



IA Health Link Managed Care Organization Change

IA Health Link members have the opportunity to change their Managed Care Organization (MCO) for any reason during their Annual Choice Period. Information about each MCO is available at www.iahealthlink.gov. **Only fill out this form if you wish to change your MCO.** If you want to keep things just the way they are, you do not have to do anything.

(If submitting this form by mail, please use blue or black ink. * = REQUIRED.)

Name of Person to Enroll*	Date of Birth*	ID Number*	Check One MCO*
			<input type="checkbox"/> Amerigroup Iowa, Inc. <input type="checkbox"/> Iowa Total Care
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			<input type="checkbox"/> Amerigroup Iowa, Inc. <input type="checkbox"/> Iowa Total Care

Reason for changing your MCO: _____

Your Name*
Your Address (Street, City, and Zip Code)*
Your Phone Number

***I am authorized to make changes on this account and I understand that by completing this form and submitting it to Member Services, I am changing the MCO for the person(s) listed above. YES**

If you have questions about how to complete this form, call Member Services at **1-800-338-8366** or locally in the Des Moines area at 515-256-4606, Monday through Friday from 8 a.m. – 5 p.m.