days of the date of service if third party liability is not involved. Any services provided prior to April 1, 2016, must be billed with the IME under the normal process. Each MCO's claim forms and submission details are listed below:

#### **AmeriHealth Caritas Iowa, Inc.:**

- Services will be submitted on [Claim for Targeted Medical Care Form](#) or the universal CMS-1500 paper claim form.
- [Targeted Medical Care Claim Form Instructions](#)
- For questions call Provider Services at 1-844-411-0579.
- The Targeted Medical Care Form will need to be mailed to:  
AmeriHealth Caritas Iowa  
Attn: Claims Processing Department  
P.O. Box 7113  
London, KY 40742

#### **Amerigroup Iowa, Inc.:**

- Services will be submitted on Claim for Targeted Medical Care, form, 470-2486, or the universal CMS-1500 paper claim form.
- For questions call Provider Services at 1-800-454-3730
- The Targeted Medical Care Claim forms may be submitted by fax at 844-400-6463 or mailed to:  
Amerigroup Iowa, Inc.  
Claims Department  
4800 Westown Parkway, Suite 200  
West Des Moines, IA 50266

#### **UnitedHealthcare Plan of the River Valley, Inc.:**

- Services will be submitted on the Targeted Medical Care, form 470-2486, or the universal CMS-1500 paper claim form.
- For questions call Provider Services at 1-888-650-3462
- The Universal CMS-1500 Claim forms may be mailed to:  
 UnitedHealthcare  
 PO Box 5220  
 Kingston, NY 12402-5220

**Additional Information:**

- Services will continue to be approved through your member’s community-based case management agency and/or the MCO’s community-based case manager.
- You will need to continue keeping accurate documentation, indicating what services you provide to the member. Please contact the member’s MCO for the daily documentation form.
- The member must continue to be eligible to receive waiver services and you must be approved to provide services by the member’s community-based case manager.

**The same services available before April 1, 2016, will be available after April 1, 2016. Covered CDAC services are listed below:**

CDAC	CDAC	Skilled CDAC
House Keeping	Fixing and cleaning up for meals	Intravenous therapy
Parenteral injections	Taking medicine	Catheter care
Shopping	Running errands	Therapeutic diets
Handling money	Getting dressed and undressed	Colostomy care
Getting out of bed	Taking a bath	Post-surgical nursing care
Communicating with others	Scheduling appointments	Tube feedings
Going to the doctor	Monitoring medications	Recording vital signs

If you have any questions please contact the member’s MCO Provider Services phone number listed above.