Iowa Department of Human Services

Request for Patient Eligibility

Iowa Medicaid Pharmaceutical Case Management Program

Important Note:

Some insurance (TPL) and Medicare Part D plans already cover this type of service. For Medicaid members who have TPL or Medicare Part D the provider must show that the TPL/Medicare D does not cover this service when submitting a claim to IME. Call provider services if you have any questions about how to submit a claim in such cases: 1-800-338-7909 or 515-725-1004 (local in Des Moines).

In addition, the provider is responsible for verifying any other coverage and ongoing Medicaid eligibility – Medicaid is always "payer of last resort." If the member becomes eligible for Medicare (or other insurance) while receiving Pharmaceutical Case Management (PCM), primary coverage of the service may change. Approval for PCM service does not guarantee that coverage of the service is with Medicaid.

Member Name _____ Medicaid ID Number _____

This member has the following disease states: (check all that apply)

- ❑ Congestive Heart Failure
- ❑ Ischemic Heart Disease
- ❑ Diabetes Mellitus
- ❑ Hypertension
- ❑ Hyperlipidemia
- ❑ Asthma
- ❑ Depression
- ❑ Atrial Fibrillation
- ❑ Osteoarthritis
- ❑ GERD
- ❑ Peptic Ulcer Disease
- ❑ COPD

Does this member take four or more regularly scheduled medications? Yes No
(Do not include topical medications or PRN medications.)

If yes, please list four of this member's scheduled medications.

_____ _____

_____ _____

Does this patient reside in a nursing facility? Yes No

I submitted this information to be true to the best of my knowledge.

_____ _____

Provider Signature Provider Name

Pharmacist's NPI Number Required	Provider Fax Number *(need for response)*
Pharmacy Name	Pharmacy Telephone Number

Please fax this completed form to 515-725-1355.

This portion will be completed by the Eligibility Processing Unit and faxed to you. However, this document does not guarantee patient eligibility for Medicaid.
According to the information you have provided, this member ☐ IS ☐ IS NOT eligible for Iowa Medicaid Pharmaceutical Case Management services.