



300 Corporate Center Drive
Suite 600
Camp Hill, PA 17011



Dear PA Health & Wellness Provider,

This letter shall serve as your official notification that effective April 1, 2021 PA Health & Wellness will reimburse gloves (A4927) at 100% of the PA Medicaid Fee Schedule. This rate adjustment will be in effect for 90 days. To receive appropriate reimbursement please ensure that you include the full \$8.00 amount when submitting your claims. PA Health & Wellness will reevaluate this rate increase after 60 days.

If you have any questions regarding this rate adjust, please contact us at
LTSS_PHW_Provider_Group@PaHealthWellness.com.

Thank you for your continued partnership,

PA Health & Wellness

1-844-626-6813

TTY/PA Relay 1-844-349-8916

PAHealthWellness.com