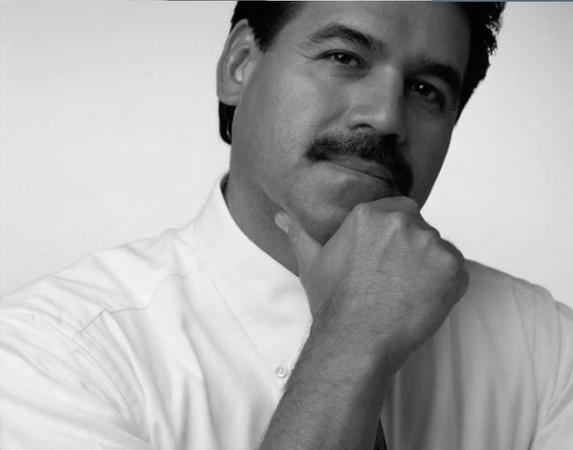




Managed Health Care



Iowa Wellness Plan



Member Services:

Toll Free: 1-800-338-8366

Local: 515-256-4606

Website: www.dhs.iowa.gov/ime/members

Email: IMEMemberServices@dhs.state.ia.us

Para solicitar este folleto en español, por favor póngase en contacto con Servicios para Miembros.

Member Services
Toll Free: 1-800-338-8366
In the Des Moines area: 515-256-4606
Fax: 515-725-1351
Email: IMEMemberServices@dhs.state.ia.us

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The Iowa Wellness Plan

Welcome to the Iowa Wellness Plan. This booklet will give you information about the Iowa Wellness Plan and what services you have access to. The Iowa Wellness Plan is available to eligible Iowans, like you, who are 19 to 64 years of age. The Iowa Wellness Plan provides health coverage that allows you to be more involved in your overall wellness.

Please take a few minutes to review the information in this booklet and if you have any questions, contact the Member Services Call Center at **1-800-338-8366** or in the Des Moines area at 515-256-4606, Monday through Friday from 8:00 am – 5:00 pm. Questions may also be emailed to IMEMemberServices@dhs.state.ia.us.

More information about your benefits can be found at www.dhs.iowa.gov/ime/members or contact the Member Services Call Center at **1-800-338-8366** or in the Des Moines area at 515-256-4606.

Interpreter Services

Iowa Medicaid can arrange for an interpreter to help you speak with us in almost any language. Please call Member Services for help at 1-800-338-8366 or locally in the Des Moines area at 515-256-4606.

Medical Assistance Eligibility Card

All members receive a new Medical Assistance Eligibility Card.



- ◆ **Keep** your card until you get a new one.
- ◆ **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.
- ◆ If you go off of the Iowa Wellness Plan and come back on, a new card will not be issued. **Please contact Member Services to request a new card.**

Choosing an Iowa Wellness Plan Provider

Primary Care Provider: A primary care provider (PCP) is the health professional or team that works together to manage and supply care for the member. Members must pick a PCP that is enrolled and accepts Iowa Medicaid coverage. If you get medical care from a provider who does not accept Iowa Medicaid, you may be responsible for the cost of the services.

Health Maintenance Organization: A Health Maintenance Organization (HMO) offers managed care to members who choose to be enrolled. The HMO makes sure that the member has a medical provider they can trust and work with to meet health goals. Enrollment into a HMO is dependent upon the member county of residence. To see Iowa counties with the option of HMO you may visit https://dhs.iowa.gov/ime/members/medicaid-a-to-z/iahealthlink/your_benefits/IWP.

Being in an HMO does not limit your benefits. Members must see a provider who is contracted with the HMO. Detailed information is provided by the HMO. You may contact the HMO at 1-877-204-9132. If you get medical care from a provider who is not contracted with the HMO, you may be responsible for the cost of the services.

It is best to have a provider who you are comfortable with and who can help meet your medical needs. All members are given an opportunity to select a PCP who is enrolled as an Iowa Wellness Plan provider. If an HMO option is available in your county, you may choose this option and receive most of your medical care from the HMO providers. You may contact the HMO directly for more information.

Here are some important things to remember:

- ◆ Initial selections are **required** to be made by the date listed in your welcome letter.
- ◆ If no selection is made you **will be** assigned to the provider in your welcome letter.
- ◆ Certain providers may have limitations and you may be asked to contact their office to approve the enrollment.



Iowa Wellness Plan members may contact the Iowa Medicaid Member Services call center to select a PCP or HMO. A list of options is included with your Iowa Wellness Plan enrollment packet.

You may enroll in the following ways:

- ◆ Complete the gray enrollment form included with your Iowa Wellness Plan enrollment packet, seal it, and return it by mail at no cost to you.
- ◆ Call the Member Services call center, Monday through Friday from 8:00 am – 5:00 pm
Toll free: 1-800-338-8366 or in the Des Moines area at 515-256-4606.
- ◆ Email Member Services at IMEMemberServices@dhs.state.ia.us
- ◆ Fax your gray enrollment form to 515-725-1351.

Changing Your Provider

You may change your provider for any reason within 90 days of your initial welcome letter. If a change is made, you should know the following:

- The change will take effect for the following available month.
- If you need to see the new provider before your provider assignment takes effect, you need to contact your current assigned provider and obtain a referral. If you do not follow this step your services may not be covered. This means that you may be responsible to pay for them.

Once the 90 day period has ended, you are expected to stay with your selected PCP or HMO throughout the rest of your enrollment year.

After your 90 day period has ended, you cannot change your primary care providers (PCP) or HMO provider without good cause. Because we want you to be happy with your provider you may contact Iowa Medicaid Member Services to explain why you need to change your PCP or HMO during your closed enrollment period. Some examples of good cause include:

- ◆ Trouble accessing care
- ◆ Breakdown in doctor/patient relationship
- ◆ Availability of a new, previously unavailable Iowa Wellness Plan provider or HMO. (In this instance, members will be allowed to select that provider for the remainder of the current enrollment period.)

Providers are also able to request disenrollment of the member for good cause.

You will receive a notice in the mail approximately 60 days before the end of your twelve-month enrollment telling you that you can change your doctor if you choose.

Special Notice Relating to Federally Qualified Health Centers

Some Medicaid providers are Federally Qualified Health Centers (FQHCs). These are clinics that offer a wide variety of services at a single location. Some additional services could include the following: better understanding of ethnic culture and customs relating to health care, foreign language translation, transportation to clinic/home, health and wellness education and training, and dental or pharmacy services. If you want to have access to an FQHC, make sure to choose a provider that is listed with an FQHC. Some of the FQHCs available include the following:

All Care Community Health Center, Inc.
Council Bluffs, Iowa
712-325-1990

Behavioral Health Centers of Southern Iowa
Albia, Iowa
(641) 446-2383

Community Health Care
Davenport, Iowa
563-336-3000

Community Health Care of Fort Dodge
Fort Dodge, Iowa
515-576-6500

Community Health Centers of Southern Iowa
Leon, Iowa
641-446-2383

Crescent Community Health Center
Dubuque, Iowa
563-690-2850

Linn Community Care
Cedar Rapids, Iowa
319-730-7300

Peoples Community Health Clinic
Waterloo, Iowa
319-272-4300

Primary Health Care Inc.
Des Moines, Iowa
515-248-1600

Promise Community Health Center
Sioux Center, Iowa
712-722-1700

Proteus, Inc.
Des Moines, Iowa
515-271-5303

River Hills Community Health
Richland, Iowa
319-456-2045

Siouxland Community Health Center
Sioux City, Iowa
712-252-2477

United Community Health Center
Storm Lake, Iowa
712-213-0109

***Note:** Some FQHCs have multiple locations. Call the number listed for an FQHC above for more information.*

Changing Your Address

If you move, please contact the Department of Human Services call center at 1-877-347-5678 within 10 days of the move. If you move to another county, you may get a new enrollment packet in the mail instructing you to choose a new provider in your new area. Please contact Member Services to choose a new provider.

If you move in the middle of a month, contact the provider you are currently enrolled with to ask for a referral to see a provider in your new area.

Accessing Services Covered by the Iowa Wellness Plan

Iowa Wellness Plan	
Plan Benefits	PCP & HMO
Ambulatory Patient Services <ul style="list-style-type: none"> • Physician Services • Primary Care 	Covered
Chiropractic	Covered
Dental	Covered through the Dental Wellness Plan
Emergency Services <ul style="list-style-type: none"> • Emergency Room Ambulance	Covered
<ul style="list-style-type: none"> • Family Planning Services 	Covered
Hearing Aids	Not Covered
Home Health	Covered Private duty nursing and personal care are not covered
Hospice	Covered Respite: 15 inpatient and 15 day outpatient lifetime limit
Hospitalization	Covered
Lab Services <ul style="list-style-type: none"> • X-Rays • Lab Tests 	Covered
Mental Health and Substance Use Disorder Services Inpatient/Outpatient services provided by: <ul style="list-style-type: none"> • Hospitals • Psychiatrist • Psychologist • Social Workers • Family and Marital Therapists • Licensed Mental Health Counselors 	Covered
Other Mental Health Services	Not Covered
Other Benefits <ul style="list-style-type: none"> • Bariatric Surgery • Breast Reduction • Temporomandibular Joint (TMJ) • Non-Emergency Medical Transportation • Intermediate Care Facility (Nursing Facility) • Intermediate Care Facility for the Intellectually Disabled 	Not Covered Not Covered Not Covered Not Covered Not Covered Not Covered
Podiatry	Covered Routine foot care is not covered unless it's part of a member's overall treatment related to certain health

	care conditions
Prescription Drugs	Covered
Rehabilitative and Habilitative Services	Covered
<ul style="list-style-type: none"> • Physical Therapy • Occupational Therapy Speech Therapy	<ul style="list-style-type: none"> • 60 visits covered each year for each therapy type
Skilled Nursing Facility	Limited to 120 days annually
Vision Care Exams	Covered
Eyeglasses	Not Covered

*You may contact the HMO to find out what providers you can see for your medical care described above. For non-emergency care, you should always contact the HMO available 24-hours each day at 1-877-204-9132.

The Dental Wellness Plan

Members enrolled in the Iowa Wellness Plan also have the benefit of dental coverage. This dental coverage is managed by Delta Dental. The earned benefit dental program allows for you to get core benefits as soon as you're a member. More services become available to you when you follow a healthy dental plan.

Core benefits include:

- X-rays
- Cleanings
- Fluoride
- Emergency services
- Fix teeth/ dentures for basic needs, like eating, talking, and pain



The dental plan provider will send you your dental insurance card and handbook to get you started toward a healthy smile. For more information about the Dental Wellness Plan call 1-888-472-2793.

Healthy Behaviors Program

As a member of the Iowa Wellness Plan you have a chance to play a bigger part in your health care through the Healthy Behaviors Program. The Healthy Behaviors program allows members to become aware of their health status through two activities. Those activities are a Health Risk Assessment (HRA) and an annual wellness exam (physical).

Some members who are enrolled in the Iowa Wellness Plan may have to pay a member contribution. A contribution is an amount of money that members may pay each month for their health coverage. The contribution depends on the member's income. During the first year that you qualify for the Iowa Health and Wellness Plan there are no contributions. If you complete both Healthy Behaviors in your first year, you will not have contributions in your second year. You will need to complete both Healthy Behaviors each year so that your contributions can be waived in your next enrollment year. If you do not complete both Healthy Behaviors you may have to pay contributions.

To continue receiving free coverage with the Iowa Wellness Plan, you must complete the following Healthy Behaviors:

Health Risk Assessment (HRA)

1. Go online to AssessMyHealth.com.
2. You will need to enter a - five-digit code. You can get this code from your provider. This will let your provider see your results. If your provider does not have a code, enter MBR11.
3. Complete the assessment. When done, enter your Medicaid member ID number. Select 'yes' to share your results with your provider. You must enter your member ID to get credit for the Healthy Behavior.
4. Take your results to your wellness exam.

Current Year of Eligibility



Next Year of Eligibility



Wellness Exam

1. Call your primary care provider and schedule your wellness exam.
2. Keep your appointment and work with your provider to stay healthy.

Sample Billing Statement

Some members who do not complete their Healthy Behaviors may have to pay a contribution during the next year that they qualify. Below is a sample of the billing statement for the contribution. For more information on how to read your statement, call 1-800-338-8366, Monday through Friday, from 8:00 a.m. until 5:00 p.m.

HOW TO READ YOUR STATEMENT

Take a moment to read this tool to help you understand your Iowa Health and Wellness Plan Billing Statement. For more information on how to read your statement, call **1-800-338-8366** or 515-256-4606 in Des Moines, M-F 8am–5pm.

Statement To
The name and address of the member whom the statement is for.

Important Dates
The statement date is the day you are being sent a statement. The due date is the day we need to receive a payment slip and/or payment from you.

Iowa Health and Wellness Plan Billing Statement

00000
John Doe
123 Main Street
Anytown, Iowa 00000-0000

Statement Date: 05/25/15
Due Date: 06/15/14
Statement: 0000000000000000
Member ID: 0000000X

Hi John Doe,

As a member of the Iowa Health and Wellness Plan it is your responsibility to pay a member contribution. This statement tells you how much your contribution is and when it is due.

- 1** The total amount that you owe is \$15.00. This amount is due 06/15/14.
- 2** Please return the amount owed with the payment coupon below. Make your check out to *Iowa Health and Wellness Plan*. Please do not send cash or any other documents with your payment.
- 3** If you are unable to pay your contribution, please check the hardship box below and return the payment coupon OR call Member Services at 1-800-338-8366. **Important note: Checking the box below to claim financial hardship will apply to this month's amount due only. You will still be responsible for amounts due from past months.**

If you have any questions please call Member Services at 1-800-338-8366 Monday through Friday, from 8:00 a.m. to 5:00 p.m.

470-5285 (09/14) TEAR HERE, KEEP ABOVE FOR YOUR RECORDS
RETURN BELOW WITH PAYMENT

Hardship Box
Check here if you are unable to afford this month's contribution. Then return the payment slip to the given address.

Hardship: By checking this box I am claiming financial hardship (see more information about hardship on back side).

John Doe
123 Main Street
Anytown, Iowa 00000

Payment Information
This is the total amount that is due from you. In the paid box write the payment amount you are sending with the payment slip. One number per box please.

Due Date: 06/15/14
Member ID: 0000000X
Amount Due: \$15.00

Amount Due: \$15.00

Paid: \$

DO NOT SEND CASH

0000000X 0 0000000000 06152015 001500 1

Questions?
Call this number for help.

Hardship Box
Check here if you are unable to afford this month's contribution. Then return the payment slip to the given address.

Return Payments To
Send payments back to this address.

Payment Information
This is the total amount that is due from you. In the paid box write the payment amount you are sending with the payment slip. One number per box please.

Health Management Programs

Iowa Medicaid has programs that will help members with chronic diseases and pregnant members. The programs do not change your health benefits.

Disease Management Program: Members with chronic conditions such as diabetes, asthma, high blood pressure, and heart disease, are welcome to join the Disease Management program. Health Coaches who are licensed Registered Nurses can work with you over the phone. Health coaches are there to:

- answer questions you may have
- send you free information about your healthcare
- help you find a provider or health home
- set up visits with your provider
- help find needed resources in the community

Maternity Management Program: Expecting mothers can receive help to deliver healthy babies through this program. Licensed Nurses who are Health Coaches are there to help you through each stage of pregnancy

- set up provider visits
- find resources in your community to help you before and after the baby is born

To sign-up for either program call **1-800-338-8366** or locally in the Des Moines area at 515-256-4606, between the hours of 8:00AM and 5:00PM.

Help to Quit Smoking

Iowa Wellness Plan members can get help with quitting the use of tobacco products and smoking. The program is free of charge to all Iowa Wellness Plan members. The program provides support over the phone through Quitline Iowa. Pharmacy services for payment for nicotine replacement therapy such as patches and gum are also available. Some other drugs, such as Chantix, may be covered when properly prescribed by your medical provider. Members may need to work with their provider if a prior authorization is needed.

Members can get help to quit smoking by calling the toll free tobacco cessation helpline at **1-800-784-8669**. Help is available 24 hours each day. Hours may vary on holidays.

- ◆ TDD Line: 1-866-822-2857

Early and Periodic Screening Diagnosis and Treatment Program

Iowa Health and Wellness Plan members ages 19 and 20 have an opportunity to take advantage of free health care for benefits beyond regular Iowa Health and Wellness Plan coverage. You will receive these benefits through the Early and Periodic Screening Diagnosis and Treatment (EPSDT) program and coverage is automatic.

EPSDT exams are available to you and can include:

- Physical checkup
- Vision checkups and eyeglasses
- Hearing checkups and hearing aids
- Information about family planning
- Immunizations (shots)
- Information about diet and development

Some benefits will end once you become 21 years of age. To learn more about the EPSDT program call **1-800-369-2229** or visit www.iowaepsdt.org

Iowa Plan for Behavioral Health

Members of the Iowa Wellness Plan are also 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. While you may never need mental health or substance abuse care, it is your right to know how to access these benefits.

Information about the Iowa Plan for Behavioral Health is available to members by calling the Iowa Plan's toll-free number: 1-800-317-3738.

Emergency (ER) and Urgent Care

Emergent Care

An emergency is considered any condition that could endanger your life or cause permanent disability if not treated immediately.

If you have a serious or disabling emergency, you do not need to call your PCP or your HMO. Go directly to the nearest hospital emergency room. **For emergencies only call 911 for an ambulance.**

The following are examples of emergencies:

- ◆ ***A serious accident***
- ◆ ***Poisoning***
- ◆ ***Heart attack***
- ◆ ***Stroke***
- ◆ ***Severe bleeding***
- ◆ ***Severe burns***
- ◆ ***Severe shortness of breath***

You must contact your provider for all follow-up care. Do not return to the emergency room for the follow-up care. Your provider will handle the follow-up or give a referral for this care.

Urgent Care

Urgent care may be needed when you are not in a life-threatening or a permanent disability situation and have time to call your provider.

If you have an urgent care situation, you should call your PCP or HMO to get instructions. The following are some examples of when you may need urgent care:

- ◆ ***Fever***
- ◆ ***Stomach pain***
- ◆ ***Earaches***
- ◆ ***Upper respiratory infection***
- ◆ ***Sore throat***
- ◆ ***Minor cuts and lacerations***

Important Notes

- ◆ If you do **not** show your medical card to the provider or hospital and do **not** have a referral from the provider for non-emergency care, you may have to pay the medical bill for those services yourself.
- ◆ Your provider is responsible for helping you meet your health care needs. If you feel you are not getting the care that you need, call the Member Services Call Center at 1-800-338-8366.
- ◆ Iowa Medicaid only pays for services given by providers who are **enrolled** with the Iowa Medicaid program. For the Iowa Wellness Plan, payment will not be made to any provider who is not enrolled with Iowa Medicaid even if your PCP has given you a referral. For members who have chosen the HMO, you must see providers who are contracted with your HMO.
- ◆ If you are pregnant, you must notify the Department of Human Services (DHS) once the baby has been born. You may reach DHS by calling 1-877-347-5678.
- ◆ When your baby has been enrolled with Iowa Medicaid you will get a welcome packet in the mail that explains the health coverage for the baby.
- ◆ For **mental health or substance abuse services**, you should call **1-800-317-3738** whether or not you are enrolled with a PCP or an HMO.
- ◆ Participating in the Healthy Behaviors program can allow for you to save on your Iowa Wellness Plan coverage. More information about the Healthy Behaviors program is available at https://dhs.iowa.gov/ime/members/medicaid-a-to-z/iahealthlink/your_benefits/healthy_behaviors.
- ◆ A copy of this Iowa Wellness Plan member handbook is available on the Iowa Medicaid website at <http://dhs.iowa.gov/ime/members/member-resources>.

Your Rights and Responsibilities

You Have the Right to:

- ◆ Receive timely, appropriate, and accessible medical care
- ◆ Obtain a second opinion regarding a medical diagnosis with a referral from your provider
- ◆ Choose the provider of your choice from the available Iowa Wellness Plan providers
- ◆ Change your provider as allowed by program policy
- ◆ Appeal a decision that you do not agree with
- ◆ Be treated with respect and dignity
- ◆ Be treated without discrimination with regard to race, color, national origin, sex, sexual orientation, gender identity, religion, age, disability, political belief or veteran status
- ◆ Participate in decisions regarding your health care, including the right to refuse treatment

You Have the Responsibility to:

- ◆ Be knowledgeable about your medical coverage
- ◆ Obtain routine and ongoing care from your primary care provider in an office setting
- ◆ Obtain referrals before receiving specialty and non-emergent care from providers other than your Iowa Wellness Plan provider
- ◆ Contact your Iowa Wellness Plan provider before emergency room visits with the exception of situations requiring emergency care. (See page 11 for the definition of emergency situations.)
- ◆ Carry your current medical assistance card at all times and present it when accessing medical care
- ◆ Notify your caseworker or income maintenance worker if you move or have incorrect information printed on your medical card. Your caseworkers contact information is provided on your notice of eligibility.
- ◆ Be responsible for any medical bills if you do not present your medical card at the time of your visit or if you do not have appropriate referrals/authorization from your Iowa Wellness Plan provider
- ◆ Be responsible for any medical bills for services provided by a practitioner who is not participating in the Iowa Wellness Plan OR for HMO enrollees, seeing a provider not contracted with the HMO without the express permission of the HMO
- ◆ Not allow your medical card or member identification number to be used by anyone else
- ◆ Report if you suspect that someone is misusing their Medicaid benefits or someone who is not your provider requests your Medicaid information. Please call the Iowa Department of Human Services (DHS) at 1-800-831-1394, Monday through Friday 7:00 am until 6:00 pm to let DHS know about the matter.

Appeals and Grievances

You Have the Right to Appeal

What is an appeal?

An **appeal** is asking for a hearing because you do not like a decision the Department of Human Services (DHS) makes. You have the right to file an appeal if you disagree with a decision. You do not have to pay to file an appeal. [441 Iowa Administrative Code Chapter 7]

How do I appeal?

Filing an appeal is easy. You must appeal in writing by doing **one** of the following:

- Complete an appeal electronically at <https://dhssecure.dhs.state.ia.us/forms/>, **or**
- Write a letter telling us why you think a decision is wrong, **or**
- Fill out an Appeal and Request for Hearing form. You can get this form at your county DHS office.

Send or take your appeal to the Department of Human Services, Appeals Section, 5th Floor, 1305 E Walnut Street, Des Moines, Iowa 50319-0114. If you need help filing an appeal, ask your county DHS office.

How long do I have to appeal?

You have 90 calendar days to file an appeal from the date of a decision. If you file an appeal 90 days after the date of a decision, we cannot give you a hearing.

Can I continue to get benefits when my appeal is pending?

You may keep your benefits until an appeal is final or through the end of your certification period if you file an appeal:

- Within 10 calendar days of the date the notice is received. A notice is considered to be received 5 calendar days after the date on the notice or
- Before the date a decision goes into effect

Any benefits you get while your appeal is being decided may have to be paid back if the Department's action is correct.

How will I know if I get a hearing?

You will get a hearing notice that tells you the date and time a telephone hearing is scheduled. You will get a letter telling you if you do not get a hearing. This letter will tell you why you did not get a hearing. It will also explain what you can do if you disagree with the decision to not give you a hearing.

Can I have someone else help me in the hearing?

You or someone else, such as a friend or relative can tell why you disagree with the Department's decision. You may also have a lawyer help you, but the Department will

not pay for one. Your county DHS office can give you information about legal services. The cost of legal services will be based on your income. You may also call Iowa Legal Aid at 1-800-532-1275. If you live in Polk County, call 515-243-1193.

Policy Regarding Discrimination, Harassment, Affirmative Action and Equal Employment Opportunity

It is the policy of the Iowa Department of Human Services (DHS) to provide equal treatment in employment and provision of services to applicants, employees and clients without regard to race, color, national origin, sex, sexual orientation, gender identity, religion, age, disability, political belief or veteran status.

If you feel DHS has discriminated against or harassed you, please send a letter detailing your complaint to:

Iowa Department of Human Services, Hoover Building, 5th Floor – Policy Bureau, 1305 E Walnut, Des Moines, IA 50319-0114 or via email contactdhs@dhs.state.ia.us

You Have the Right to Submit a Grievance

What is a grievance?

A Grievance is a complaint involving access to care, quality of care, or communication issues with your primary care physician.

If you want to file a complaint involving access to care, quality of care, communication issues with your primary care provider, or unpaid medical bills and you are enrolled in an HMO, please contact the HMO and work through their grievance process. If you feel that the HMO is not acting on your complaint, you may contact the Member Services Call Center at 1-800-338-8366 toll free or 515-256-4606 in the Des Moines area.

If you want to file a complaint involving access to care, quality of care, communication issues with your primary care provider, or unpaid medical bills and you are enrolled in the Iowa Wellness Plan, please contact the Member Services Call Center at 1-800-338-8366 toll free or 515-256-4606 in the Des Moines area.

Questions

If you have questions about Iowa Medicaid or the Iowa Wellness Plan, you may contact the Member Services call center. If you have questions about the HMO, you may contact the HMO 24-hour phone number listed below.

Important Contact Information

Use this page to keep track of important phone numbers for all your health care needs. Keep this near your phone for use in contacting the right people to help you with your health care.

Member Services Call Center

Toll Free: 1-800-338-8366

In the Des Moines area: 515-256-4606

Email: IMEMemberServices@dhs.state.ia.us

Hours of operation: Monday through Friday 8:00 am to 5:00 pm

Dental Wellness Plan

Toll Free: 1-888-472-2793 (Monday through Friday 7:30 am to 5:00 pm)

Mental Health and Substance Abuse

Toll Free: 1-800-317-3738 (24 hours per day)

Health Maintenance Organization (HMO)

Toll Free: 1-877-204-9132 (24 hours per day)

Iowa Wellness Plan

Primary Care Provider: _____

Hospital: _____

Emergency: _____

911

Website: www.dhs.iowa.gov/ime/member

Email: IMEMemberServices@dhs.state.us