

Iowa Health Link Managed Care Organization Change

Only fill out this form if you wish to change your MCO.

Once you're approved for Medicaid, you are automatically enrolled in a Managed Care Organization (MCO) or qualify for a Fee-for-Service (FFS) program.

Members have 90 days from their initial enrollment date to change MCO's, and then once a year after that to change MCOs for any reason by completing this form. No need to complete if you are satisfied with your current MCO.

Name of Person to Enroll*	Date of Birth* (MM/DD/YYYY)	ID Number*	Check One MCO*
			<input type="radio"/> Amerigroup Iowa, Inc. <input type="radio"/> Iowa Total Care <input type="radio"/> Molina Healthcare
			<input type="radio"/> Amerigroup Iowa, Inc. <input type="radio"/> Iowa Total Care <input type="radio"/> Molina Healthcare
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			<input type="radio"/> Amerigroup Iowa, Inc. <input type="radio"/> Iowa Total Care <input type="radio"/> Molina Healthcare

Reason for changing your MCO: _____

Your name*

Your address: Street, City, Zip Code*

Your phone number

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

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.