

**INFORMATIONAL LETTER NO. 2638-MC-FFS**

**DATE:** April 18, 2025

**TO:** All Iowa Medicaid Home Health Care Providers and Home Health Agency

**APPLIES TO:** Managed Care (MC) and Fee-for-Service (FFS)

**FROM:** Iowa Department of Health and Human Services (HHS),  
Iowa Medicaid

**RE:** Prior Authorization (PA) for Home Health Care Services (HHCS) –  
Five (5) Visits

**EFFECTIVE:** July 1, 2025

The purpose of this Informational Letter (IL) is to provide formal guidance regarding Home Health Care Services (HHCS) prior authorizations (PAs).

The managed care organizations (MCOs), (Iowa Total Care, Molina Healthcare of Iowa and Wellpoint Iowa, Inc.) are all in alignment for HHCS providers to submit the PAs up to and including the first five (5) visits.

As per All Providers IV. Billing Iowa Medicaid provider manual, section L. Prior Authorization:

“When Medicaid requires an item or service to have prior authorization, providers must submit a request for prior authorization to Medicaid before billing”

The first five (5) homecare visits are intended to meet the initial needs of the member per the ordering provider orders and create the members Plan of Care. (See Plans of Care Requirements in the Home Health Services Chapter III. Provider-Specific Policies, provider manual).

In accordance with this formal guidance, the first five (5) HHCS visits may be a combination of any of the disciplines attending to the member but not the first five (5) visits of each discipline.

The first five (5) visits do not require any retro authorization. Submitting claims after the first five (5) visits without a PA will result in a claim denial.

The following procedure codes are those that may be used in any combination of the first five (5) visits, after which the PA must be submitted.

<b>CPT Code</b>	<b>Description</b>
<b>G0299</b>	RN Direct Care, Home Health
<b>G0300</b>	LPN Direct Care, Home Health
<b>G0158</b>	OT Assistant, Home Health
<b>G0159</b>	PT, Home Health
<b>G0160</b>	OT, Home Health
<b>G2168</b>	PT Assistant, Home Health
<b>G2169</b>	OT Assistant, Home Health
<b>G0151</b>	PT, Home Health
<b>G0152</b>	OT, Home Health
<b>G0153</b>	SLP or ST, Home Health
<b>G0156</b>	Home Health Aide, Home Health
<b>G0161</b>	SLP, Home Health

If you have questions, please contact Iowa Medicaid Provider Services or the appropriate managed care organization (MCO):

**Iowa Medicaid Provider Services:**

- Phone: 1-800-338-7909
- Email: [imeproviderservices@hhs.iowa.gov](mailto:imeproviderservices@hhs.iowa.gov)

**Managed Care Organizations (MCOs):**

**Iowa Total Care:**

- Phone: 1-833-404-1061
- Email: [providerrelations@iowatotalcare.com](mailto:providerrelations@iowatotalcare.com)
- Website: <https://www.iowatotalcare.com>

**Molina Healthcare of Iowa:**

- Phone: 1-844-236-1464
- Email: [iaproviderrelations@molinahealthcare.com](mailto:iaproviderrelations@molinahealthcare.com)
- Website: <https://www.molinahealthcare.com/providers/ia/medicaid/home.aspx>
- Provider Portal: <https://www.availity.com/molinahealthcare>

**Wellpoint Iowa, Inc.:**

- Phone: 1-833-731-2143
- Email: [ProviderSolutionsIA@wellpoint.com](mailto:ProviderSolutionsIA@wellpoint.com)
- Website: <https://www.provider.wellpoint.com/iowa-provider/home>